

Application and Plan Signature PLUS

1 NOTE AND COMPLETE

Married Applicants may apply for a separate account. Check the appropriate box to indicate Individual Credit or Joint Credit.

Individual Credit: Complete **Applicant** section. Complete **Co-Applicant, Spouse, Guarantor** (referred to as "other") section: (1) about your spouse if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI), or (2) if your spouse will use the Account, or (3) if there is a guarantor on this account. Please check box to indicate whom the information is about.

Joint Credit: Provide information about both of you by completing **Applicant** and **Other** section.

Please read the agreements for the services available to you through America's Christian Credit Union and then check the box(es) below to indicate the services you are applying for:

LOANLINER Account LOANLINER Share Draft/Overdraft Line of Credit

Amount Requested \$ _____

Purpose: _____

Member of: _____ Church City: _____ State: _____

2 APPLICANT INFORMATION

APPLICANT

CO-APPLICANT **SPOUSE** **GUARANTOR**

Referred to as "Other" Use "SAA" if information is "Same as Applicant"

NAME (Last - First - Initial)	
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER
BIRTH DATE	HOME PHONE BUSINESS PHONE/EXT.
PRESENT ADDRESS (Street - City - State - Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS
PREVIOUS ADDRESS (Street - City - State - Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single, Divorced, Widowed)	
LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)	

NAME (Last - First - Initial)	
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER
BIRTH DATE	HOME PHONE BUSINESS PHONE/EXT.
PRESENT ADDRESS (Street - City - State - Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS
PREVIOUS ADDRESS (Street - City - State - Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single, Divorced, Widowed)	
LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (Exclude Self)	

3 EMPLOYMENT INFORMATION

NAME AND ADDRESS OF EMPLOYER	
POSITION	SUPERVISOR'S NAME
START DATE	HOURS AT WORK IF SELF EMPLOYED, TYPE OF BUSINESS
IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS	
STARTING DATE	ENDING DATE

NAME AND ADDRESS OF EMPLOYER	
POSITION	SUPERVISOR'S NAME
START DATE	HOURS AT WORK IF SELF EMPLOYED, TYPE OF BUSINESS
IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS	
STARTING DATE	ENDING DATE

4 INCOME INFORMATION

NOTICE: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered.

EMPLOYMENT INCOME	OTHER INCOME
\$	\$
PER	PER
<input type="checkbox"/> NET <input type="checkbox"/> GROSS	SOURCE

NOTICE: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered.

EMPLOYMENT INCOME	OTHER INCOME
\$	\$
PER	PER
<input type="checkbox"/> NET <input type="checkbox"/> GROSS	SOURCE

5 REFERENCES

Please include Street, City, State and Zip.

BANK/S&L/CREDIT UNION	<input type="checkbox"/> CHECKING
	<input type="checkbox"/> SAVINGS
BANK/S&L/CREDIT UNION	<input type="checkbox"/> CHECKING
	<input type="checkbox"/> SAVINGS
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	
RELATIONSHIP	HOME PHONE
NAME AND ADDRESS OF PERSONAL FRIEND - NOT A RELATIVE	
PHONE	

BANK/S&L/CREDIT UNION	<input type="checkbox"/> CHECKING
	<input type="checkbox"/> SAVINGS
BANK/S&L/CREDIT UNION	<input type="checkbox"/> CHECKING
	<input type="checkbox"/> SAVINGS
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	
RELATIONSHIP	HOME PHONE
NAME AND ADDRESS OF PERSONAL FRIEND - NOT A RELATIVE	
PHONE	

APPLICANT

OTHER (CO-APPLICANT, SPOUSE, GUARANTOR)

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ASSETS

Check box for Applicant/Other. List all assets and account number(s)- Attach other sheets if necessary.

SHARE DRAFT OR CHECKING AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY	SHARE DRAFT OR CHECKING AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY		
SAVINGS AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY	SAVINGS AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY		
APPLICANT <input type="checkbox"/> OTHER	LIST HOME AND ALL OTHER ITEMS YOU OWN AND LOCATION OF PROPERTY For example: Auto, Boat, Stocks, Bonds, Cash, Household Goods, Real Estate, etc.	MARKET VALUE	PLEGGED AS COLLATERAL FOR ANOTHER LOAN		
HOME			\$	YES	NO
			\$	YES	NO
		\$	YES	NO	

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DEBTS

In addition to Rent/Mortgage list all other debts (for example, auto loans, credit cards, second mortgage, home assoc. dues, alimony, child support, child care, medical, utilities, auto insurance, IRS liabilities, etc.) Please use a separate line for each credit card and auto loan. Attach other sheets if necessary.

APPLICANT <input type="checkbox"/> OTHER	CREDITOR NAME AND ADDRESS	PRESENT BALANCE	MONTHLY PAYMENT	AMOUNT PAST DUE
<input type="checkbox"/> RENT <input type="checkbox"/> MORTGAGE (Incl. Tax & Ins.)		\$	\$	\$
<input type="checkbox"/> AUTO LOAN		\$	\$	\$
<input type="checkbox"/> AUTO LOAN		\$	\$	\$
<input type="checkbox"/> CREDIT UNION		\$	\$	\$
<input type="checkbox"/> CREDIT UNION		\$	\$	\$
<input type="checkbox"/> CREDIT UNION		\$	\$	\$
<input type="checkbox"/> CREDIT CARDS - CHARGE ACCTS		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
ARE ALL DEBTS LISTED? <input type="checkbox"/> YES <input type="checkbox"/> NO				
DO YOU PAY ALIMONY/CHILD SUPPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO		\$	\$	\$
ARE YOU UP-TO-DATE ON PAYMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO				
DO YOU PAY CHILD CARE? <input type="checkbox"/> YES <input type="checkbox"/> NO		\$	\$	\$
LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCE AND CREDIT HISTORY CAN BE CHECKED				
TOTALS		\$	\$	\$

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FINANCIAL INFORMATION

These questions apply to both Applicant and Other.

IF A "YES" ANSWER IS GIVEN TO A QUESTION, EXPLAIN ON AN ATTACHED SHEET

DO YOU HAVE ANY OUTSTANDING JUDGEMENTS? _____

HAVE YOU EVER FILED FOR BANKRUPTCY OR HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13? _____

HAVE YOU HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST 7 YEARS? _____

HAVE YOU HAD A PREVIOUS LOAN UNDER A DIFFERENT NAME? _____

ARE YOU OTHER THAN A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN? _____

IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS? _____

ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE? _____

FOR WHOM (Name of Others Obligated on Loan): _____ TO WHOM (Name of Creditor): _____

APPLICANT		OTHER	
YES	NO	YES	NO

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PLEASE READ AND SIGN BELOW

1. You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any important changes, you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA.

2. You have received and read the LOANLINER Credit/Security Agreement, including the Addendum "Agreement") and Borrower Copy of the LOANLINER Credit/Security Agreement PLUS and Voluntary Payment Protection. By signing below you agree to be bound by the terms of the Agreement.

3. You grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure what you owe under the LOANLINER Credit/Security Agreement. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. Shares and deposits in an Individual Retirement Account, and any other account that would lose special tax treatment under state or federal law if given as security, are not subject to the security interest you have given in your shares and deposits.

4. **GUARANTOR:** If you are signing as a Guarantor, you agree to paragraph one (1) and the terms of the Guaranty Agreement. Any Guarantor that signs this application is signing only as a Guarantor and not as a borrower under the plan. A Guarantor is not eligible for Payment Protection.

X

APPLICANT'S SIGNATURE

X

DATE OTHER SIGNATURE

		Date
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MEMBER'S CHOICE™ BORROWER SECURITY CONTRACT

MEMBER'S CHOICE™ Borrower Security (referred to as "the program") is voluntary and not required in order to obtain credit. We will not consider whether or not you elect MEMBER'S CHOICE™ Borrower Security in making our credit decision.

COVERED LOAN

LOAN NUMBER:

OPTIONS												
YOU ELECT: (check only one box)	<input type="checkbox"/>	Option 1 - Loss of Life - Disability - Involuntary Unemployment - Family Leave	<input type="checkbox"/>	Option 2 - Loss of Life - Disability - Family Leave	<input type="checkbox"/>	Option 3 - Disability - Involuntary Unemployment - Family Leave	<input type="checkbox"/>	Option 4 - Loss of Life - Family Leave	<input type="checkbox"/>	Option 5 - Disability - Family Leave	<input type="checkbox"/>	No Protection
Cost per \$100 of the Monthly Outstanding Loan Balance*												

*If the outstanding loan balance is greater than \$100,000, the rate will not be applied to the amount that exceeds \$100,000.

The program contains certain terms and exclusions. Subject to those terms and conditions, which you should read carefully, you are eligible for the program if you are a borrower on the loan.

One important condition to your ability to have your loan payment canceled/postponed due to Disability, Involuntary Unemployment, and Family Leave is that you must be actively working for income 25 hours or more per week when you become disabled, become involuntarily unemployed, or take a family leave.

The program protects the first two borrowers listed on the lending agreement.

The protected borrower(s) may not qualify for all benefits.

Your signature below means:

- Your election above will remain in effect, according to the terms of the MEMBER'S CHOICE™ Borrower Security Contract, unless subsequently modified.
- You agree that you have received and thoroughly read the MEMBER'S CHOICE™ Borrower Security Contract.
- You authorize the program fee to be added to your outstanding balance each month.

X	
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BORROWER 1 SIGNATURE

DATE

X	
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BORROWER 2 SIGNATURE

DATE