## "Mini-App" LOAN APPLICATION

## **SUNKIST EMPLOYEES FCU**

27770 N. Entertainment Drive Valencia, CA 91355 1) 290-8702 Fax# (661) 290-8703

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Account No.: Loan			oan Amount Requested:	Purpose of Loan:					
		\$							
	ccount	We intend to apply for joint credit:							
(b) The property (c) Your spouse of Your spouse or RD	gn this application unless he/she wishes to	X Borrower f X							
* Refers to RDF	still apply for individual credit. th RDP laws that provide for community pro	Co-Borrower			OTHER				
PLEASE TELL US ABOUT YOURSELF  LAST NAME FIRST NAME			M.I.	CO-BORROWER SPOUSE/RDP OTHER (Please Check One)  LAST NAME FIRST NAME M.I.					
SOCIAL SECURITY NO.		DATE OF BIRTH	CELL PHONE	SOCIAL SECURITY NO.	SECURITY NO. DATE OF BIRTH		CELL F	CELL PHONE	
HOME ADDRESS			APT. NO.	HOME ADDRESS				APT. NO.	
CITY, STATE, ZIP			HOME PHONE	CITY, STATE, ZIP	CITY, STATE, ZIP			HOME PHONE	
HOW LONG? (yrs/mos)	(yrs/mos) TYPE OF HOUSING: Own or buying RENT OTHER LIVE WITH PARENTS/RELATIVE		MONTHLY RENT/MORTGAGE  LATIVES \$	HOW LONG? (yrs/mos)	TYPE OF HOUSING: Own or buying rent O other Live with parents/relativ			MONTHLY RENT/MORTGAGE \$	
PREVIOUS ADDRESS (stre	less than 2 years at current address.)	PREVIOUS ADDRESS (street, city, state) (If less than 2 years at current address.)							
ABOUT YOUR IN	• •	ABOUT YOUR INCOME							
EMPLOYER NAME (or source of income) *			BUSINESS PHONE	EMPLOYER NAME (or source of income) *				BUSINESS PHONE	
EMPLOYER ADDRESS			HOW LONG? (yrs/mos)	EMPLOYER ADDRESS				HOW LONG? (yrs/mos)	
CITY, STATE, ZIP			GROSS ANNUAL INCOME \$	CITY, STATE, ZIP				GROSS ANNUAL INCOME \$	
SELF EMPLOYED?	(If self employed, supp	SELF EMPLOYED?							
PREVIOUS EMPLOYER'S NAM	. (if less than 3 years w/ current employer)	PREVIOUS EMPLOYER'S NAME & PHONE NO. (if less than 3 years w/ current employer)							
* Alimony, child support, or separ	ncome need not be included if you do not choose to h	* Alimony, child support, or separate maintenance income need not be included if you do not choose to have it considered as a basis for repaying this obligation.							
SIGNATURES SEE BELOW FOR IMPORTANT INFORMATION ABOUT TERMS AND CONDITIONS									
Indebtedness, either as a I authorize the credit unio credit reporting agencies.	maker, co-ma n to contact a I understand	aker, or guarantor. I authorize any perso .nd inquire of my references and my em	n is true and complete and is given for th n, association, or corporation to furnish or ployer(s) present, past and future; and to ny account to credit bureaus. Late paymen	n request of this credit union, obtain consumer credit repo	, intormation o orts about me.	oncerning me or my affairs.  I also authorize the credit union	to furnish infor	mation concerning my account to	
x			X						
X Signature of Borrower  Date Signature of Co-Borrower (including spouse applying for credit)  Date  IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT UNDER THE USA PATRIOT ACT OF 2001  To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.  What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see a form of identification with your photograph or other identifying documents.									
OPTIONAL: BALANCE TRANSFER (Debt Consolidation)  You are requesting that the Credit Union pay off your other debts in the amount of \$									
SIGNATURE (BORROWER)			DATE	SIGNATURE (CO-BORROWER)				DATE	
S.G.W. STIE (BOTHTOWER)			VALE	Doto.				DAIL	