Greater Experience Credit Union

2110 Mountcastle Drive, Johnson City, TN 37604
Phone: 423-283-4300 • greaterexperience.org

CREDIT LINE ACCOUNT AND PERSONAL LOAN APPLICATION

ACCOUNT NUMBER – APPLICANT	ACCOUNT NUMBER – CO-APPLICANT	DATE

Applicant Information

PRINT OR TYPE ALL INFORMATION

1. If You live in a community property state, are You:

☐ Married ☐ Separated ☐ Unmarried (Includes Single, Divorced and Widowed)

2. Married applicants can apply for individual credit. Indicate if You would like:

☐ Individual Credit ☐ Joint Credit with Your Spouse/Co-Applicant

3. Method of Payment: ☐ Payroll Deduction ☐ Automatic Share Transfer ☐ Cash Payment

Spouse/Co-Applicant Information

4. Complete Spouse/Co-Applicant Information only if:

a. This is for joint credit with Your Spouse or other Co-Applicant;
b. Your Spouse will use Your Account;
c. You are relying on Your Spouse's income as a source of repayment for the credit requested; or
d. You live in a community property state: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, Wisconsin (or Puerto Rico).

5. Definitions:

Whenever used in this application, the words "You" and "Your" refer to the Applicant(s) or Spouse/Co-Applicant and the words "We," "Us," and "Our" refer to the Lender.

Credit Applied For:

Type of credit _____ Amount Requested $_____

Purpose _____ Collateral Offered _____

There are costs associated with the use of any Credit Card issued to You by Us. You may request specific information about these costs by contacting Us by telephone at (423) 283-4300 (callers from outside Our area code may call collect) or by writing Us at 2110 Mountcastle Drive, Johnson City, TN 37604.

☐ APPLICANT ☐ CO-SIGNER/GUARANTOR

FIRST NAME	INITIAL	LAST NAME	
SOCIAL SECURITY NUMBER			BIRTH DATE
CURRENT STREET ADDRESS		APT. NO.	YEARS THERE
CITY		STATE	ZIP
EMAIL ADDRESS			
FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 2 YEARS)			YEARS THERE
DO YOU: ☐ OWN ☐ RENT ☐ OTHER	HOME TELEPHONE	NO. OF DEP.	AGES OF DEPENDENTS
NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU			

SPOUSE/CO-APPLICANT

FIRST NAME	INITIAL	LAST NAME	
SOCIAL SECURITY NUMBER			BIRTH DATE
CURRENT STREET ADDRESS		APT. NO.	YEARS THERE
CITY		STATE	ZIP
EMAIL ADDRESS			
FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 2 YEARS)			YEARS THERE
DO YOU: ☐ OWN ☐ RENT ☐ OTHER	HOME TELEPHONE	NO. OF DEP.	AGES OF DEPENDENTS
NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU			

EMPLOYMENT AND INCOME

If self-employed, attach financial statement or income tax returns.

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		EMPLOYMENT DATE
ADDRESS/CITY/STATE/ZIP	SUPERVISOR'S NAME	
WORK TELEPHONE	POSITION	MO. GROSS INCOME
FORMER EMPLOYER	POSITION	YEARS THERE

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		EMPLOYMENT DATE
ADDRESS/CITY/STATE/ZIP	SUPERVISOR'S NAME	
WORK TELEPHONE	POSITION	MO. GROSS INCOME
FORMER EMPLOYER	POSITION	YEARS THERE

OTHER INCOME

You need not list income from alimony, child support or separate maintenance payments unless You want it considered in evaluating this credit application.

TYPE OF OTHER INCOME	MONTHLY AMOUNT
NAME AND ADDRESS OF PAYER	

TYPE OF OTHER INCOME	MONTHLY AMOUNT
NAME AND ADDRESS OF PAYER	

ASSETS AND DEPOSITS

Attach a separate sheet if necessary.

DESCRIPTION	ACCOUNT NUMBER/TYPE	BALANCE/VALUE

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CREDIT INFORMATION

Please list all open accounts with or without a balance. Attach separate sheet if necessary.

A=Applicant/Co-Signer/Guarantor C=Spouse/Co-Applicant
D=Debts to be paid off if loan is granted.

PLEASE CHECK A	C	D	LENDER (OR OTHER) NAME & ADDRESS LIST ALL OBLIGATIONS INCLUDING CREDIT UNION LOANS	ACCOUNT NUMBER	INTEREST RATE	ORIGINAL AMOUNT	BALANCE	MONTHLY PAYMENT
☐	☐	☐						
☐	☐	☐						
☐	☐	☐						
☐	☐	☐						
☐	☐	☐						
☐	☐	☐						
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☐	☐	☐						
☐	☐	☐						
☐	☐	☐						
☐	☐	☐						
☐	☐	☐						
						TOTALS		

Please answer the following questions.
If a yes answer is given, explain on attached sheet.

	A YES	A NO	C YES	C NO
1. Have You filed a petition for bankruptcy in the last 10 years?	☐	☐	☐	☐
2. Have You ever had any auto, furniture or property repossessed?	☐	☐	☐	☐
3. Are You a co-maker or co-signer on any loan? For Whom ________________ Amount $ ___________	☐	☐	☐	☐
4. Have You ever had credit in any other name? What name______________________________________	☐	☐	☐	☐
5. Have You any suits pending, judgments filed, alimony or support awards against You?	☐	☐	☐	☐

Please Check: A=Applicant/Co-Signer/Guarantor C=Co-Applicant	A YES	A NO	C YES	C NO
6. Have You any Obligations not listed?	☐	☐	☐	☐
7. Do You have any past due bills?	☐	☐	☐	☐
8. Is any income You have listed likely to reduce in the next 2 years?	☐	☐	☐	☐

9. Indicate immigration status:

Applicant ☐ U.S. Citizen ☐ Permanent U.S. Resident ☐ Other _____________

Co-Applicant ☐ U.S. Citizen ☐ Permanent U.S. Resident ☐ Other _____________

OPTIONAL DEBT PROTECTION

An appropriate application/disclosure will be furnished at the time Your credit is approved.

You must CHECK ONE of the boxes below.

☐ You are interested in Debt Protection Coverage ☐ You are not interested in Debt Protection Coverage

SIGNATURES

You warrant the truth of the above information and You realize that it will be relied upon by Us in deciding whether or not to grant the credit applied for. You hereby authorize Us, Our employees and agents to investigate and verify any information provided to Us by You. If this is a joint application, You agree that such liability is joint and several. You authorize Us to accept Your facsimile signatures on this application and agree that Your facsimile signature will have the same legal force and effect as Your original signature. You assume any risk that may be associated with permitting Us to accept Your facsimile signature.

You hereby acknowledge Your intent to apply for joint credit ______________________________
Applicant's Initials Co-Applicant's Initials

X ______________________________
Signature of Applicant/Co-Signer/Guarantor Date

X ______________________________
Signature of Spouse/Co-Applicant Date

LOAN OFFICER	OTHER APPROVING SIGNATURES
ADVANCE APPROVED ☐ YES ☐ NO ☐ COUNTER OFFER WILL BE MADE. IF ACCEPTED, LOAN APPROVED.	ADVANCE APPROVED ☐ YES ☐ NO ☐ COUNTER OFFER WILL BE MADE. IF ACCEPTED, LOAN APPROVED.
DESCRIBE COUNTER OFFER	
SPECIFIC REASON(S) FOR REJECTION/APPROVAL	
LOAN OFFICER SIGNATURE DATE	CREDIT LIMIT $ ADDITIONAL INFORMATION
CREDIT MANAGER OR OTHER DATE	DEBT TO INCOME RATIO

☐ ECOA NOTICE AND REASON FOR REJECTION OR UNACCEPTED COUNTER-OFFER SENT OR DELIVERED ON (DATE) BY

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