HOMETOWN CREDIT UNION

P.O. Box 310

P.O. Box 230	
, ND 58413 • 288-3439	Hazelto

P.O. Box 225

109 McDougall Drive #5

Kulm, ND 58456 • 647-2448 Ashley, ND 58413 • 288-3439	oplication
To assist the Credit Union in determining creditworthiness, please complete ALL blanks on this form as fully as possible. Completeness will increase our efficiency in applicant processing.	Date
Name	Account Number
Address	Note Number
City/State/Zip	Soc. Sec. #
Phone	No. of Dependents
Share Balance	Ages
Loan Balance with this loan	Birthdate
HEREBY APPLY FOR A LOAN AS FOLLOWS: (to be	
Amount of money requested	\$
Combine with old loan balance (if any)	\$
TOTAL NEW LOAN	\$
Are you interested in having your loan protected? Credit LifeDisabilitySingle (insured's nar	NoYes (please complete next line) ne)Joint (insure both applicants)
	otect your loan. The credit insurance is voluntary and does not affect your d to sign a separate application that explains the terms and conditions.
To be repaid in monthly/annual payments	of \$ including/plus interest
To be repaid in monthly/annual payments starting on(date)	of \$ including/plus interest and continuing thereafter. (payment frequency)
starting on(date)	and continuing thereafter.
starting on(date) SECURITY Individual Credit (applicant's signature only/ and/or co-s Co-signer/makers' name	and continuing thereafter. (payment frequency) FOR LOAN igner/maker {person who will be equally liable for repayment
starting on(date) SECURITY Individual Credit (applicant's signature only/ and/or co-s Co-signer/makers' name Secured Credit (collateral) Shares, Certificates in account(s)	and continuingthereafter. (payment frequency)
starting on(date) SECURITY Individual Credit (applicant's signature only/ and/or co-s Co-signer/makers' name Secured Credit (collateral) Shares, Certificates in account(s) Value \$	and continuingthereafter. (payment frequency)
starting on(date) SECURITY Individual Credit (applicant's signature only/ and/or co-s Co-signer/makers' name Secured Credit (collateral) Shares, Certificates in account(s) Value \$ New/Used Vehicle: Year	and continuing thereafter
starting on(date) SECURITY Individual Credit (applicant's signature only/ and/or co-s Co-signer/makers' name Secured Credit (collateral) Shares, Certificates in account(s) Value \$	and continuing thereafter
starting on	and continuing thereafter
starting on	and continuing thereafter
starting on	
starting on	and continuingthereafter. (payment frequency) FOR LOAN igner/maker {person who will be equally liable for repayment
starting on	and continuing thereafter. (payment frequency) / FOR LOAN igner/maker {person who will be equally liable for repaymen
starting on	
starting on	and continuingthereafter
starting on	_ and continuing thereafter. (payment frequency) (FOR LOAN igner/maker {person who will be equally liable for repayment Make Make Loan Value \$ No. of Head Date Loan Officer
(date) SECURITY Individual Credit (applicant's signature only/ and/or co-s Co-signer/makers' name	and continuingthereafter
(date) SECURITY Individual Credit (applicant's signature only/ and/or co-s Co-signer/makers' name Secured Credit (collateral) Shares, Certificates in account(s) Value \$ New/Used Vehicle: Year Model: Today's Value \$ New/Used Farm Equipment Year Model: Purchase Price \$ Livestock: Kind Other: CREDIT COMMITTEE / LOAN OFFICER ACTION We approve the loan as submitted We reject the loan as submitted. Reason for rejection	and continuingthereafter
starting on	_ and continuing thereafter. (payment frequency) (FOR LOAN igner/maker {person who will be equally liable for repaymen Make Purchase Price \$ Loan Value \$ Serial Number Today's Value \$ No. of Head Date Loan Officer

Signed

APPLICANT CREDIT INFORMATION

Present Employer		Address	
Phone #			Years there
Previous Employer		Length of Em	ployment
Monthly/Annual Salary (net/gross) \$			
Other Income \$		per	
Name and Address of nearest relative not	living with you		

FINANCIAL STATEMENT

Individual (If you check this box, provide financial information only about yourself)

D Joint, with

Relationship (If you check this box, provide financial information about yourself and the other person)

Assets	Current Value	Estimate of Monthly Expenses		
Cash & Deposits		Mortgage / Rent	\$	
Accounts Receivable			¢ 	
		Insurance(s)	Ъ	
Real Estate Owned		Phone	\$	
Vehicles (describe)		Vehicle Expenses	\$	
		Utilities	\$	
		Heat	\$	
Personal Property (describe)		Food	\$	
		Other	\$	
			\$	
Cash Value Life Insurance			\$	
Other Assets (describe)				
· · · · ·		TOTAL MONTHLY EXPEN	SES \$	
TOTAL ASSETS	\$			

OUTSTANDING DEBTS

Creditors	Name	Secured by	Annual or Monthly Pmt	Outstanding Bal.	Current (Y/N)
Credit Unions					
Banks					
Finance Co.'s					
(GMAC, etc.)					
Credit Cards					
Other Debts					

TOTAL DEBTS

I/ We hereby certify that all statements made, including those on the reverse side hereof, are true and complete and submitted for the purpose of obtainig credit. I / We authorize Hometown Credit Union to verify any information that may be pertinent to making a credit determination on this application. I HAVE NO OTHER DEBTS. Date LOAN APPLICATION FEE: \$20:00 Social Security Number Signature -Social Security Number Signature