

PERSONAL LOAN APPLICATION

DEFINITIONS: Whenever used in this application, the words “You” and “Your” refer to the applicant(s), and the words “We,” “Us,” and “Our” refer to the Lender.

CREDIT APPLIED FOR:

Type of Credit: Five-0 Funds Personal Loan. For sworn and civilian employees employed by a law enforcement agency for less than one year.

Purpose: Amount Requested: \$
Amount must be between \$500 and \$5,000.

APPLICANT INFORMATION

FIRST NAME	INITIAL	LAST NAME
SOCIAL SECURITY	BIRTHDAY	
CURRENT STREET ADDRESS	APT #	YEARS/MONTHS
CITY	STATE	ZIP
HOME TELEPHONE	CELL PHONE	
DO YOU: OWN <input type="radio"/> RENT <input type="radio"/> LIVE WITH PARENTS <input type="radio"/>	RENT/MTG \$ <input type="text"/>	EMAIL ADDRESS <input type="text"/>

EMPLOYMENT AND INCOME

CURRENT EMPLOYER	EMPLOYMENT DATE		
ADDRESS	CITY	STATE	ZIP
WORK TELEPHONE	OCCUPATION	MONTHLY GROSS INCOME \$	
FORMER EMPLOYER	OCCUPATION	SINCE	
ARE YOU CURRENTLY IN BANKRUPTCY? YES <input type="radio"/> NO <input type="radio"/>	FIRST PAYMENT DUE DATE		

SIGNATURES

You hereby authorize Us, Our employees and agents to investigate and verify any information provided to Us by You. You further authorize the Credit Union, its employees and agents to obtain a consumer credit report, and to gather whatever other credit, checking account, and employment information We consider appropriate in connection with Our rendering a decision in connection with this credit application, and if applicable, providing a contemporaneous offer of credit for any of Our other credit products and services.

You warrant the truth of the above information and You realize that it will be relied upon by Us in deciding whether or not to grant the credit applied for. If this application is for any Feature Category contained in Loan Program, You agree and understand that if approved, You are contractually liable according to the applicable terms of the Loan Program Agreement and Disclosure. You will receive a copy of that Agreement and Disclosure no later than the time of Your first credit advance and promise to pay all amounts charged to Your Account according to its terms. You authorize Us to accept Your facsimile signature on this application and agree that Your facsimile signature will have the same legal force and effect as Your original signature. You assume any risk that may be associated with permitting Us to accept Your facsimile signature.

You hereby acknowledge Your intent to apply for credit (Applicant's Initials): _____

APPLICANT SIGNATURE: _____ DATE: _____