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<b>HOW TO APPLY</b>	<b>Complete front and back of application.</b> An incomplete application will delay	<b>All applicants <u>must</u> sign the back page</b> And unsigned application cannot be	<b>Return application to credit union with any other documentation</b>
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**Individual Credit:** You must completed the **Application** section about yourself and the **Other** section about your spouse if:  
 1. You live in or the property pledges as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI)  
 2. Your Spouse will use the account, or  
 3. You are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance complete the **Other** section to the extent possible about the person on whose payments you are relying.  
**Joint Credit:** Applicant must **individually** complete the appropriate sections below.  
**Guarantor/Co-Signer:** Complete the **Other** section if you are a guarantor on an account/loan.

Check below to indicate the type of credit for which you are applying.

<input type="checkbox"/> Individual	Amount Requested: _____	<b>Repayment:</b> <input type="checkbox"/> Cash/Check
<input type="checkbox"/> Joint	Purpose/Loan Type: _____	<input type="checkbox"/> Automatic <input type="checkbox"/> Payroll Deduction
<b>Payment Life Insurance:</b> Check coverage desired. Cost of this insurance will be disclosed to you, and a separate enrollment form will be required. <input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Neither		<b>Is this a Refinance:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
		<b>Term:</b> <input type="checkbox"/> 24 mo. <input type="checkbox"/> 36 mo. <input type="checkbox"/> 48 mo. <input type="checkbox"/> 60 mo. <input type="checkbox"/> 72 mo. <input type="checkbox"/> ___ mo.

**Applicant** **Other:**  Co-Applicant  Guarantor

<p>NAME (Last — First — Initial)</p> <p>ACCOUNT NUMBER SOCIAL SECURITY NUMBER</p> <p>DRIVERS LICENSE NUMBER / STATE LIST AGES OF DEPENDANTS NOT LISTED BY OTHER APPLICANT (Exclude Self)</p> <p>BIRTH DATE MAIN PHONE OTHER PHONE</p> <p>EMAIL ADDRESS</p> <p>PRESENT ADDRESS (Street — City — State — Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS</p> <p>PRESENT ADDRESS (Street — City — State — Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS</p> <p>COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU ARE IN A COMMUNITY PROPERTY STATE:  <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single — Divorced — Widowed)</p> <p><b>EMPLOYMENT/INCOME</b></p> <p>NAME AND ADDRESS OF</p> <p>TITLE/GRADE START DATE HOURS AT WORK</p> <p>SUPERVISOR'S NAME IF SELF-EMPLOYED, TYPE OF BUSINESS</p> <p><b>NOTICE:</b> ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.</p> <p>EMPLOYMENT INCOME OTHER INCOME        \$ _____ PER _____ \$ _____ PER _____  <input type="checkbox"/> NET <input type="checkbox"/> GROSS <input type="checkbox"/> NET <input type="checkbox"/> GROSS</p> <p><b>MILITARY:</b> IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO        WHERE ENDING/SEPARATION DATE</p> <p>PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS START DATE        END DATE</p>	<p>NAME (Last — First — Initial)</p> <p>ACCOUNT NUMBER SOCIAL SECURITY NUMBER</p> <p>DRIVERS LICENSE NUMBER / STATE LIST AGES OF DEPENDANTS NOT LISTED BY OTHER APPLICANT (Exclude Self)</p> <p>BIRTH DATE MAIN PHONE OTHER PHONE</p> <p>EMAIL ADDRESS</p> <p>PRESENT ADDRESS (Street — City — State — Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS</p> <p>PRESENT ADDRESS (Street — City — State — Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS</p> <p>COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU ARE IN A COMMUNITY PROPERTY STATE:  <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single — Divorced — Widowed)</p> <p><b>EMPLOYMENT/INCOME</b></p> <p>NAME AND ADDRESS OF</p> <p>TITLE/GRADE START DATE HOURS AT WORK</p> <p>SUPERVISOR'S NAME IF SELF-EMPLOYED, TYPE OF BUSINESS</p> <p><b>NOTICE:</b> ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.</p> <p>EMPLOYMENT INCOME OTHER INCOME        \$ _____ PER _____ \$ _____ PER _____  <input type="checkbox"/> NET <input type="checkbox"/> GROSS <input type="checkbox"/> NET <input type="checkbox"/> GROSS</p> <p><b>MILITARY:</b> IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO        WHERE ENDING/SEPARATION DATE</p> <p>PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS START DATE        END DATE</p>
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<b>APPLICANT REFERENCE</b>	RELATIONSHIP	<b>OTHER REFERENCE</b>	RELATIONSHIP
NAME AND ADDRESS		NAME AND ADDRESS	
OF NEAREST	HOME PHONE	OF NEAREST	HOME PHONE
RELATIVE NOT		RELATIVE NOT	

WHAT YOU	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)	INTEREST RATE	PRESENT BALANCE	MONTHLY PAYMENT	OWED BY	
					APPLICANT	OTHER
<input type="checkbox"/> RENT <input type="checkbox"/> FIRST <small>(Include Tax and Ins.)</small>		\$	\$			
2nd MORTGAGE		\$	\$			
1st AUTO LOAN		\$	\$			
2nd AUTO LOAN		\$	\$			
CHILD-CARE		\$	\$			
CHILD SUPPORT		\$	\$			
CREDIT CARD		\$	\$			
CREDIT CARD		\$	\$			
OTHER		\$	\$			
OTHER		\$	\$			
LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHECKED:			<b>TOTALS</b>	\$	\$	

WHAT YOU OWN	LIST LOCATION OF PROPERTY OR FINANCIAL INSTITUTION	MARKET VALUE	PLEGGED AS COLLATERAL FOR		OWED BY	
			YES	NO	APPLICANT	OTHER
HOME		\$				
AUTO		\$				
SAVINGS		\$				
CHECKING		\$				
OTHER (Describe)		\$				

OTHER INFORMATION	IF YOU ANSWER "YES" TO ANY QUESTION OTHER THAN #1, EXPLAIN ON AN ATTACHED SHEET	APPLICANT	NO	OTHER	NO
		YES	NO	YES	NO
1. ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?					
2. DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGMENTS OR HAVE YOU EVER FILED FOR BANKRUPTCY, HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13, HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST 7 YEARS, OR BEEN A PARTY IN A LAWSUIT?					
3. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?					
3. ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE?					
FOR WHOM (Name of Others Obligated on Loan):	TO WHOM (Name of Creditor):				

**STATE LAW NOTICES**    **OHIO RESIDENTS ONLY:** The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

**WISCONSIN RESIDENTS ONLY:** (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished

<b>X</b>	
SIGNATURE FOR WISCONSIN RESIDENTS ONLY	DATE

Signatures			
<p>Your promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of what you owe. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, renewal or extension of the credit received. You understand that the</p>	<p>Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA.</p>		
<b>X</b>	<b>X</b>		
APPLICANT'S SIGNATURE	DATE		
OTHER SIGNATURE	DATE		

For Credit Union Use Only							
DATE	APPROVED	APPROVED	SIGNATURE	LINE OF CREDIT	OTHER	OTHER	DEBT RATIO/SCORE BEFORE / AFTER
	DENIED (Adverse Action Notice Sent)		\$	\$	\$	\$	
LOAN OFFICER COMMENTS							
SIGNATURES:							
<b>X</b>	<b>X</b>						
DATE	DATE						