

ST JOSEPH MEDICAL CENTER MD FEDERAL CREDIT UNION

7601 Osler Drive
Towson, MD 21204
Phone (410) 337-1319
Fax (410) 337-1303

Loan Application

HOW TO APPLY

- Please complete the application
- Sign on the last page
- Return completed application to the credit union
- Submit with a current pay stub
- An incomplete or unsigned application may delay processing

Loan Information	
Type of Loan (Chose One)	<input type="checkbox"/> New or Used Car <input type="checkbox"/> Bill Consolidation <input type="checkbox"/> Home Equity <input type="checkbox"/> Share-Secured <input type="checkbox"/> Jiffy Loan <input type="checkbox"/> Other _____
Amount Requested	\$ _____
Applicant	<input type="checkbox"/> Individual <input type="checkbox"/> Joint
Payment Protection	<input type="checkbox"/> Single Credit Disability Insurance <input type="checkbox"/> Single Credit Life Insurance <input type="checkbox"/> Joint Credit Life Insurance

Primary Applicant

Last Name _____ First Name _____ MI _____

Account Number _____ Social Security Number _____

Driver's License Number/ State _____

Date of Birth _____ Mother's Maiden Name _____

Present Address _____

City _____ State _____ Zip _____

Rent Own Years at this address _____ Home phone# _____

Previous Address _____

City _____ State _____ Zip _____

Rent Own Years at this address _____

Marital Status Married Separated Unmarried

List Ages of Dependents _____

Employment/Income

Employer _____

Title/Position _____

Work Phone _____ Start Date _____

Gross Income \$ _____ Hourly Bi-weekly Monthly Annually

Other Income \$ _____ Hourly Bi-weekly Monthly Annually

Source _____
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.

Previous Employer Name and Address if Employed Less than Five Years

Co-Applicant

Last Name _____ First Name _____ MI _____

Account Number _____ Social Security Number _____

Driver's License Number/ State _____

Date of Birth _____ Mother's Maiden Name _____

Present Address _____

City _____ State _____ Zip _____

Rent Own Years at this address _____

Previous Address _____

City _____ State _____ Zip _____

Rent Own Years at this address _____

Marital Status Married Separated Unmarried

List Ages of Dependents _____

Employment/Income

Employer _____

Title/Position _____

Work Phone _____ Start Date _____

Gross Income \$ _____ Hourly Bi-weekly Monthly Annually

Other Income \$ _____ Hourly Bi-weekly Monthly Annually

Source _____

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Previous Employer Name and Address if Employed Less than Five Years

References

Name and Address of Nearest Relative Not Living With You

Relationship _____ Phone _____

Name and Address of Other Relative Not Living With You

Relationship _____ Phone _____

Assets and Debts

Home

Own Rent Live with Parents

Rental Payment \$ _____

First Mortgage Balance \$ _____ Payment Amount \$ _____

Second Mortgage Balance \$ _____ Payment Amount \$ _____

Autos Owned	Year	Make/Model	Balance
Car 1	_____	_____	_____
Car 2	_____	_____	_____

Other Debts	Creditor	Balance
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____

Other Information

If you answer "yes" to any question other than #1, Explain on an attached sheet.

1. Are you a U.S. citizen or permanent resident alien? Yes No
2. Have you ever filed bankruptcy? Yes No
3. Have you had property foreclosure upon or repossessed in the last 7 years? Yes No
4. Are you a co-signor on any other loans not listed above? Yes No
If yes, for whom? _____
Name of Creditor _____
5. Are there any judgments or liens against you? Yes No
6. Is your income likely to decline in the next two years? Yes No

Signatures

You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of what you owe. 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, renewal, or extension 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.

Applicant's Signature

Date

Co-applicant's signature

Date