



4600 Silver Hill Road  
 Room 1K250  
 Washington, D.C. 20233  
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 (800) 343-6788

# CREDIT LINE ACCOUNT AND PERSONAL LOAN APPLICATION

ACCOUNT NUMBER - APPLICANT	ACCOUNT NUMBER - CO-APPLICANT	DATE
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**Applicant Information** PRINT OR TYPE ALL INFORMATION

1. If You live in a community property state, are You:  
 Married  Separated  Unmarried (Includes Single, Divorced and Widowed)

2. Married applicants can apply for an individual loan. Indicate if You want an:  
 Individual Loan  Joint Credit with another Applicant

3. Method of Payment:  
 Payroll Deduction  Automatic Share Transfer  Cash Payment  ACH

4. Frequency of Payment:  Weekly  Bi-Weekly  Semi-Monthly  Monthly

**Co-Applicant Information**

5. Complete Co-Applicant Information only if:  
 a. This is for a joint account with a Co-Applicant.  
 b. Your Spouse will use Your Account.  
 c. You are relying on Your Spouse's income as a source of repayment for the credit requested.  
 d. You live in a community property state: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, Wisconsin (and Puerto Rico).

6. Definitions:  
 Whenever used in this application, the words "You" and "Your" refer to the Applicant(s) or Spouse/Co-Applicant and the words "We", "Us", and "Our" refer to the Lender.

**Lines of Credit Applied For:**

Redi-Cash Line-of-Credit - Limit Desired \$ \_\_\_\_\_  
 Overdraft Protection:  Yes  No

Premier Line-of-Credit - Limit Desired \$ \_\_\_\_\_  
 Overdraft Protection:  Yes  No

Purpose \_\_\_\_\_

**Closed-End Loans Applied For:**

Secured  Unsecured  Share Secured No. of Months \_\_\_\_\_  
 \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Purpose \_\_\_\_\_  
 Collateral Offered \_\_\_\_\_  
 Collateral Owned By \_\_\_\_\_

**APPLICANT**

FIRST NAME/INITIAL/LAST NAME \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

CURRENT STREET ADDRESS \_\_\_\_\_ APT. NO. \_\_\_\_\_ SINCE (MO. YR.) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

COUNTY \_\_\_\_\_ TOWNSHIP \_\_\_\_\_

FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 3 YEARS) \_\_\_\_\_ YEARS THERE \_\_\_\_\_

DO YOU:  OWN  RENT  PAY BOARD HOME TELEPHONE \_\_\_\_\_ NO. OF DEP. \_\_\_\_\_ AGES OF DEPENDENTS \_\_\_\_\_

NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_

**CO-APPLICANT**

FIRST NAME/INITIAL/LAST NAME \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

CURRENT STREET ADDRESS \_\_\_\_\_ APT. NO. \_\_\_\_\_ SINCE (MO. YR.) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

COUNTY \_\_\_\_\_ TOWNSHIP \_\_\_\_\_

FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 3 YEARS) \_\_\_\_\_ YEARS THERE \_\_\_\_\_

DO YOU:  OWN  RENT  PAY BOARD HOME TELEPHONE \_\_\_\_\_ NO. OF DEP. \_\_\_\_\_ AGES OF DEPENDENTS \_\_\_\_\_

NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_

**EMPLOYMENT AND INCOME** If self-employed or retired, attach financial statement or income tax returns.

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE) \_\_\_\_\_ EMPLOYMENT DATE \_\_\_\_\_

ADDRESS/CITY/STATE/ZIP \_\_\_\_\_

WORK TELEPHONE \_\_\_\_\_ POSITION \_\_\_\_\_ MO. GROSS INCOME \$ \_\_\_\_\_

FORMER EMPLOYER \_\_\_\_\_ POSITION \_\_\_\_\_ YEARS THERE \_\_\_\_\_

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE) \_\_\_\_\_ EMPLOYMENT DATE \_\_\_\_\_

ADDRESS/CITY/STATE/ZIP \_\_\_\_\_

WORK TELEPHONE \_\_\_\_\_ POSITION \_\_\_\_\_ MO. GROSS INCOME \$ \_\_\_\_\_

FORMER EMPLOYER \_\_\_\_\_ POSITION \_\_\_\_\_ YEARS THERE \_\_\_\_\_

**OTHER INCOME** You need not list income from alimony, child support, or separate maintenance payments unless You want it considered in evaluating this credit application.

TYPE OF OTHER INCOME \_\_\_\_\_ MONTHLY AMOUNT \$ \_\_\_\_\_

NAME AND ADDRESS OF PAYER \_\_\_\_\_

TYPE OF OTHER INCOME \_\_\_\_\_ MONTHLY AMOUNT \$ \_\_\_\_\_

NAME AND ADDRESS OF PAYER \_\_\_\_\_

**ASSETS AND DEPOSITS** Attach a separate sheet if necessary.

TYPE	BANK (OR OTHER) NAME & ADDRESS	ACCOUNT NO.	INTEREST RATE	APPROX. BAL.
CAR 1 - YR. - MAKE - MODEL			APPROX. VALUE	
			\$	
CAR 2 - YR. - MAKE - MODEL			APPROX. VALUE	
			\$	
HOMEOWNERS: PLEASE INDICATE NAME(S) ON DEED		PURCHASE PRICE	APPROX. VALUE	
		\$	\$	

TYPE	BANK (OR OTHER) NAME & ADDRESS	ACCOUNT NO.	INTEREST RATE	APPROX. BAL.
CAR 1 - YR. - MAKE - MODEL			APPROX. VALUE	
			\$	
CAR 2 - YR. - MAKE - MODEL			APPROX. VALUE	
			\$	
HOMEOWNERS: PLEASE INDICATE NAME(S) ON DEED		PURCHASE PRICE	APPROX. VALUE	
		\$	\$	

PLEASE CHECK				OBLIGATIONS	LENDER (OR OTHER) NAME AND ADDRESS LIST ALL OBLIGATIONS INCLUDING CENSUS FEDERAL CREDIT UNION LOANS	ACCOUNT NUMBER	INTEREST RATE	ORIGINAL AMOUNT	BALANCE	MONTHLY PAYMENT
A	C	J	N							
				<input type="checkbox"/> MORTGAGE <input type="checkbox"/> RENT						
				SECOND MORTGAGE						
				AUTO MAKE YEAR						
				AUTO MAKE YEAR						
				CREDIT CARD						

**APPROVAL OF THIS CREDIT APPLICATION MAY BE DELAYED IF ALL DEBTS ARE NOT LISTED. MEMBER STATES THAT ALL OBLIGATIONS ARE LISTED.** (Loan Officer Initials) \_\_\_\_\_

Please answer the following questions. If a yes answer is given, explain on an attached sheet.	A		C		<b>TOTALS</b>	\$	\$
	Yes	No	Yes	No			
1. Have You filed a petition for bankruptcy in the last 10 years?					Please Check: A = Applicant C = Spouse/Co-Applicant		
2. Have You ever had any auto, furniture or property repossessed?					6. Have You any obligations not listed?		
3. Are You a co-maker or co-signer on any loan? For Whom _____ Amount \$ _____					7. Do You have any past due bills?		
4. Have You ever had credit in any other name? What Name _____					8. Is any income You have listed likely to reduce in the next two years?		
5. Have You any suits pending, judgments filed, alimony or support awards against You?					9. Indicate immigration status: Applicant <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent U.S. Resident <input type="checkbox"/> Other _____ Co-Applicant <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent U.S. Resident <input type="checkbox"/> Other _____		

**OPTIONAL CREDIT INSURANCE** An appropriate application/disclosure will be furnished at the time Your credit is approved.

Credit Life and/or Credit Disability Insurance is not required to obtain credit under this plan and, for Credit Line Accounts, will be included only if requested immediately below by the APPLICANT. The insurance rates are shown below. The insurance rates for Credit Line Accounts are shown below. For Credit Line Accounts, the insurance charge is calculated each month by multiplying the total of the remaining scheduled payments of the Account on the last day of that month by the rate shown. You must be under age 65, and, in addition, for credit disability insurance, You must be in active full time work for wages or profit and physically present at work for at least 30 hours for each of the 2 consecutive weeks prior to each loan advance in order for the insurance to take effect for that advance. Joint Life Coverage covers only a spouse who is a co-applicant. For Closed-End loans, the total insurance premium will be calculated and disclosed to You separately.

**MONTHLY PREMIUM RATES PER \$1000 OF TOTAL REMAINING SCHEDULED PAYMENTS - YOU MUST CHECK ONE OR MORE OF THE BOXES BELOW.**

CREDIT LIFE: Single Coverage - \$ \_\_\_\_\_  Yes  No Joint Coverage - \$ \_\_\_\_\_  Yes  No

CREDIT DISABILITY (Primary Borrower Only): Single Coverage - \$ \_\_\_\_\_  Yes  No

You are interested in Credit Disability Insurance — single coverage  You are interested in Credit Life Insurance — single coverage  joint coverage

You are not interested in Credit Insurance

If You applied for Credit Insurance, You authorize Us to add the required premiums to Your Account, charge a finance charge on the premiums at the rate which applies to Your Account, and forward such premiums to the Insurance Company.

SIGNATURE OF APPLICANT **X** \_\_\_\_\_

**SIGNATURES**

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. You hereby authorize Us, Our employees and agents to investigate and verify any information provided to Us by You. If this application is for any Feature Category contained in Our Credit Line Account Program, You agree and understand that if approved, You are contractually liable according to the applicable terms of the Credit Line Account Agreement and Disclosure. You will receive a copy of that Agreement no later than the time of Your first advance and You promise to pay all amounts charged to Your Account according to its terms. If this is a joint application, You agree that such liability is joint and several. **LIEN IMPRESSMENT AND SET-OFF. You agree that We may impress and enforce a statutory lien upon Your Accounts with Us to the extent You owe Us any money and We may enforce Our right to do so without further notice to You. We have the right to set-off any of Your money or property in Our possession against any amount You owe Us. The right of set-off and Our impressed lien does not extend to any Keogh, IRA or similar tax deferred deposit You may have with Us. If Your Account is owned jointly, Our right of set-off and Our impressed lien extends to any amount owed to Us by any of the joint Owners.** 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. **If You are issued a debit Card or ATM card, You grant and consent to a lien on Your shares with Us (except IRA and Keogh accounts) and any dividends due or to become due to You from Us to the extent You owe on any unpaid Redi-Cash Line-of-Credit and Premier Line-of-Credit balance created through the use of Your debit card or ATM card.**

You hereby acknowledge Your intent to apply for joint credit \_\_\_\_\_

APPLICANT SIGNATURE	DATE	CO-APPLICANT SIGNATURE	DATE
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**LOAN OFFICER** **CREDIT MANAGER OR OTHER**

LOAN APPROVED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> REFERRED TO CC <input type="checkbox"/> COUNTER OFFER WILL BE MADE. IF ACCEPTED, LOAN APPROVED.	LOAN APPROVED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> COUNTER OFFER WILL BE MADE. IF ACCEPTED, LOAN APPROVED.
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DESCRIBE COUNTER OFFER:

SPECIFIC REASON(S) FOR REJECTION:

LOAN OFFICER SIGNATURE	DATE	ADDITIONAL INFORMATION:
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CREDIT MANAGER OR OTHER	DATE	
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ECOA NOTICE AND REASON FOR REJECTION OR UNACCEPTED COUNTER OFFER SENT OR DELIVERED ON \_\_\_\_\_ (DATE) BY \_\_\_\_\_