Consumer Loan Application

PrimeSource Credit Union PO Box 48275 Spokane, WA 99228

TYPE OF ACCOUNT REQUESTED							
YOU AND YOURS MEANS APPLICANT & CO-APPLICANT. Please check the appropriate box.							
Individual. Complete "Applicant" Section if you are applying for an individual account in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested.							
Complete all Sections if you are applying for an individual account, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, providing information in the Co-Applicant Section about the person on whose alimony, support, or maintenance payments or income of assets you are relying. If you reside in a community property state or income is derived from a community property state, all Sections of the application should be completed.							
☐ Joint. Complete all Sections if you	are applying for a joint account	or an account that you and anoth	er person will use.				
☐ Consumer Loan Amount Re	equested: \$						
☐ Line of Credit Amount Re	equested: \$						
APPLICANT INFORMATI	ON						
Applicant's Name			Member Number				
Social Security #	Date of Birth	Driver's License Numbe	r	State			
Physical Address: Street, City, S	Т	Time At This Address					
Mailing Address if Different Than Physical Address			N	Number In Household			
Phone Numbers Home #	Work #	Cell #	E	Email Address			
Please Indicate Marital Status If You Reside In a Community Property State: AZ, CA, ID, LA, NM, NV, TX, WA, WI Married Separated Unmarried							
Borrower's Present Employer	Borrower's Present Employer If Self-Employed or Commissioned, Please Submit Full Copies of Last Two Years Income Tax Returns. Gross Monthly Income \$ Hired Date						
Employer Address		,					
Additional Income Source: Monthly Amount \$ Income from alimony, child support, or separate maintenance payments need not be revealed if you do not wish us to consider it.							
CO-APPLICANT INFORMATION							
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Co-Applicant's Name	IATION		Member Number				
	Date Of Birth	Driver's License Numbe		State			
Co-Applicant's Name	Date Of Birth	Driver's License Numbe	r S	State Time At This Address			
Co-Applicant's Name Social Security Number	Date Of Birth State, And Zip	Driver's License Numbe	r S				
Co-Applicant's Name Social Security Number Physical Address: Street, City, S	Date Of Birth State, And Zip	Driver's License Numbe	r S	ime At This Address			
Co-Applicant's Name Social Security Number Physical Address: Street, City, S Mailing Address If Different Than Phone Numbers Home # Please Indicate Marital Status If	Date Of Birth State, And Zip Physical Address Work #	Cell #	r S	Time At This Address Number in Household Email Address			
Co-Applicant's Name Social Security Number Physical Address: Street, City, S Mailing Address If Different Than Phone Numbers Home # Please Indicate Marital Status If	Date Of Birth State, And Zip Physical Address Work # You Reside In a Communicated If Self-Entering Income Talentees	Cell # unity Property State: AZ, Unmarried	T N E CA, ID, LA, NM, NV, T d, Please Submit Full	Time At This Address Number in Household Email Address			
Co-Applicant's Name Social Security Number Physical Address: Street, City, S Mailing Address If Different Than Phone Numbers Home # Please Indicate Marital Status If Married Se	Date Of Birth State, And Zip Physical Address Work # You Reside In a Communicated If Self-Entering Income Talentees	Cell # unity Property State: AZ, Unmarried unployed or Commissioned ax Returns.	T N E CA, ID, LA, NM, NV, T d, Please Submit Full	Time At This Address Number in Household Email Address X, WA, WI Copies of Last Two Years			
Co-Applicant's Name Social Security Number Physical Address: Street, City, S Mailing Address If Different Than Phone Numbers Home # Please Indicate Marital Status If Married Se Co-Borrower's Present Employer Employer Address Additional Income	Date Of Birth State, And Zip Physical Address Work # You Reside In a Communicated If Self-Entering Income Talentees	Cell # Inity Property State: AZ, Unmarried Inployed or Commissione In Returns. Inthly Income \$	T N E CA, ID, LA, NM, NV, T d, Please Submit Full	Time At This Address Number in Household Email Address X, WA, WI Copies of Last Two Years			
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Housing: Landlord/Mortgage Co. Property Taxes Included? Yes	LIABILITIES If Insufficient Space, Attach Additional Sheet Describing Additional Assets and Debts. Loan Decision May Be Adversely Affected If All Debt Information is Not Listed.								
Monthly Payment Balance Owing S S S S S S S S S			Monthly Payment		e Owing				
Creditor Monthly Payment Balance Owing \$ In The Past 10 Ym, Have You Filed a Bankruptcy Schedule Applicant Co-Applicant Institute Control of the	2 nd Mortgage and/or Taxes	Monthly Payment \$	Balance Owing						
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\$ In The Past 10 Yrs. Have You Filed a Bankruptcy Petition? If Yes, Submit Bankruptcy Schedule And Dislosure. (V/N) Have You Had Property Foreclosed Upon or Given Title or Deed in Like There in The Last 7 Years? (V/N)? Have You Any Outstanding Judgments (Y/N)? Are You A Darty In A Lawsuit (V/N)? Are You A Party In A Lawsuit (V/N)? **If A Yes Answer Is Given To A Question, Explain On An Attached Sheet ** **CONSUMER LOAN APPLICATION SIGNATURES* By signing below, you certify that the information on this Application; (b) that the Credit Union can led lothers about its credit experience with you and receive information on this Application; (b) that the Credit Union can led lothers about its credit experience with you and receive information on this Application; (b) that the Credit Union can led lothers about its credit experience with you and receive information from others about your credit history and performance; and (c) that you will give the Credit Union your new address if you move and that all notices and statements from the Credit Union may be sent to the address(es) shown on this Application or an address correction received from the U.S. Postal Service for any applicant or authorized user. Signature by two persons below indicates intent to apply for joint credit. **BORROWER** **DATE** **CREDIT INSURANCE/PAYMENT PROTECTION** **PayMENT PROTECTION IS OPTIONAL AND VOLUNTARY AND NOT A CONDITION FOR OBTAINING A LOAN OR LINE OF CREDIT. Are you interested in having your loan protected? YES NO If you answer YES, PrimeSource Credit Union will disclose the cost of this voluntary payment protection to you. A separate election	Creditor	Monthly Payment	Balance Owing						
Petition? If Yes, Submit Bankruptcy Schedule And Disclosure. (Y/N) Have You Had Property Foreclosed Upon or Given Title to Deed In Lieu Thereof In The Last 7 Years? (Y/N)? Have You Any Outstanding Judgments (Y/N)? Have You Any Outstanding Judgments (Y/N)? Have You Any Outstanding Judgments (Y/N)? For (Name Of Creditor) Whom \$ salance Monthly Pmt. Are You A Party In A Lawsuit (Y/N)? Are You A Party In A Lawsuit (Y/N)? To (Name Of Creditor) Whom \$ \$ Are You Other Than A U.S. Citizen Or Permanent Resident Allen (Y/N)? * If A Yes Answer Is Given To A Question, Explain On An Attached Sheet ** ** ** ** ** ** ** ** **	Creditor								
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