



2100 E. Route 66
P.O. Box 5100
Glendora, CA 91740-0808
1-800-343-6328



Application

1 NOTE AND COMPLETE

Married Applicants may apply for a separate account.

NOTICE TO OHIO APPLICANTS: The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

- Individual Credit:** Complete **Applicant** section. Complete **Co-Applicant, Spouse**, (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. Please check box to indicate whom the information is about.
- Joint Credit:** Each Applicant must **individually** complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

Amount Requested \$ _____ Purpose: _____

Repayment: Payroll Deduction Cash Automatic Payment Military Allotment _____

STATEMENT OF INTENT

Are you interested in having your loan protected? Yes No
If you answer "yes", then the credit union will disclose the cost of this voluntary payment protection to you. A separate election which discloses the terms and conditions must be signed for protection to be effective.

2 APPLICANT INFORMATION

APPLICANT

| | | |
|--|------------------------|---------------------|
| NAME (Last - First - Initial) | | |
| DRIVER'S LICENSE NUMBER/STATE | | |
| ACCOUNT NUMBER | SOCIAL SECURITY NUMBER | |
| BIRTH DATE | HOME PHONE | BUSINESS PHONE/EXT. |
| PRESENT ADDRESS (Street - City - State - Zip) | | LENGTH AT RESIDENCE |
| <input type="checkbox"/> OWN <input type="checkbox"/> RENT | | |
| PREVIOUS ADDRESS (Street - City - State - Zip) | | LENGTH AT RESIDENCE |
| <input type="checkbox"/> OWN <input type="checkbox"/> RENT | | |
| 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) | | |

CO-APPLICANT SPOUSE

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

| | | |
|--|------------------------|---------------------|
| NAME (Last - First - Initial) | | |
| DRIVER'S LICENSE NUMBER/STATE | | |
| ACCOUNT NUMBER | SOCIAL SECURITY NUMBER | |
| BIRTH DATE | HOME PHONE | BUSINESS PHONE/EXT. |
| PRESENT ADDRESS (Street - City - State - Zip) | | LENGTH AT RESIDENCE |
| <input type="checkbox"/> OWN <input type="checkbox"/> RENT | | |
| PREVIOUS ADDRESS (Street - City - State - Zip) | | LENGTH AT RESIDENCE |
| <input type="checkbox"/> OWN <input type="checkbox"/> RENT | | |
| 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 | | |
| YOUR TITLE/GRADE | 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 | |
| IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| WHERE | | |
| ENDING/SEPARATION DATE | | |

| | | |
|---|-------------------|------------------------------------|
| NAME AND ADDRESS OF EMPLOYER | | |
| YOUR TITLE/GRADE | 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 | |
| IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| WHERE | | |
| ENDING/SEPARATION DATE | | |

MILITARY

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.

| | |
|--|------------|
| NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | |
| RELATIONSHIP | HOME PHONE |
| NAME AND ADDRESS OF PERSONAL FRIEND - NOT A RELATIVE | |
| HOME PHONE | |

| | |
|--|------------|
| NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | |
| RELATIONSHIP | HOME PHONE |
| NAME AND ADDRESS OF PERSONAL FRIEND - NOT A RELATIVE | |
| HOME PHONE | |

