BILOXI TEACHERS' FEDERAL CREDIT UNION



P.O. BOX 168 BILOXI, MS 39533 228-436-5126

Account/Loan: ☐ Indi		and Co-Applicant each ag	ree and acknowledge the	e intent to apply	for joint credit				
Amount Requested \$ Purpose/Collateral:									
APPLICANT			OTHER COAPPLICANT SPOUSE GUARANTOR						
NAME (Last - First - Initial)			NAME (Last - First - Initial)						
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER	R/INDIVIDUAL TAX ID NUMBER	ACCOUNT NUMBER	SOCIAL SECURITY NUMBER/INDIVIDUAL TAX ID NUMBER					
BIRTH DATE EMAIL ADDRESS		BIRTH DATE EMAIL ADDRESS							
HOME PHONE CELL PHONE		BUSINESS PHONE/EXT.	HOME PHONE	CELL PHONE	BUSINESS PHON	F/FXT			
HOWE I HONE	OLLETTIONE	BOOMESOT HONE/EXT.	HOWETHONE	OLLLITIONE	BOOMESOTTION	L/LXI.			
DRIVER'S LICENSE NUMBER	/STATE AGES OF DE	PENDENTS	DRIVER'S LICENSE NUMBE	R/STATE	AGES OF DEPENDENTS				
BRIVERO EIGENGE HOMBER	7,017,112	ENDENTO	DIVIVER O EIGENGE NOMBE		ACCOUNT DEFENDENTS				
PRESENT ADDRESS (Street – City – State – Zip)		☐OWN ☐RENT LENGTH AT RESIDENCE	PRESENT ADDRESS (Stree	t – City – State – Zip)		☐OWN ☐RENT LENGTH AT RESIDENCE			
		LENOTH NEOLDENOL			EENOWA RES	DENOL			
PREVIOUS ADDRESS (Street – City – State – Zip)			PREVIOUS ADDRESS (Street						
		LENGTH AT RESIDENCE			LENGTH AT RES	IDENCE			
□MARRIED □SEF	PARATED DUNMARRIED	(Single - Divorced - Widowed)	□MARRIED □S	EPARATED DU		dowed)			
		(enigle 2noisea macroa)							
EMPLOYMENT/INCOME			EMPLOYMENT/INCOME						
EMPLOYMENT STATUS	FULL TIME PART TIME	HRS PER WEEK	EMPLOYMENT STATUS	FULL TIME P	PART TIME HRS PER WEEK -				
START DATE:	DI OVED	CUREDVICOR	START DATE:						
NAME AND ADDRESS OF EMPLOYER SUPERVISOR			NAME AND ADDRESS OF EMPLOYER SUPERVISOR						
NOTICE: ALIMONY CHILD SI	IDDODT OD SEDADATE MAIN	TENANCE INCOME NEED NOT	NOTICE: ALIMONY CHILD	CLIDDODT OD CET	DADATE MAINTENANCE INCOME	NEED NOT			
		TENANCE INCOME NEED NOT IDERED. DME PER	NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NO BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED. EMPLOYMENT INCOME PER OTHER INCOME PER						
\$ OTHER INCO		JIVIE FER	\$	FER	\$				
TITLE/GRADE SOURCE			TITLE/GRADE		SOURCE				
PREVIOUS EMPLOYER NAME	AND ADDRESS IF EMPLOYED	LESS THAN TWO YEARS	PREVIOUS EMPLOYER NA	ME AND ADDRESS	IF EMPLOYED LESS THAN TWO Y	EARS			
STARTING DATE	ENDING DA	TE	STARTING DATE	1	ENDING DATE				
	TRANSFER EXPECTED DURIN			ON TRANSFER EXP	ECTED DURING NEXT YEAR?	YES NO			
WHERE	ENI	DING/SEPARATION DATE	WHERE		ENDING/SEPARATION I	DATE			
REFERENCE			REFERENCE						
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			NAME AND ADDRESS OF OTHER REFERENCE NOT LIVING WITH YOU						
RELATIONSHIP	HOME PHO	NE	RELATIONSHIP		HOME PHONE				

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DEBT	CREDITOR NAME OTHER THA (Attach additional sheet(s) if n		INTEREST RATE		PRESENT BALANCE		MONTHLY PAYMENT		OWED BY APPLICANT OTHER	
RENT□	(Attaon additional sheet(s) if the	cococary)							741 1 E107	uti Oilie
FIRST MORTGAGE ☐ (Incl. Tax & Ins.)				%	\$		\$			
(mon rax a mon				%	\$		\$			
				%	\$		\$			
				%	\$		\$			
				%	\$		\$			
				%	\$		\$			
				%	\$		\$			
				%	\$		\$			
				%	\$		\$			
				%	\$		\$			
				%	\$		\$			
	 HICH YOUR CREDIT REFERENCE	S	ТОТ	% ALC	\$		\$			
AND CREDIT HISTORY CAN	I BE CHECKED:		101	ALS	Ф		Ф			
WHAT YOU OWN	V									
ASSET DESCRIPTION	LIST LOCATION OF PROPERTY OR FINANCIAL INSTITUTION			MARKET VALUE PL			PLEDGED AS COLLATERAL FOR ANOTHER LOAN		OWNE	D BY OTHER
						YES NO				
				\$		YE	S NO			
				\$		YE	S NO			
				\$		YE				
OTHER INFORM	ATION ABOUT YOU	IF YOU ANSWER "YES EXPLAIN ON AN ATTA		KING THI	E BOX) TO ANY	QUESTION	OTHER THAN #1	, APPL	ICANT	OTHER
1. ARE YOU A U.S. CITIZEN	NOR PERMANENT RESIDENT ALIE	N?								
	IAVE ANY OUTSTANDING JUDGM HAPTER 13, HAD PROPERTY FOR									
3. IS YOUR INCOME LIKEL	Y TO DECLINE IN THE NEXT TWO	YEARS?								
4. ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE? FOR WHOM (Name of Others Obligated on Loan):										
TO WHOM (Name of Cre	editor):									
SIGNATURES										
and that the above inf authorize the Credit L collection of the credit Credit Union will rely of	ee authenticating below, you ormation is a complete listin Inion to obtain credit reports received and for other according the information in this ap any credit bureau from whith this application.	ng of what you owe. Is in connection with bunts, products, or so plication and your cr	If there are this applications ervices we redit report	any im ation fo may of to mak	portant chang or credit and f fer you or for e its decision	ges you w for any up which you . If you re	vill notify us in odate, increase u may qualify. quest, the Cre	writing in e, renew You und dit Union	mmedia al, exte derstan n will te	ately. You ension, or d that the ell you the
Applicant's Signature		Date	Co-A	pplicant	or Guarantor Sig	ınature			Da	ate
X			X							
CREDIT UNION U	JSE ONLY									
DATE _	ROVED APPROVED LI			NE OF C	REDIT	OTHER				
DECL	LINED	\$	\$			\$				
(Adverse A	ction Notice Sent)									
Loan Officer Signature		Date	Loan	Officer S	Signature				Da	ate
X			_ X							