MET Com Credit Union Loan Application

Account #_____ (JOINT APPLICANT)

Driver's License No. _____

Name/Address

Name			Social Security Number
Address:			
City:	State:	ZIP:	Phone:

Employment History

Employer:			Job Title:
Address:			Supervisor:
City:	State:	ZIP:	Salary or Hourly
Phone:		Date From:	Date To:
Employer:			Job Title:
Address:			Supervisor:
City:	State:	ZIP:	Salary or Hourly
Phone:		Date From:	Date To:

Source of Income	Total	Expenses	Total
Employment		Loans	
Bonuses & Commissions		Charge Account bills	
Income From Rental Property		Monthly Bills (total of utilities)	
Investment Income		Real Estate Mortgages Name of Mortgage Holder	
Other Income		Other Debts – Itemize	
Total Income		**Total Expenses**	

Banking References

Institution Name:	Institution Name:	Institution Name:	
Checking Account #	Savings Account #	Loan #	Loan Balance:
Address:	Address:	Address:	
Phone:	Phone:	Phone:	

Amt Requested	For How Long	Payment Date Desired	Want to Repay	Proceeds of Loan to be Used For
$_____	Years_____	_____	Circle Monthly/Weekly	_____

Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

_____ _____

Signature *Date*

FOR CREDIT UNION USE ONLY – STATUS OF APPLICATION: APPROVED ____DECLINED____PENDING____