

Rapides General Hospital
Employees Federal Credit Union 211 Fourth Street • 1st Floor Med Terrace Bldg. Alexandria, Louisiana 71301-8421 Telephone: (318) 473-3330 Fax: (318) 473-3982



## **Application**

Individual Credit: You must complete the Applicant section about yourself and the Other section about your spouse if:

1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI),

- your spouse will use the account, or
   you are relying on your spouse's income.

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 a LOANLINER Account/Loan:   Individual   Joint	eccount.		
(Including ATM/Debit Card Access to the Account if Available)  Amount Requested \$ Purpose/Collateral:  Repayment: Payroll Deduction Cash Military Allotment Automatic Payment  PAYMENT PROTECTION  Are you interested in having your loan protected? Yes No If you answer "yes", then the credit union will disclose the cost of this voluntary payment protection to			
If you answer "yes", then the credit union will disclose the cost of this voluntary payment protection to			
effective.			
APPLICANT OTHER CO-APPLICANT SPOUSE	OTHER		
NAME NAME			
PASSWORD ACCOUNT NUMBER PASSWORD ACCOUNT NUMBER			
SOCIAL SECURITY NUMBER DRIVER'S LICENSE NUMBER/STATE SOCIAL SECURITY NUMBER DRIVER'S LICENSE NUMBER/STATE	DRIVER'S LICENSE NUMBER/STATE		
AGES OF DEPENDENTS EMAIL ADDRESS AGES OF DEPENDENTS EMAIL ADDRESS	RESS		
BIRTH DATE HOME PHONE BUSINESS PHONE/EXT.  BIRTH DATE HOME PHONE BUSINESS PHONE/EXT.	BUSINESS PHONE/EXT.		
PRESENT ADDRESS (Street - City - State - Zip)  OWN RENT LENGTH AT RESIDENCE  PRESENT ADDRESS (Street - City - State - Zip)  OWN REI LENGTH AT RESIDENCE			
PREVIOUS ADDRESS (Street - City - State - Zip)  OWN RENT LENGTH AT RESIDENCE  PREVIOUS ADDRESS (Street - City - State - Zip)  OWN REI LENGTH AT RESIDENCE			
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:  MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)  MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)	NITY		
EMPLOYMENT/INCOME  EMPLOYMENT/INCOME			
NAME AND ADDRESS OF EMPLOYER  NAME AND ADDRESS OF EMPLOYER			
TITLE/GRADE START DATE HOURS AT WORK TITLE/GRADE START DATE HOURS AT WO	DRK		
SUPERVISOR'S NAME IF SELF EMPLOYED, TYPE OF BUSINESS SUPERVISOR'S NAME IF SELF EMPLOYED, TYPE OF BUSINESS	3		
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.  NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEI REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.	ED NOT BE		
EMPLOYMENT INCOME         OTHER INCOME         EMPLOYMENT INCOME         OTHER INCOME           \$Per			
□ NET □ GROSS SOURCE □ NET □ GROSS SOURCE			
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES X NO WHERE ENDING/SEPARATION DATE  MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? WHERE ENDING/SEPARATION DATE			
PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN STARTING DATE FIVE YEARS  PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN STARTING DATE FIVE YEARS	TING DATE		
ENDING DATE ENDIN	NG DATE		
REFERENCE RELATIONSHIP REFERENCE RELATIONSHIP	TIONSHIP		
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU HOME PHONE HOME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU HOME	PHONE		

WHAT YOU OWE		NAME OTHER THAN THIS CREDIT UNI ich additional sheet(s) if necessary)	ION	INTEREST RATE	PRESEN	T BALANCE	M(	ONTHLY AYMENT	OWE!	
					\$		\$			
	SEE ATTACHED				\$		\$			
					\$		\$			
					\$		\$			
					\$		\$			
					\$		\$			
					\$		\$			
					\$		\$			
					\$		\$			
					\$		\$			_
					\$		\$			
					\$		\$			
					\$		\$			
LIST ANY NAMES LINDED WHIC	LI VOLID CDEDIT DEEEDEN	ICES AND CREDIT HISTORY CAN BE C	HECKED:	TOTALS	\$ \$		\$			
LIST ANT NAMES UNDER WHIC	on four credit referen	ICES AND CREDIT HISTORY CAN BE C	HEURED.	TOTALS	\$		<u> </u> Φ			
WHAT YOU OWN	LIST LOCATION OF PROPERTY OR FINANCIAL INSTITUTION			MARKET VALUE		PLEDGED AS COLLATERA FOR ANOTHER LOAN			OWNE	
	LIOT EGGATIC	THE ENTITION ENTITION ENTITION		\$		<del>                                     </del>			APPLICANT	OTHER
				\$		<del>                                     </del>	YES	NO		
	SEE ATTACHED			\$		<del>                                     </del>	YES YES	NO NO		
				\$		<del>                                     </del>	YES	NO		
				\$		<del>                                     </del>	YES	NO		
<u> </u>				\$			/ES	NO		
				\$			/ES	NO		
				\$		1	/ES	NO		
				\$		<del>                                     </del>	YES	NO		
		1								
OTHER INFORMATION	ABOUT YOU	IF YOU ANSWER "YES" TO ANY QU	JESTION OTHER T	HAN #1, EXPLAIN	ON AN ATT	ACHED SHE	ET	APPLICAN	т от	HER
1. ARE YOU A U.S. CITIZEN	OR PERMANENT RESIDEN	T ALIEN?								
		DGMENTS OR HAVE YOU EVER FILED I FORECLOSED UPON OR REPOSSESSI					?			
	TO DECLINE IN THE NEXT			-,-					1	$\overline{}$
ARE YOU A CO-MAKER, C FOR WHOM (Name of Oth		R ON ANY LOAN NOT LISTED ABOVE? TO W	HOM (Name of Cre	ditor):						
STATE LAW NOTICES		ITS ONLY: The Ohio laws ation require that all creditors	s Credit Unio	on is furnished a	a copy of	the agree	ment,	statement	or decree	e, or has
reporting agencies main request. The Ohio Civil law.	illable to all creditwor ain separate credit hi Rights Commission a	thy customers, and that credi stories on each individual upor dministers compliance with this	t opened. (2 n your spous interest of	(2) Please sign is se. The credit the marriage or	f you are being ap	e <b>not</b> appl plied for,	ying fo if gran	or this acc ted, will b	count or lo	oan with
agreement, unilateral sta	tement under Section	ovision of any marital property 1766.59, or court decree under 1 of the Credit Union unless the	r 🔼	FOR WISCONSIN R	ESIDENTS	ONLY			DATE	
		SIGN	IATURES							
best of your knowledge a what you owe. If there a immediately. You autho connection with this ap	and that the above inforce any important char orize the Credit Union oplication for credit a	this application is correct to the primation is a complete listing or ages you will notify us in writing on to obtain credit reports in and for any update, increase received. You understand that	f report to n name and n on you. It , incorrect in	Union will rely nake its decisic address of any is a federal crir nformation on ered credit unic	on. If you credit be ne to will loan app	request, ureau fror fully and o lications	the Cin which deliber made	redit Unio h it receiv ately prov	n will téll ed a cred ide incom	you the it repor
X		(SEAL)	X					(SE	AL)	
APPLICANT'S SIGNATURE		DATE	OTHER SIGN	ATURE				(OL	DATE	
			IT UNION USE	ONLY						
DATE	PROVED	APPROVED SIGNATURE	LINE OF CREDIT			OTHER	l		DEBT RATIO	
DE	NIED	LIMITS:	\$	\$		\$			BEFORE AF	
L 1'	dverse Action Notice Sent)	Ψ	Ψ	Ψ		Ψ				
LOAN OFFICER COMMENTS: SIGNATURES:										
X			<u>X</u>							
		DATE							DATE	_
		P	AGE 2						AXX02	8 (LASER