GOWANDA AREA FEDERAL CREDIT UNION 14266 Taylor Hollow Rd. • PO Box 29 Gowanda, NY 14070 (716) 532-3790 • Fax: (716) 532-4629 www.gafcu.org

## **APPLICATION**

Check below to indicate the type of credit for which you are applying. Married Applicants may apply for a separate account.											
Individual Credit: You must complete the Applicant section about yourself and the Other section about your spouse if  1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI)											
2. your spouse will use the account, or								****			
			nent. If you are relying on income from alimony, child support, or separate								
				about the person on whose payments you are relying.  e section below. If Co-Applicant is spouse of the Applicant, mark the							
Co-Applicant box.			, ,,, .,					,			
Account/Loan: Indiv	_										
If this is an application for joint credit, Applicant and Co-Applicant each agree											
Applicant Signature			Date	Co-Applicant Signature Date							
X			(Seal)	X				(Seal)			
Amount Requested \$				☐Credit Limit Requested \$							
Purpose/Collateral:				Tables							
APPLICANT  NAME (Last - First - Initial)				OTHER CO-APPLICANT SPOUSE GUARANTOR OTHER  NAME (Last - First - Initial)							
				IVAIVIL (Last - Filst - Illitidi)							
ACCOUNT NUMBER SOCIAL SECURITY NUMBER			INDIVIDUAL TAX ID NUMBER	ACCOUNT NUMBER	SOCIAL SECU	SECURITY NUMBER/INDIVIDUAL TAX ID NUMBER					
BIRTH DATE	EMAIL ADDRESS			BIRTH DATE	EMAIL ADDRE	ESS					
HOME PHONE	CELL PHONE		BUSINESS PHONE/EXT.	HOME PHONE	CELL PHONE		BUSINESS P	HONE/EXT.			
DRIVER'S LICENSE NUMBER/	STATE	AGES OF DEP	PENDENTS	DRIVER'S LICENSE NUMBER/	STATE	AGES OF DEF	PENDENTS				
PRESENT ADDRESS (Street -	City – State – Zi	p)	OWN RENT	PRESENT ADDRESS (Street -	City – State – Zi	p)	OWN	RENT			
			LENGTH AT RESIDENCE				LENGTH AT	RESIDENCE			
PREVIOUS ADDRESS (Street – City – State – Zip) OWN RENT			PREVIOUS ADDRESS (Street -	- City - State - Z	ip)	OWN	RENT				
			LENGTH AT RESIDENCE				LENGTH AT	RESIDENCE			
MORTGAGE/RENT OWED TO				MORTGAGE/RENT OWED TO							
MORTGAGE BALANCE	ORTGAGE BALANCE MONTHLY PAYMENT \$			MORTGAGE BALANCE MONTHLY PAYME			_				
COMPLETE FOR JOINT CRED		REDIT OR IF YO	% OU LIVE IN A COMMUNITY								
PROPERTY STATE:  MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)				PROPERTY STATE:  MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)							
EMPLOYMENT/INCOME				EMPLOYMENT/INCOME							
EMPLOYMENT STATUS   FULL TIME   PART TIME   HOURS PER WEEK				EMPLOYMENT STATUS FULL TIME PART TIME HOURS PER WEEK							
START DATE:				START DATE:							
NAME AND ADDRESS OF EMPLOYER				NAME AND ADDRESS OF EMPLOYER							
NOTIOE: ALIMONIV. OLIUD. OL	DDODT OD OF	DADATE MAINT	ENANCE INCOME NEED NOT	NOTIOE: ALIMONIV. CHILD OF	IDDODT OD OF	DADATE MAINIT	ENANCE INC	ME NEED NOT			
<b>NOTICE</b> : ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.			BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.								
EMPLOYMENT INCOME PER OTHER INCOMS \$			ME PER	EMPLOYMENT INCOME PE	R	OTHER INCOME PER \$					
TITLE/GRADE S		SOURCE		TITLE/GRADE		SOURCE					
PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN TWO YEARS			PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN TWO YEARS								
STARTING DATE		ENDING DATE		STARTING DATE	ENDING DATE						
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR?			MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES								
WHERE ENDING/SEPARATION DATE			WHERE		END	ING/SEPARAT	ION DATE				
REFERENCE				REFERENCE							
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU				NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU							
				DEL ATIONOUS	Lucius publis						
RELATIONSHIP		HOME PHONE	•	RELATIONSHIP		HOME PHON	E				

Lender Name:													
WHAT YOU OWE													
DEBT	CREDITOR NAME OTHER THAN THIS CREDIT UNION INTERES				PRESENT BALANCE			MONTHLY PAYMENT			OWED BY		
RENT FIRST MORTGAGE	(Attach addition	onal sheet(s) if necessary)		%	\$	\$				APPLICANT OTH		<u>rher</u>	
(Incl. Tax & Ins.)				%	\$		\$						_
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				%	\$			\$			<u> </u>		#
LIST ANY NAMES UNDER WH	ICH YOUR CREI	DIT REFERENCES	ТОТ	<u>%</u>	\$		\$						
AND CREDIT HISTORY CAN B		SIT REFERENCES	TOT	ALS	\$		\$						
WHAT YOU OWN													
ASSET DESCRIPTION	LIST LOCATION	ON OF PROPERTY OR FINANCIAL INSTIT	UTION	MARK	ET VALUE	ALUE PLEDGED AS COLLATERAI				ADDI	OWNE ICANT	D BY OTH	ED
				\$			YES					OIR	<u>-r</u>
				\$			YES		NO	1 7	_		_
				\$			YES		NO		_		<u> </u>
				\$			YES		NO	Ī			Ī
				\$			YES		NO				
				\$			YES		NO				
				\$			YES		NO				l
OTHER INFORMA	TION ABO	OUT YOU IF YOU ANSWER "YES EXPLAIN ON AN ATTAI		ING TH	E BOX) TO ANY	QUEST	ION OTI	IER TI	IAN #1,	APPL	ICANT	отн	ER
ARE YOU A U.S. CITIZEN		LAI LAIN ON AN ATTA	CHED SHEET							Т	7		
2. DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGMENTS OR HAVE YOU EVER FILED FOR BANKRUPTCY, HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13, HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST SEVEN YEARS, OR BEEN A PARTY IN A										]			
LAWSUIT?  3. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?								Т	1				
4. ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE?  4. ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE?													
FOR WHOM (Name of Oth	ers Obligated on	Loan):								1 [	٦		
TO WHOM (Name of Creditor):													
SIGNATURES													
By signing or otherwise authenticating below, 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, increase, renewal, extension, or collection of the credit received and for other accounts, products, or services we may offer you or for which you may qualify. 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 crime to willfully and deliberately provide incomplete or incorrect information in this application.													
Applicant's Signature Date Other Signature					re						Da	ite	
X		(Sea	) X									(Seal)	)
CREDIT UNION US	SE ONLY												
DATE APPRO	VED	APPROVED LIMITS: SIGNATURE \$	LI \$	NE OF C	REDIT	OTHE	ĒR						
DECLIN	IED on Notice Sent)	DEBT RATIO/SCORE: BEFORE	AFTER										
LOAN OFFICER COMMENTS:													
Credit Committee or Loan C	Officer Signature	s Date	Credi	t Commi	ittee or Loan Offi	cer Sig	natures				Da	ite	1
(Seal) X									(Seal)				