

Olympia Credit Union 202 9th AVE SE Olympia, WA 98501 360 754 5559 or 360 456

CREDIT UNION
Serving Your Community Since 1965

Olympia, WA 98501
360.754.5559 or 360.456.7037 (Lacey)

Married Applicants ma	y apply for a sep	arate	e account. Che	ck the appropriat	e box to indicate Indivi	dual Credit or Joi	nt Cre	edit.			
☐ Individual Credit:	Complete Applicant sections if only the applicant's income is considered for loan approval. Complete Applicant and Co-Applicant sections: (1) if you 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 credit requested, or; (2) if you reside in a Community Property State, or; (3) if you are relying on property located in a Community Property State as a basis for repayment of the credit requested. Community Property States include: AK, AZ, CA, ID, LA, NM, NV, TX, WA, and WI.										
☐ Joint Credit:	Complete Appl i initial below: We intend to ap		• • • • • • • • • • • • • • • • • • • •		your co-applicant will (Applicant Initials)	e for repayment of the loan and					
DI EASE CHECK BEI		. ,	•		(Applicant milials) ND TYPE OF CREDIT		•	Co-Applicant In	,		
☐ Account/Loan:	☐ Individual	_	Joint	10000111(0) A1	AD THE OF OREDIT	TOK WINOII TO	0 7,	CE AIT ETINO.			
_					Amount Requested	\$					
(Including ATM/Debit Card Access to the Account if Available) Purpose/Collateral:					☐ Other Loan Request						
· —	yroll Deduction		Billing Notice	☐ Automatic P	_						
	APPLIC				☐ CO-APPLICANT		IT SPO	OUSE/OTHER	GUARAN	ITOR	
NAME (Last – First – Initial)			ACCOUNT NUMBE	ER	NAME (Last – First – Initial)			ACCOUNT NUMBER			
SOCIAL SECURITY NUMBER			MOTHER'S MAIDE	N NAME	SOCIAL SECURITY NUMBER			MOTHER'S MAIDEN NAME			
E-MAIL ADDRESS			FAX NUMBER		E-MAIL ADDRESS			FAX NUMBER			
BIRTH DATE	HOME PHONE		BUSINESS PHONE	E/EXT	BIRTH DATE	HOME PHONE		BUSINESS PHONE	E/EXT		
PRESENT ADDRESS (Street – City – State – Zip)			OWN R	ENT	PRESENT ADDRESS (Street - City - State - Zip)			OWN RENT			
			YEARS/MONTHS AT THIS ADDRESS	3				YEARS/MONTHS AT THIS ADDRESS	3		
PREVIOUS ADDRESS (Stree	et - City - State - Zip)			-	PREVIOUS ADDRESS (Str	eet – City – State – Zip	o)				
\$			ENT HOME VALUE	:	PURCHASE PRICE OF HOME: PRES \$			SENT HOME VALUE:			
MORTGAGE BALANCE		MONT \$	HLY PAYMENT (M	ORTGAGE/RENT)	MORTGAGE BALANCE		MONTHLY PAYMENT (MORTGAGE \$		RENT)		
PLEASE COMPLETE ONLY OR IF YOU LIVE IN A COMM MARRIED SEPARATED UNMA	IUNITY PROPERTY S	TATE.	·	SECURED CREDIT,	PLEASE COMPLETE ONL OR IF YOU LIVE IN A COM MARRIED SEPARATED UNI		STATE	E.	SECURED	CREDIT,	
_ :	(* 3 * *		,	EMPL	OYMENT	(3.3)					
NAME AND ADDRESS OF E	MPLOYER				NAME AND ADDRESS OF	EMPLOYER					
HIRE DATE		POSIT	ΓΙΟΝ		HIRE DATE		POSI	TION			
PRIOR EMPLOYER					PRIOR EMPLOYER						
				INC	OME						
OTHER INCOME NOT income need not be re-	TICE: Alimony, ch vealed if you do n	ild su not ch	ipport, or separ	ate maintenance considered.	other income not be income need not be in	TICE: Alimony, or revealed if you do	hild s not c	support, or sepa shoose to have i	rate main t conside	tenance red.	
` '			R INCOME (GROS		EMPLOYMENT INCOME (R INCOME (GROS			
EMPLOYMENT INCOME (GROSS) SPER STATEMENT OF THE PROPERTY OF		\$ SOUR	PER		\$ PER \$ SOU			PER URCE			
				REFEI	<u>I</u> RENCES						
NAME AND ADDRESS OF N	EAREST RELATIVE N	NOT LI	VING WITH YOU	HOME NUMBER	NAME AND ADDRESS OF	NEAREST RELATIVE	NOT I	LIVING WITH YOU	HOME NU	MBER	
				RELATIONSHIP	-				RELATION	ISHIP	

WHAT YOU OWE	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)	INTEREST RATE	PRESENT BALANCE		OWED BY APPLICANT			
	(Attach additional sheet(s) if hecessary)	NAIL	\$ \$		11	APPLICA	N I	OTHER
			\$	\$ \$				
			\$	\$				
			\$	\$				
			\$	\$				
			\$	\$				
			\$	\$				
			\$	\$				
			\$	\$				
			\$	\$				
			\$	\$				
			\$	\$				
LIST ANY NAMES UNDER CAN BE CHECKED:	WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY	TOTALS	\$	\$				
WHAT YOU OWN	LIST LOCATION OF PROPERTY OR FINANCIAL INSTITUTION	MARKET VALUE		PLEDGED AS COLLAT	OWE APPLICANT		BY OTHER	
				□ YES □ N	П			
		\$		☐ YES ☐ N	П		$\overline{\Box}$	
			☐ YES ☐ N					
		\$		YES N	10			
	OTHER INFORM	MATION ABO	OUT YOU					
F YOU ANSWER "YES	" TO ANY QUESTION OTHER THAN #1, EXPLAIN ON AN	N ATTACHED	SHEET		APPL	ICANT		OTHER
1. ARE YOU A U.S. CITIZEN OR	PERMANENT RESIDENT ALIEN?				YES	s 🗆 no 🗆		res 🗌 no
2. DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGMENTS OR HAVE YOU EVER FILED FOR BANKRUPTCY, HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER							П	res 🗌 no
CHAPTER 13, HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST 7 YEARS, OR BEEN A PARTY IN A LAWSUIT?								res 🗆 no
3. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?								
 ARE YOU A CO-MAKER, CO- FOR WHOM (Name of Others 	<u> </u>	•			☐ YES	S NO	Г	YES NO
	STAT	E NOTICES						
	': The Ohio laws against discrimination require that all creditor istories on each individual upon request. The Ohio Civil Rights 0				mers, and	d that credi	it repoi	rting agencies
WISCONSIN RESIDENT	TS: Marital Status: ☐ Married ☐ Unmarried	☐ Legall	y Separated					
If married: the name of	ny spouse is							
Spouse's SSN:	Spouse's Address (if o							
Notice: No provision of	any marital property agreement, unilateral statement under Sec Union is furnished a copy of the agreement, statement or decre	ction 766.59, or	court decree und	er Section 766.70 will a	adversely	affect the	rights o	of the Credit
	RESIDENTS APPLYING FOR AN INDIVIDUAL ACCOUNT: I		-		-			
	ted, will be incurred in the interest of the marriage or family of the		nar vvioconom cie	100.00(1)	by olgilii	19 11010, 1 0	tato tri	at the orealt
			X					
	LOAN APPLICA	ATION SIGN	ATURES					
PLEASE READ BEF	ORE SIGNING:							
	this application is true. I understand that section							
	olication. You have my permission to check it. You om others about my credit and you may answer que							
	with you. If this application is approved, I agree to							
	or loan. (If this application is for two of us, this stater			3			,	3
Credit Report Autho	rization. By signing this Application, I authorize you	ı to obtain m	credit report f	or the purposes of	evaluat	ing this a	pplica	ation and to
•	edit reports on an on-going basis in connection with		•			-		
•	llection action on the account.							
			dit Union Initial	,				
	act: By providing a wireless telephone number (i.e., the credit union or its third party debt collector at that		I consent to re	eceiving calls, inclu	ding au	todialed	and p	rerecorded
	E ABOUT PROCEDURES FOR OPENING A NEW A							
	ent fight the funding of terrorism and money launder							
	t identifies each person who opens an account. What r information that will allow you to identify me. You ma							ne, address
SIGNATURE OF APPLICA		_	URE OF CO-APPLI		Citalyni	_		
SIGNATURE OF APPLICAL	NT DATE	X	URE OF CO-APPLI	CANT		L	DATE	