



# Quick Loan Application

1640 Adams St • 100 Memorial View Ct  
Mankato, MN 56007

507.387.3055 • 800.247.0522  
www.mnvalleyfcu.coop • loan@mnvalleyfcu.coop

Amount Requested: \$ \_\_\_\_\_

Open your account if you live, work, attend school or volunteer in Blue Earth, Nicollet or Le Sueur Counties.

Purpose: \_\_\_\_\_

### APPLICANT

NAME (Last - First - Middle)		HOME PHONE ( )
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER/STATE
BIRTHDATE	AGES OF DEPENDENTS (Exclude Self)	
PRESENT ADDRESS		HOW LONG?
<input type="checkbox"/> Own OR <input type="checkbox"/> Rent Monthly Mortgage or Rent Payment: \$		
PREVIOUS ADDRESS		HOW LONG?

### EMPLOYMENT AND INCOME

NAME OF EMPLOYER		BUSINESS PHONE ( )
TITLE	START DATE	HOURS AT WORK
EMPLOYMENT INCOME: \$	Per <input type="checkbox"/> Net OR <input type="checkbox"/> Gross	OTHER INCOME: \$
NOTICE: ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.		

### CO-APPLICANT (If Applicable)

NAME (Last - First - Middle)		HOME PHONE ( )
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER/STATE
BIRTHDATE	AGES OF DEPENDENTS (Exclude Self)	
PRESENT ADDRESS		HOW LONG?
<input type="checkbox"/> Own OR <input type="checkbox"/> Rent Monthly Mortgage or Rent Payment: \$		
PREVIOUS ADDRESS		HOW LONG?

### EMPLOYMENT AND INCOME (If Applicable)

NAME OF EMPLOYER		BUSINESS PHONE ( )
TITLE	START DATE	HOURS AT WORK
EMPLOYMENT INCOME: \$	Per <input type="checkbox"/> Net OR <input type="checkbox"/> Gross	OTHER INCOME : \$
NOTICE: ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.		

### SIGNATURES

You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is complete. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request , the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA. You understand that the Credit Union may need to request additional information.

X

X

APPLICANT'S SIGNATURE

DATE

CO-APPLICANT SIGNATURE

DATE