

Acct# _____

LATROBE FEDERAL CREDIT UNION

1812 Ligonier Street • Latrobe, PA 15650
Phone: 724-537-2734 • Fax: 724-537-4488

Amt. Requested _____

Loan Purpose _____

APPLICATION FOR LOAN

Payroll Deduction: Yes No

Insurances: Yes No

Name of Applicant (print name) _____ Street _____ City _____ State _____ Zip _____
Social Security # _____ Date of Birth _____ Home Phone # _____ Cell Phone # _____

Are you relying on income from another person to repay this loan?

No Yes Name _____ Relationship _____

Address _____ Home Phone # _____

I am indebted to the following creditors (List all debts such as doctor bills, real estate, automobile, repairs, furniture, installments, loans, etc. Attach additional sheet if necessary):

Indicate with an "X" those obligations you will pay with the proceeds of this loan.

To Whom Owed (Name & Address)	Original Amount	Monthly Payment	Balance

Number of dependents (Exclude self) _____

Are you liable for alimony, child support or separate maintenance payments? No Yes \$ _____/Month

Employer _____

Address _____

Date Employed _____

Position _____ Office Phone _____

Weekly/Monthly Salary \$ _____

Previous Employer _____

Length of Service _____

Other personal income (do **not** include alimony, child support or separate maintenance payments) \$ _____ Source _____

\$ _____ Source _____

You need not disclose the following sources of income; but if you want the credit union to consider such income in connection with this loan application, please complete the following:

Alimony \$ _____ Child Support \$ _____

Separate Maintenance Payments \$ _____

Complete the following only if you have chosen to disclose alimony, child support, or separate maintenance income:

Person Liable _____

Address _____

Employer _____

Address _____

Date employed _____ Position _____

Weekly/Monthly Salary \$ _____

How long have alimony, child support or separate maintenance payments been made? _____

Are all payments up to date? Yes No

Auto Owned, Make _____

Year _____ Ser. or Mtr. No. _____

2nd Auto Owned, Make _____

Year _____ Ser. or Mtr. No. _____

Drivers License Number _____ State _____

Real Estate owned at reasonable market value \$ _____

Mortgage Co. _____

Mortgage Payment \$ _____ with Insurance and Taxes

Mortgage Payment \$ _____ without Insurance and Taxes

Location of property _____

Name of Landlord _____ Monthly Rent \$ _____

List all addresses for past five years

Parents or nearest relative (Not spouse)

Name _____ (Relationship) _____

Address _____

Phone _____

Have you any Judgments, Garnishments, or Legal Proceedings against

you? _____. If "Yes" explain _____

Have you ever been through Bankruptcy? _____ Year _____

Are you a comaker/guarantor on any other loans? _____

Amount \$ _____

If so, for whom _____

PLEASE RETURN APPLICATION ALONG WITH PROOFS OF INCOME (W2 AND RECENT PAY STUB) TO CREDIT UNION.

I hereby certify that all statements made are true and complete and submitted for the purpose of obtaining credit. I have no other debts. The credit union is authorized to check my credit and employment history.

Signature _____ Date _____