



Application

NOTE AND COMPLETE **NOTICE TO OHIO APPLICANTS:** The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

WISCONSIN RESIDENTS ONLY: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

X _____
SIGNATURE FOR WISCONSIN RESIDENTS ONLY DATE

Married Applicants may apply for a separate account.

Individual Credit: Complete Applicant section. Complete Co-Applicant, Spouse, (referred to as "Other") section: (1) about your spouse if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI), or (2) if your spouse will use the Account. Please check box to indicate whom the information is about.

Joint Credit: Each Applicant must individually complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

Amount Requested \$ _____ Purpose: _____

Repayment: Payroll Deduction Cash Automatic Payment Military Allotment _____

STATEMENT OF INTENT Are you interested in having your loan protected? Yes No
If you answer "yes", the credit union will disclose the cost to protect your loan. The protection is voluntary and does not affect your loan approval. In order for your loan to be covered, you will need to sign a separate application that explains the terms and conditions.

APPLICANT INFORMATION			APPLICANT			OTHER			<input type="checkbox"/> CO-APPLICANT <input type="checkbox"/> SPOUSE				
NAME (Last - First - Initial)			NAME (Last - First - Initial)			NAME (Last - First - Initial)			NAME (Last - First - Initial)				
DRIVER'S LICENSE NUMBER/STATE			BIRTH DATE			DRIVER'S LICENSE NUMBER/STATE			BIRTH DATE				
ACCOUNT NUMBER		SOCIAL SECURITY NUMBER				ACCOUNT NUMBER		SOCIAL SECURITY NUMBER					
HOME PHONE		CELL PHONE		BUSINESS PHONE/EXT.				HOME PHONE		CELL PHONE		BUSINESS PHONE/EXT.	
PRESENT ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT			LENGTH AT RESIDENCE			PRESENT ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT			LENGTH AT RESIDENCE				
PREVIOUS ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT			LENGTH AT RESIDENCE			PREVIOUS ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT			LENGTH AT RESIDENCE				
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)						COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)							
LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)						LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)							

EMPLOYMENT INFORMATION			EMPLOYMENT INFORMATION										
NAME AND ADDRESS OF EMPLOYER			NAME AND ADDRESS OF EMPLOYER										
YOUR TITLE/GRADE		SUPERVISOR'S NAME				YOUR TITLE/GRADE		SUPERVISOR'S NAME					
START DATE		HOURS AT WORK		IF SELF EMPLOYED, TYPE OF BUSINESS				START DATE		HOURS AT WORK		IF SELF EMPLOYED, TYPE OF BUSINESS	
IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS						IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS							
STARTING DATE		ENDING DATE				STARTING DATE		ENDING DATE					
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE						MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE							
ENDING/SEPARATION DATE						ENDING/SEPARATION DATE							

INCOME INFORMATION			INCOME INFORMATION										
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 need not be revealed if you do not choose to have it considered.							
EMPLOYMENT INCOME \$		PER		<input type="checkbox"/> NET <input type="checkbox"/> GROSS				EMPLOYMENT INCOME \$		PER		<input type="checkbox"/> NET <input type="checkbox"/> GROSS	
OTHER INCOME \$		SOURCE				OTHER INCOME \$		SOURCE					

REFERENCES			REFERENCES								
Please include Street, City, State and Zip.						Please include Street, City, State and Zip.					
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU						NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU					
RELATIONSHIP		HOME PHONE				RELATIONSHIP		HOME PHONE			
NAME AND ADDRESS OF PERSONAL FRIEND - NOT A RELATIVE						NAME AND ADDRESS OF PERSONAL FRIEND - NOT A RELATIVE					
HOME PHONE						HOME PHONE					

ASSETS/PROPERTY		Check box for Applicant/Other. List all assets and account number(s)-- Attach other sheets if necessary.						
APPLICANT			OTHER (CO-APPLICANT, SPOUSE)					
SHARE DRAFT OR CHECKING AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY		SHARE DRAFT OR CHECKING AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY				
SAVINGS AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY		SAVINGS AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY				
APPLICANT	OTHER		LIST HOME AND ALL OTHER ITEMS YOU OWN AND LOCATION OF PROPERTY For Example: Auto, Boat, Stocks, Bonds, Cash, Household Goods, Real Estate, etc.	MARKET VALUE	PLEGED AS COLLATERAL FOR ANOTHER LOAN			
		HOME*		\$	YES	NO		
				\$	YES	NO		
				\$	YES	NO		
*LIST EVERY LIEN AGAINST YOUR HOME -- This section must be completed for the property which will be given as security, if applicable. A lien is a legal claim filed against property as security for payment of a debt. Liens include mortgages, deeds of trust, land contracts, judgments and past due taxes.								
FIRST MORTGAGE HELD BY			OTHER LIENS (Describe)					
PRESENT BALANCE \$								
IS THE PROPERTY DESCRIBED IN THIS SECTION: YOUR PRINCIPAL DWELLING? <input type="checkbox"/> YES <input type="checkbox"/> NO			IS ANYONE OTHER THAN YOUR SPOUSE A PART OWNER OF YOUR HOME? <input type="checkbox"/> YES <input type="checkbox"/> NO					
LISTED AS THE APPLICANT'S ADDRESS IN THE "APPLICANT INFORMATION" SECTION? <input type="checkbox"/> YES <input type="checkbox"/> NO								
DEBTS In addition to Rent/Mortgage list all other debts (for example, auto loans, credit cards, second mortgage, home assoc. dues, alimony, child support, child care, medical, utilities, auto insurance, IRS liabilities, etc.) Please use a separate line for each credit card and auto loan. Attach other sheets if necessary.								
APPLICANT	OTHER	<input type="checkbox"/> RENT <input type="checkbox"/> MORTGAGE (incl. Tax & Ins.)	CREDITOR NAME AND ADDRESS	ACCOUNT NUMBER	ORIGINAL BALANCE	PRESENT BALANCE	MONTHLY PAYMENT	PAST DUE
					\$	\$	\$	
					\$	\$	\$	
					\$	\$	\$	
					\$	\$	\$	
					\$	\$	\$	
					\$	\$	\$	
LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHECKED					TOTALS	\$	\$	\$

FINANCIAL INFORMATION		These questions apply to both Applicant and Other.			
IF A "YES" ANSWER IS GIVEN TO A QUESTION, EXPLAIN ON AN ATTACHED SHEET					
DO YOU HAVE ANY OUTSTANDING JUDGMENTS?					
HAVE YOU EVER FILED FOR BANKRUPTCY OR HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13?					
HAVE YOU HAD PROPERTY FORECLOSED UPON OR GIVEN A DEED IN LIEU OF FORECLOSURE IN THE LAST 7 YEARS?					
ARE YOU A PARTY IN A LAWSUIT?					
ARE YOU OTHER THAN A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?					
IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?					
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 Creditor):		

APPLICANT		OTHER	
YES	NO	YES	NO

SIGNATURES	
<p>You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of all your debts and obligations. You authorize the credit union to obtain credit reports in connection with this application for credit and for any update, renewal or extension of the credit received. 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. You understand that it is a crime to willfully and deliberately provide incomplete or incorrect information in this application.</p> <p>If there are any important changes, you will notify us in writing immediately. You also agree to notify us of any change in your name, address or employment within a reasonable time thereafter.</p>	
<div style="border: 1px solid black; padding: 5px; display: inline-block;">X</div>	<div style="border: 1px solid black; padding: 5px; display: inline-block;">X</div>
(SEAL)	(SEAL)
APPLICANT'S SIGNATURE	DATE
OTHER SIGNATURE	DATE

CREDIT UNION INFORMATION	
<input type="checkbox"/> LOAN OFFICER	ADVANCE APPROVED: <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> CREDIT COMMITTEE OR OTHER	COUNTER OFFER WILL BE MADE, IF ACCEPTED, ADVANCE APPROVED
	OUTSIDE INFORMATION CONSIDERED: <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, ATTACH ADDITIONAL SHEET AND DESCRIBE
	\$ _____ APPROVED LIMIT _____ DEBT RATIO _____
REFERRED TO/REASON(S) FOR REFERRAL:	
DESCRIBE COUNTER OFFER:	
SPECIFIC REASON(S) FOR REJECTION:	
SIGNATURES:	DATE
<input type="checkbox"/> LOAN OFFICER X	X
<input type="checkbox"/> CREDIT COMMITTEE X	X
<input type="checkbox"/> ECOA NOTICE AND REASON FOR REJECTION SENT OR DELIVERED ON	(DATE) BY (INITIALS)
Diebold Federal Credit Union	423099
LOAN ORIGINATOR ORGANIZATION	NMLSR ID NUMBER
Amber Osmar	712837
LOAN ORIGINATOR	NMLSR ID NUMBER

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 disclosure laws. You are not required to furnish this information, but are encouraged to do so. You may select one or more designations for "race". The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, under federal regulations the lender is required to note ethnicity, race and sex on the basis of visual observation or surname. **If you do not wish to furnish the information, please check below.**

Applicant

I do not wish to furnish this information.

Co-Applicant

I do not wish to furnish this information.

Ethnicity

- Hispanic or Latino
- Not Hispanic or Latino

Ethnicity

- Hispanic or Latino
- Not Hispanic or Latino

Race or National Origin

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

Race or National Origin

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

Sex

- Female
- Male

Sex

- Female
- Male

Date of Birth _____

Date of Birth _____

Signature Date

Signature Date

Print or Type Name

Print or Type Name

FOR CREDIT UNION USE ONLY:

Complete this section **ONLY** if applicant or co-applicant elects not to provide this information and the application is taken in person:

Noted Ethnicity: Applicant _____
 Noted Race: Applicant _____
 Noted Sex: Applicant _____

Co-Applicant _____
 Co-Applicant _____
 Co-Applicant _____

I hereby certify that I have noted this information based on visual observation or surname.

Signature of Credit Union Employee

Print Name of Credit Union Employee

Date