



1st City Credit Union (1CCU) Consumer Loan Application

APPLICANT (LAST/FIRST/MIDDLE)					
ADDRESS					
CITY/STATE/ZIP				HOW LONG	
HOME PHONE			CELL PHONE		
OWN	RENT	PARENTS	OTHER	# DEPENDENTS	MONTHLY PMT.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SOCIAL SECURITY NO.				BIRTH DATE	
EMPLOYER				DATE EMPLOYED	
WORK ADDRESS				WORK PHONE	
POSITION				GROSS MO. SALARY	
OTHER INCOME (Source/Amount)					
OTHER DEBTS: (Alimony, support, lease, etc.)					
RELATIVE: not living at same address (name/address/phone)					

CO-APPLICANT (LAST/FIRST/MIDDLE)					
ADDRESS					
CITY/STATE/ZIP				HOW LONG	
HOME PHONE			CELL PHONE		
OWN	RENT	PARENTS	OTHER	# DEPENDENTS	MONTHLY PMT.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SOCIAL SECURITY NO.				BIRTH DATE	
EMPLOYER				DATE EMPLOYED	
WORK ADDRESS				WORK PHONE	
POSITION				GROSS MO. SALARY	
OTHER INCOME (Source/Amount)					
OTHER DEBTS: (Alimony, support, lease, etc.)					
RELATIVE: not living at same address (name/address/phone)					

You may need to complete additional information including co-applicant if: 1) this is to be a joint account; 2) you live in a community property state (AZ, CA, ID, NV, NM, TX, WA, WI, Puerto Rico); or 3) you are relying on your co-applicant's income in applying for this loan. You need not disclose alimony, child support or separate maintenance income if you do not wish to have it considered as a basis for repaying this loan.

TYPE OF LOAN

PURPOSE OF LOAN

ICCU Account # _____

Amount Requested \$ _____

Payment Protection Insurance Option
 Disability

Vehicle Protection
 Guaranteed Auto Protection

I certify that this information is complete and true and submitted for the purpose of obtaining credit. I authorize the credit union to obtain any additional information required to process this request and hereby agree and accept all terms and conditions of the loan disclosure statement. I further agree to complete and submit any additional data required.

X _____ X _____
 Applicant Signature Date Co-applicant Signature Date

I hereby acknowledge my intent to apply for joint credit.

 Applicant Initials Co-applicant Initials

ICCU USE ONLY:

 Loan Officer Signature

 Date

Denied Approved

All applicants must submit copies of their most recent pay stubs, or tax returns if self-employed.