

Enclosed are forms necessary to process your loan application. Please complete all forms, sign where indicated and return to the credit union office.

BE SURE THAT YOU FURNISH THE FOLLOWING:

1. YOU MUST ENCLOSE VERIFICATION OF ALL INCOME (INCLUDE SPOUSE'S INCOME IF APPLICABLE.) You must provide your 2 most recent pay stubs. Proof of social security income & interest income is required. Under special circumstances we may require copies of your W2 form.

If you have a RENTAL, you must provide a SCHEDULE E. If you own a BUSINESS, you must provide your 2 most recent years of TAX RETURNS. If you own a FARM, you must provide a SCHEDULE F. If you are a SOLE PROPRIETOR, you must provide your 2 most recent SCHEDULE C forms.

2. LIST ALL BILLS – include account numbers and payment amounts.

3. COMPLETE COPY OF DIVORCE AGREEMENT IF APPLICABLE.

4. CO-SIGNERS'S SIGNATURES MUST BE NOTARIZED IF OTHER THAN SPOUSE.

BE SURE THAT YOU HAVE FURNISHED ALL INFORMATION REQUESTED.

CREDIT REPORT: Credit reports will be accessed on all signers for the loan. If you are aware of any adverse or negative information concerning your credit, a written explanation of the derogatory information is required.

Upon receipt of completed forms, your loan application will be submitted to the Credit Committee for approval. Upon approval you will be notified and your loan funded.



 SAN JOAQUIN POWER
 P.O. Box 16039

 Fresno, CA 93755-6039
 (559) 230-5080

 EMPLOYEES (REDIT UNION
 (800) 637-5993



Application

| you live in or the prop your spouse will use to | erty pledg he accour | jed as collatera | al is located in a community | d the Other section about you property state (AK, AZ, CA, II | D, İA, NM, | NV, TX, WA, WI | - | | |
|---|-------------------------|------------------------------|---|---|--------------------|-----------------------------------|-------------------------|--|--|
| 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: Each Applicant must individually complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box. Guarantor: Complete the Other section if you are a guarantor on an account/loan. | | | | | | | | | |
| Check below to indicate the type of account(s) and type of credit for which you are applying. Married Applicants may apply for a separate account. | | | | | | | | | |
| | | | Joint | | | | | | |
| (Including ATM/Debit Card Access to the Account if Available) | | | | | | | | | |
| Amount Requested \$ Purpose/Collateral: | | | | | | | | | |
| Repayment: D Payroll D | eduction | Cash | Military Allotment | Automatic Payment | | | | | |
| PAYMENT PROTECTION | If you a | answer "yes" separate ele | n having your loan prote , then the credit union v ction which discloses th | cted? Yes N vill disclose the cost of this le terms and conditions mu | s voluntarv | / payment prot ned for protect | tection to ion to be | | |
| APPLICANT | | | | OTHER | 🗌 co-4 | | | | |
| NAME | | | | NAME | | | | | |
| PASSWORD | | ACCOUNT NUMB | FR | PASSWORD | | ACCOUNT NUMBER | | | |
| T ACOWORD | | | | Theorem and the second s | | | | | |
| SOCIAL SECURITY NUMBER | SOCIAL SECURITY NUMBER | | SE NUMBER/STATE | SOCIAL SECURITY NUMBER | | DRIVER'S LICENSE NUMBER/STATE | | | |
| AGES OF DEPENDENTS | | EMAIL ADDRESS | | AGES OF DEPENDENTS | | EMAIL ADDRESS | | | |
| BIRTH DATE HOME PHO | NE | BUSINESS | PHONE/EXT. | BIRTH DATE HOME PI | HONE | BUSINESS P | HONE/EXT. | | |
| PRESENT ADDRESS (Street - City - | State - Zip) | | | PRESENT ADDRESS (Street - C | ity - State - Zip) | | | | |
| | | | LENGTH AT RESIDENCE | | | L | ENGTH AT RESIDENCE | | |
| PREVIOUS ADDRESS (Street - City - State - Zip) | | | | PREVIOUS ADDRESS (Street - C | City - State - Zip |) | | | |
| | | | LENGTH AT RESIDENCE | | | Ī | ENGTH AT RESIDENCE | | |
| COMPLETE FOR JOINT CREDIT, S PROPERTY STATE: | | | | COMPLETE FOR JOINT CREDIT PROPERTY STATE: | · | | | | |
| | | (* 5* * | , | EMPLOYMENT/INCOME | | | , | | |
| NAME AND ADDRESS OF EMPLOYER | | | | NAME AND ADDRESS OF EMPLOYER | · | | | | |
| TITLE/GRADE STAR | | RT DATE HOURS AT WORK | | TITLE/GRADE | STAF | RT DATE | HOURS AT WORK | | |
| SUPERVISOR'S NAME | IF SEL | F EMPLOYED, TY | PE OF BUSINESS | SUPERVISOR'S NAME | IF SE | LF EMPLOYED, TYP | E OF BUSINESS | | |
| NOTICE: ALIMONY, CHILD SUPPO | RT, OR SEP | ARATE MAINTENA | ANCE INCOME NEED NOT BE | NOTICE: ALIMONY, CHILD SUPP | PORT, OR SEF | PARATE MAINTENAN | ICE INCOME NEED NOT BE | | |
| REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED. EMPLOYMENT INCOME OTHER INCOME | | | | REVEALED IF YOU DO NOT CHI EMPLOYMENT INCOME | OOSE TO HAV | E IT CONSIDERED. | | | |
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| MILITARY: IS DUTY STATION TRA WHERE | NSFER EXPI | | IEXT YEAR? YES NO SEPARATION DATE | MILITARY: IS DUTY STATION TO WHERE | RANSFER EXF | | XT YEAR? YES NO | | |
| PREVIOUS EMPLOYER NAME AND FIVE YEARS | IF EMPLOYED LE | SS THAN STARTING DATE | PREVIOUS EMPLOYER NAME A FIVE YEARS | ND ADDRESS | IF EMPLOYED LESS | S THAN STARTING DATE | | | |
| | | | ENDING DATE | | | | ENDING DATE | | |
| REFERENCE | | | RELATIONSHIP | REFERENCE | | | RELATIONSHIP | | |
| NAME AND ADDRESS OF NEARES | NOT LIVING WIT | H YOU HOME PHONE | NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU HOME PHONE | | | | | | |
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| WHAT YOU OWE | | | CREDITOR NAME OTHER THAN THIS CREDIT UNION | | | | | | | MONTHLY | | OWED BY | | |
|---|--------------|--|--|-----------------|------------------|---------------------------------------|------------------------|-----------------------|-----------------|----------------------|-----------------|-----------------------------|---------------------|--|
| (Attach additional sheet(s) if necessary) | | | | | RATE | RATE | | | PAYMENT | | APPLICANT OTHER | | | |
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| WHAT YOU OWN | 1 | LIST LOCATI | ON OF PROPERTY OR FINANCIAL | INSTITU | | MARKET VA | | | | OLLATER | | OWNED | | |
| | | LIGT LOOKIN | | | | | | IER LOAN | - | APPLICANT | OTHER | | | |
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| | | | | | | \$ | | | YES | N | - | | | |
| | | | | | | \$ | | | YES | N | | | | |
| | | | | | | \$ | | | YES | N | - | | | |
| | | | | | | \$ \$ | | | YES | N | - | | | |
| | | | | | | \$ \$ | | | YES | N | - | | | |
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| | | | | | | \$ | | | YES | N | | | | |
| | | | | | | Ψ | | | YES | N | 0 | | | |
| OTHER INFORM | ATIC | N ABOUT YOU | IF YOU ANSWER "YES" TO A | NY QUES | TION OTHER T | HAN #1. EXPLAIN O | | ACHED SHE | ET | APPLI | ~ ^ NIT | | HER | |
| 1. ARE YOU A U.S. | CITIZ | EN OR PERMANENT RESIDEN | | | | | | | | | | | | |
| 2. DO YOU CURRE | NTLY | HAVE ANY OUTSTANDING JU | DGMENTS OR HAVE YOU EVER F | | | | | | | | | 1 | | |
| | | | FORECLOSED UPON OR REPOS | SESSED I | N THE LAST 7 | YEARS, OR BEEN A | PARTY IN | A LAWSUIT | ? | | | \downarrow | | |
| | | ELY TO DECLINE IN THE NEXT | | | | | | | | | | ┥┝── | | |
| | | R, CO-SIGNER OR GUARANIC Others Obligated on Loan): | OR ON ANY LOAN NOT LISTED AB | | /I (Name of Cred | litor): | | | | | | | | |
| | | | | | | | | | | | | | | |
| STATE LAW NOT | FICE | | NTS ONLY: The Ohio | | Credit Unic | n is furnished a | copy of | the agree | emen | it, statem | ent | or decree | , or has | |
| | | against discrimir | nation require that all creative that all creative the second sec | | opened (2 | wledge of its te) Please sign if | rms, bef | fore the c not app | credit Ivina | is grant for this | ed o acco | or the account or lo | count is an with | |
| 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. | | All Rights Commission a | administers compliance with | n this | interest of | ne manage or | iamily of | the unde | rsign | ieu. | | | | |
| WISCONSIN RES | SIDE | | ovision of any marital prop | nertv | | | | | | | | | | |
| agreement, unilateral statement under Section 766.59, or court decree under | | | | | X | | | | | | | | | |
| Section 766.70 will adversely affect the rights of the Credit Union unless the SIGNATU | | | | | | RE FOR WISCONSIN RESIDENTS ONLY | | | | | | DATE | | |
| | | | \$ | SIGNAT | URES | | | | | | | | | |
| | | | n this application is correct t | | | Union will rely c | | | | | | | | |
| | | | formation is a complete listi | | report to m | hake its decision address of any | n. If you credit bi | request, ureau fro | the m wh | Credit U | nior | n will tell y ed a credi | you the | |
| immediately. You authorize the Credit Union to obtain credit reports in on you. It is a federal of | | | | | | | ne to will | fully and | delib | erately p | rovi | de incom | oletė or | |
| renewal, extensio | tnis n or | collection of the credit | received. You understand | ease, I that | | nformation on le ered credit unior | | | | e to tede | erai | credit un | ions or | |
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| Y | | | (SEAL) | | X | | | | | | (SEA | L) | | |
| APPLICANT'S SIGNATURE DATE | | | | | OTHER SIGN | ATURE | | | | | (JEA | L) DATE | | |
| | | | | | | | | | | | | | | |
| | | | | | UNION USE | | | | | | | | | |
| DATE | | APPROVED | APPROVED SIGNATURE LIMITS: | LI | NE OF CREDIT | OTHER | | OTHE | R | | | DEBT RATIO | | |
| | | DENIED (Adverse Action Notice Sent) | \$ | \$ | | \$ | | \$ | | | | | | |
| LOAN OFFICER COMM | /ENTS | · · · · · | | | | | | | | | | | | |
| SIGNATURES: | | | | | v | | | | | | | | | |
| X | | | DATE | | X | | | | | | | DATE | | |