

Big Island Federal Credit Union's ***EXPRESS LOAN APPLICATION***

To apply for a loan, simply fill out the form below and FAX, MAIL or STOP BY one of our branches!

Amount Requested: _____ Loan Type: _____ Term: _____ months

Purpose: _____ Joint Individual

Applicant:

Spouse/Co-Applicant:

Last Name First Name M.I.

Last Name First Name M.I.

Home Address City State Zip

Home Address City State Zip

Date of Residence Date of Birth

Date of Residence Date of Birth

SSN Home Telephone

SSN Home Telephone

Name of Employer Business Telephone

Name of Employer Business Telephone

Business Address City State Zip

Business Address City State Zip

Gross Monthly Pay

Gross Monthly Pay

Job Title Start Date

Job Title Start Date

Do you: Rent Own Other Monthly: \$ _____

Do you: Rent Own Other Monthly: \$ _____

Name of Landlord or Mortgagor

Name of Landlord or Mortgagor

Address of Landlord or Mortgagor

Address of Landlord or Mortgagor

Other income (Source & Amount*) # of dependents

Other income (Source & Amount*) # of dependents

Name of personal reference Phone No.

Name of personal reference Phone No.

Address of personal reference

Address of personal reference

*NOTE: Alimony child support, or separate maintenance income need not be revealed if you do not choose to have it considered as a basis for this credit request.

I agree that everything I have stated in this application is correct to the best of my knowledge. I 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. I understand that 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.

If applicable, I authorize the credit union to accept my facsimile signature on this application and agree that my facsimile signature will have the same legal force and effect as my original signature. I assume and accept any risk that may be associated with permitting the credit union to accept my facsimile signature.

Applicant Signature Date

Co-Applicant's Signature Date