

Buffalo Police Federal Credit Union

68 Court Street Suite 180
Buffalo, NY 14202
(716) 851-4490



CONSUMER LOAN APPLICATION

Account Number	Date
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APPLICANT INFORMATION. Married Applicants may apply for an individual loan/separate account. Check the type of credit for which you wish to apply:
 Individual credit -- If you are applying for individual credit, complete the Applicant section.
 Joint credit -- If you are applying for joint credit with your spouse or another person, complete the Applicant section and the Spouse/Co-Applicant section.
You must initial here if you intend to apply for Joint Credit: Applicant: X Co-Applicant: X
Spouse Information. You must also complete the Spouse section if any of the following apply: (1) your spouse will use your account; (2) you are relying on your spouse's income as a source of repayment; (3) you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI or Puerto Rico).

TYPE OF CREDIT APPLIED FOR:
 Loan Type: _____
 Amount Requested: _____ Term (months) (closed-end credit only): _____
 Purpose: _____
 Collateral Offered: _____

Payment Method: Cash Payroll Deduction
 Automatic Payment Military Allotment
 Payment Frequency: Monthly Other _____

Optional Payment Protection – If you answer "yes" the Credit Union will disclose the cost of optional payment protection to you. A separate election that discloses the terms and conditions must be signed for protection to become effective. **Are you interested in having this loan protected?** Yes No

APPLICANT

Complete only if: (a) credit will be secured by collateral; or (b) you live in a community property state:
 MARRIED SEPARATED UNMARRIED (Single, Divorced, Widowed)

APPLICANT NAME		
SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	CELL PHONE	DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT
MOTHER'S MAIDEN NAME	E-MAIL ADDRESS	
LIST DEPENDENTS NAMES AND AGES		
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP		
FORMER STREET ADDRESS (if current less than 2 years)	YEARS THERE	
CITY/STATE/ZIP		
PERSONAL REFERENCE 1 (Name and Address)	RELATIONSHIP	
	PHONE NO.	
PERSONAL REFERENCE 2 (Name and Address)	RELATIONSHIP	
	PHONE NO.	

SPOUSE **CO-APPLICANT** **CO-SIGNER**

Complete only if: (a) credit will be secured by collateral; or (b) you live in a community property state:
 MARRIED SEPARATED UNMARRIED (Single, Divorced, Widowed)

SPOUSE/CO-APPLICANT NAME		
SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	CELL PHONE	DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT
MOTHER'S MAIDEN NAME	E-MAIL ADDRESS	
LIST DEPENDENTS NAMES AND AGES		
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP		
FORMER STREET ADDRESS (if current less than 2 years)	YEARS THERE	
CITY/STATE/ZIP		
PERSONAL REFERENCE 1 (Name and Address)	RELATIONSHIP	
	PHONE NO.	
PERSONAL REFERENCE 2 (Name and Address)	RELATIONSHIP	
	PHONE NO.	

EMPLOYMENT & INCOME If you are self-employed, please provide two years of complete tax returns.

CURRENT EMPLOYER	HIRE DATE	<input type="checkbox"/> PART TIME <input type="checkbox"/> FULL TIME
EMPLOYER ADDRESS		
WORK PHONE NO.	POSITION	MONTHLY GROSS INCOME \$
FORMER EMPLOYER (if current less than 2 years)	START DATE	END DATE
MILITARY - IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE: ENDING/SEPARATION DATE:		

CURRENT EMPLOYER	HIRE DATE	<input type="checkbox"/> PART TIME <input type="checkbox"/> FULL TIME
EMPLOYER ADDRESS		
WORK PHONE NO.	POSITION	MONTHLY GROSS INCOME \$
FORMER EMPLOYER (if current less than 2 years)	START DATE	END DATE
MILITARY - IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE: ENDING/SEPARATION DATE:		

OTHER INCOME You need not list income from alimony, child support or separate maintenance unless you wish it considered for purposes of granting this credit.

SOURCE OF OTHER INCOME	FREQUENCY	MONTHLY INCOME
1.		\$
SOURCE OF OTHER INCOME	FREQUENCY	MONTHLY INCOME
2.		\$

SOURCE OF OTHER INCOME	FREQUENCY	MONTHLY INCOME
1.		\$
SOURCE OF OTHER INCOME	FREQUENCY	MONTHLY INCOME
2.		\$

ASSETS & DEPOSITS Please check the appropriate box below. INDICATE: A - Applicant OR C - Spouse/Co-Applicant									
CHECK ONE			FINANCIAL INSTITUTION NAME	CURRENT BALANCE	CHECK ONE			FINANCIAL INSTITUTION NAME	CURRENT BALANCE
A	C	TYPE			A	C	TYPE		
				\$				\$	
				\$				\$	
AUTO #1 MAKE		MODEL	YEAR	VALUE	AUTO #2 MAKE		MODEL	YEAR	VALUE
				\$					\$
REAL ESTATE TYPE				VALUE	OTHER ASSETS			VALUE	
				\$				\$	

CREDIT INFORMATION Be sure to list all open accounts with or without a balance. Attach separate sheet if necessary A - APPLICANT C - SPOUSE/CO-APPLICANT D - DEBTS TO BE PAID OFF IF LOAN IS GRANTED						
PLEASE CHECK			LIST ALL OBLIGATIONS INCLUDING CREDIT UNION LOANS	ACCOUNT NUMBER	BALANCE	MONTHLY PAYMENTS
A	C	D				
			RENT OR MORTGAGE			

PLEASE ANSWER THE FOLLOWING QUESTIONS AND INDICATE: A = Applicant C = Spouse/Co-Applicant				A		C	
				YES	NO	YES	NO
1.	Have you ever filed a petition for bankruptcy? Date:						
2.	Have you ever had any auto, or furniture repossessed or property foreclosed upon? Date:						
3.	Are you a co-borrower or co-signer of any loan or lease? For Whom?		Where?				
4.	Is income listed likely to be reduced in the next two years?						
5.	Are you other than a U.S. citizen or permanent resident alien?						

SIGNATURES – Are you currently on active military duty and/or a military dependent? Yes No

You promise that the information stated in this Loan Application is true and correct to the best of your knowledge. You authorize the Credit Union to obtain credit reports when updating its records in connection with any review, increase, extension or renewal of credit, and in connection with any collection activities involving credit extended to you. The Credit Union may also obtain credit reports to update, increase, extend, renew or collection of the credit received by you. False or misleading statements in your application may cause any loan to be in default. You agree that this application shall be the Credit Union's property whether or not this application is approved. You will notify the Credit Union in writing immediately of any changes in your name, address or employment. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information to obtain credit. If you request, you will be provided the name and address of any credit bureau from which we received a credit report. You understand and agree that if your application is approved, that any collateral described in any security agreement, pledge, advance disbursement voucher or similar document that may be executed, now or in the future, in connection with such credit will secure the Credit Union for repayment of funds advanced to you, subject to the terms and conditions of such security agreement, pledge, advance disbursement voucher or similar document.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: 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 your driver's license or other identifying documents.

OH RESIDENTS: The Ohio laws against discrimination requires 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.

WI RESIDENTS: For any provision of any marital property agreement, court decree under WI ST § 766.70, or statement under WI ST § 766.59 to adversely affect the rights of the Credit Union, the Credit Union must be provided with a copy of the Agreement, decree or statement or have actual knowledge of its terms before any credit is approved or account opened. Sign if you are NOT applying for this loan account with your spouse. This credit request, if approved, will be incurred in the interest of the marriage or family of the undersigned.

Wisconsin Resident Signature _____ Date _____

AUTHORIZATION TO ACCESS CREDIT REPORT – Would you like the Credit Union to review your credit report related to this Loan Application to determine whether they might be able to offer you other credit products, products with more favorable interest rates, lower payments or other more advantageous terms than credit products you currently have. Yes No

X Applicant _____ Date _____ **X** Spouse/Co-Applicant/Co-Signer _____ Date _____

Credit Union Use Only

Loan Approved Yes No, reason _____ ECOA Notice and reason for Rejection sent or delivered on _____

Debt Ratio/Score: Before _____ After _____

Loan Officer Signature _____ Date _____ Loan Officer Signature _____ Date _____

X _____ **X** _____

Comments: _____