

Billerica Municipal Employees Credit Union

CREDIT UNION

I hereby make application for a loan of \$ _____ for a period of _____ months.

Purpose _____

I am applying individually , jointly with (Name) _____

I am a cosigner for (Borrower's Name) _____

If loan is for motor vehicle, indicate Year _____ (New/ Used) Make _____ Price \$ _____

CREDIT APPLICATION
(Each applicant should complete separate application.)

NAME (PLEASE PRINT)				DATE OF BIRTH	SOCIAL SECURITY NO.
ADDRESS	STREET	TOWN	ZIP CODE	HOW LONG?	HOME TELEPHONE

MAILING ADDRESS, IF DIFFERENT _____

(If at present address less than 5 years list previous address(es) below.)				HOW LONG?
PREVIOUS _____				HOW LONG?
PREVIOUS _____				HOW LONG?

NO. OF DEP.	Explain applicant liable for alimony, child support or separate maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	MONTHLY PAYMENT \$
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EMPLOYER	HOW LONG?	POSITION
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ADDRESS	PHONE EXT.	MONTHLY/WEEKLY GROSS INCOME \$
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(If at present employment less than 5 years, list previous employments below.)

PREVIOUS EMPLOYER	HOW LONG?	POSITION
PREVIOUS EMPLOYER	HOW LONG?	POSITION

SOURCE OF OTHER INCOME FROM SALARY, WAGES OR INVESTMENTS	AMOUNT \$
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Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Does applicant derive income from alimony, child support or separate maintenance? (NOTE: SUCH SOURCE OF INCOME NEED NOT BE REVEALED IF APPLICANT CHOOSES NOT TO PROVIDE IT.)	MONTHLY INCOME \$
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NAME OF BANK HOLDING MORTGAGE ON HOME	ACCOUNT NUMBER	IN WHOSE NAME?
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MARKET VALUE \$	TAXES CURRENT YEAR \$	ORIG. AMT. MORTGAGE \$	BALANCE \$	PAYMENT \$
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IF RENTING - NAME OF LANDLORD	MONTHLY RENT \$
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ADDRESS	PHONE
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MY SAVINGS ACCOUNT	AMOUNT	CHECKING ACCOUNT
NAME OF BANKS		BANK

LIST ALL DEBT AND/OR REFERENCES - FAILURE TO LIST OUTSTANDING LOANS MAY DISQUALIFY REQUEST

TO WHOM OWED - ADDRESS	ACCOUNT NO.	DATE INCURRED	ORIG. AMT.	UNPAID BALANCE	PAYMENT AMT.
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
AUTO FINANCE			\$	\$	\$
REFERENCE OF PAID UP CREDIT				WHEN PAID	

NAME AND ADDRESS OF NEAREST RELATIVE	RELATIONSHIP
	PHONE

The statements herein are made for the purpose of obtaining the loan, and are true. I understand that failure to list any outstanding debt may disqualify the request. I hereby authorize the Credit Union or any credit bureau or other investigative agency employed by the Credit Union, to legally investigate any references herein listed or statements or other data pertaining to my credit and financial responsibility.

DATE _____ SIGNATURE _____

CREDIT COMMITTEE APPROVAL: On _____, we approved the within loan for \$ _____
Approved by the Credit Committee

	Approved By _____ Loan Officer
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