



McCoy Federal

LOAN APPLICATION - HOME EQUITY

DATE	APPLICANT MEMBER NUMBER	CO-APPLICANT MEMBER NUMBER
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Line of Credit
 Closed End
 Variable
 Fixed
 Term _____ Purpose of Loan _____

Amount Requested \$ _____ Estimated Property Value \$ _____

Property Address _____

DISBURSEMENT INSTRUCTIONS:
 DEPOSIT TO CHECKING
 DEPOSIT TO SHARES
 MAIL TO HOME ADDRESS
 OFFICE PICK-UP
 REPAYMENT METHOD:
 COUPON
 PAYROLL DEDUCTION
 AUTOMATIC TRANSFER

MARRIED APPLICANTS MAY APPLY FOR INDIVIDUAL ACCOUNTS. INDICATE BELOW THE TYPE OF CREDIT WANTED

INDIVIDUAL CREDIT: Complete Applicant Section. Complete other section if the following applies: You live in a community property state (AZ, CA, ID, LA, NM, NV, P.R., TX, WA, WI) or your spouse will use this account - You are relying on your Spouse/Co-Applicant's income as a source of repayment.

JOINT CREDIT: Provide information about both of you.

What is your relationship to applicant?

APPLICANT

Complete for secured credit or if you live in a community property state

MARRIED
 SEPARATED
 UNMARRIED (Single, Divorced, Widowed)

NAME (FIRST / INITIAL / LAST)

SOCIAL SECURITY NUMBER	HOME PHONE NUMBER	BIRTHDATE
NO. OF DEP.	AGE OF DEPENDENTS	RESIDENCE
		<input type="checkbox"/> LIVE W/ PARENTS <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER
CURRENT STREET ADDRESS		APT. NO. SINCE
		CELL PHONE
FORMER STREET ADDRESS (IF AT CURRENT ADDRESS LESS THAN 2 YEARS)		YEARS THERE

CO-APPLICANT

Complete for secured credit or if you live in a community property state

MARRIED
 SEPARATED
 UNMARRIED (Single, Divorced, Widowed)

NAME (FIRST / INITIAL / LAST)

SOCIAL SECURITY NUMBER	HOME PHONE NUMBER	BIRTHDATE
NO. OF DEP.	AGE OF DEPENDENTS	RESIDENCE
		<input type="checkbox"/> LIVE W/ PARENTS <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER
CURRENT STREET ADDRESS		APT. NO. SINCE
		CELL PHONE
FORMER STREET ADDRESS (IF AT CURRENT ADDRESS LESS THAN 2 YEARS)		YEARS THERE

EMPLOYMENT AND INCOME *If self-employed, attach current financial statement and your last two years income tax returns.*

CURRENT EMPLOYER	YEARS	MONTHS
STREET ADDRESS		WORK PHONE NUMBER
OCCUPATION / POSITION:	GROSS MONTHLY INCOME	
	\$	
FORMER EMPLOYER - Name/Phone (IF CURRENT EMPLOYER LESS THAN 2 YEARS)	YRS.	
FORMER EMPLOYER - Street, City, State, Zip Code		

CURRENT EMPLOYER	YEARS	MONTHS
STREET ADDRESS		WORK PHONE NUMBER
OCCUPATION / POSITION:	GROSS MONTHLY INCOME	
	\$	
FORMER EMPLOYER - Name/Phone (IF CURRENT EMPLOYER LESS THAN 2 YEARS)	YRS.	
FORMER EMPLOYER - Street, City, State, Zip Code		

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	PHONE	SINCE	MONTHLY INCOME
			\$
OTHER INCOME			

SOURCE OF OTHER INCOME	PHONE	SINCE	MONTHLY INCOME
			\$
OTHER INCOME			

PERSONAL REFERENCE

NEAREST RELATIVE NOT LIVING WITH YOU - NAME/ADDRESS/PHONE	RELATIONSHIP



LOANS AND LIABILITIES (WHAT YOU OWE) - If Additional Space is Required, List on a Separate Sheet

A=Applicant B=Co-Applicant C=Both

INDICATE WHOSE OBLIGATION (X)

CREDITOR	ACCOUNT NUMBER	NAME AND ADDRESS OF CREDITOR	PRESENT BALANCE	MONTHLY PAYMENT	A	B	C
<input type="checkbox"/> 1st Mortgage on Home () house () mobile home () condo							
<input type="checkbox"/> Rent Home or Apartment							
2nd Mortgage							
Other Debt:							
Other (Alimony, Child Support, Etc.)							

MISCELLANEOUS QUESTIONS-Explain "Yes" Answers on a Separate Sheet BOTH APPLICANT AND CO-APPLICANT MUST ANSWER

	APPLICANT	CO-APPLICANT
Are you active in the military? If yes, indicate Branch _____	<input type="checkbox"/> Yes <input type="checkbox"/> No Branch: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No Branch: _____
Have you ever filed a petition for bankruptcy? _____	<input type="checkbox"/> Yes <input type="checkbox"/> No Year Filed: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No Year Filed: _____
Are any suits pending, judgments unsatisfied, alimony or maintenance awards against you? _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had any auto, furniture or other property repossessed? _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any past due bills? _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a co-maker or endorser on another person's note or loan? _____ Name of other person: _____ Amount \$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had credit under any other name? Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you expect any changes in your income and/or employment in the next 90 days? _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

PROPERTY DESCRIPTION (Indicate all that apply (X))

SINGLE FAMILY	2-4 FAMILY	PROPERTY IS: <input type="checkbox"/> PRIMARY RESIDENCE <input type="checkbox"/> SECONDARY RESIDENCE	IS ANYONE OTHER THAN YOURSELF A PART OWNER OF YOUR HOME? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES THEIR NAMES:
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You agree that everything stated in this application, whether oral, written, or through a FAX machine, is true and correct to the best of your knowledge. The Credit Union or its agent is authorized to investigate your credit worthiness, employment history, and to obtain a credit report and to answer questions about their credit history with you. You understand that any 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 Credit Application is approved. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications to Federal Credit Unions or State Chartered Credit Unions insured by NCUA. The USA Patriot Act requires that we obtain, verify, and record information that identifies each person who opens an account.

APPLICANT SIGNATURE X	DATE	CO-APPLICANT SIGNATURE X	DATE
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Information for Government Monitoring Purposes

The following information is requested by the Federal Government for certain types of loans related to a dwelling, in order to monitor the Lender's compliance with equal credit opportunity, fair housing and home mortgage laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations this Lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the below information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the Lender is subject under applicable state law for the particular type of loan applied for).

Borrower: <input type="checkbox"/> I do not wish to furnish this information	Co-Borrower: <input type="checkbox"/> I do not wish to furnish this information
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Black or African American	Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Black or African American
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male

To be Completed by Interviewer Interviewer's Name (print or type) <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Telephone <input type="checkbox"/> Mail <input type="checkbox"/> Internet	Interviewer's Name (print or type)	Name and Address of Interviewer's Employer
	Interviewer's Signature Date	
	Interviewer's Phone Number (incl. area code)	

Mortgage Loan Originator: NMLSR ID #:	Mortgage Loan Officer Name: NMLSR ID #:
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