



Geauga Credit Union, Inc.

P.O. Box 839
14499 N Cheshire St.
Burton, Ohio 44021
Phone: (440) 834-4327 • (800) 333-5971
Fax: (440) 834-0455
www.geaugacreditunion.com



Application

Married Applicants: May apply for a separate account.

Individual Credit: You must complete the **Applicant** section about yourself and the **Other** section about your spouse if:

1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI),
2. your spouse will use the account, or
3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.

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

Guarantor: Complete the **Other** section if you are a guarantor on an account/loan.

☐ **LOANLINER Account/Loan:** ☐ Individual ☐ Joint

(Including ATM/Debit Card Access to the Account if Available)

Amount Requested \$

Purpose/Collateral:

Repayment: ☐ Payroll Deduction ☐ Cash ☐ Military Allotment ☐ Automatic Payment

PAYMENT PROTECTION

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

NAME

ACCOUNT NUMBER

SOCIAL SECURITY NUMBER

DRIVER'S LICENSE NUMBER/STATE

AGES OF DEPENDENTS

EMAIL ADDRESS

BIRTH DATE

HOME PHONE

CELL PHONE

BUSINESS PHONE/EXT.

PRESENT ADDRESS (Street - City - State - Zip)

☐ OWN ☐ RENT

LENGTH AT RESIDENCE

PREVIOUS ADDRESS (Street - City - State - Zip)

☐ OWN ☐ RENT

LENGTH AT RESIDENCE

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:

☐ MARRIED ☐ SEPARATED ☐ UNMARRIED (Single - Divorced - Widowed)

EMPLOYMENT/INCOME

NAME AND ADDRESS OF EMPLOYER

TITLE/GRADE

START DATE

HOURS AT WORK

SUPERVISOR'S NAME

IF SELF EMPLOYED, TYPE OF BUSINESS

NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.

EMPLOYMENT INCOME

\$ _____ Per _____

OTHER INCOME

\$ _____ Per _____

☐ NET ☐ GROSS

SOURCE

MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? ☐ YES ☐ NO

WHERE

ENDING/SEPARATION DATE

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS

STARTING DATE

ENDING DATE

REFERENCE

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU

RELATIONSHIP

HOME PHONE

OTHER

☐ CO-APPLICANT ☐ SPOUSE ☐ OTHER

NAME

ACCOUNT NUMBER

SOCIAL SECURITY NUMBER

DRIVER'S LICENSE NUMBER/STATE

AGES OF DEPENDENTS

EMAIL ADDRESS

BIRTH DATE

HOME PHONE

CELL PHONE

BUSINESS PHONE/EXT.

PRESENT ADDRESS (Street - City - State - Zip)

☐ OWN ☐ RENT

LENGTH AT RESIDENCE

PREVIOUS ADDRESS (Street - City - State - Zip)

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NAME AND ADDRESS OF EMPLOYER

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IF SELF EMPLOYED, TYPE OF BUSINESS

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EMPLOYMENT INCOME

\$ _____ Per _____

OTHER INCOME

\$ _____ Per _____

☐ NET ☐ GROSS

SOURCE

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PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS

STARTING DATE

ENDING DATE

REFERENCE

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU

RELATIONSHIP

HOME PHONE

WHAT YOU OWE	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)	INTEREST RATE	PRESENT BALANCE	MONTHLY PAYMENT	OWED BY	
					APPLICANT	OTHER
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHECKED:			TOTALS	\$	\$	

WHAT YOU OWN	LIST LOCATION OF PROPERTY OR FINANCIAL INSTITUTION	MARKET VALUE	PLEGGED AS COLLATERAL FOR ANOTHER LOAN		OWNED BY	
			YES	NO	APPLICANT	OTHER
		\$		YES		NO
		\$		YES		NO
		\$		YES		NO
		\$		YES		NO
		\$		YES		NO
		\$		YES		NO
		\$		YES		NO
		\$		YES		NO
		\$		YES		NO
		\$		YES		NO

OTHER INFORMATION ABOUT YOU	IF YOU ANSWER "YES" TO ANY QUESTION OTHER THAN #1, EXPLAIN ON AN ATTACHED SHEET	APPLICANT	OTHER
1. ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?			
2. DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGMENTS OR HAVE YOU EVER FILED FOR BANKRUPTCY, HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13, HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST 7 YEARS, OR BEEN A PARTY IN A LAWSUIT?			
3. IS YOUR INCOME LIKELY 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 Creditor):		

STATE LAW NOTICES **OHIO RESIDENTS ONLY:** The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy 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.

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.

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

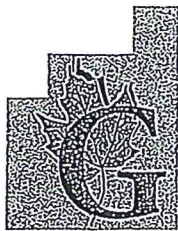
X SIGNATURE FOR WISCONSIN RESIDENTS ONLY DATE

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 a complete listing of what you owe. 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 crime to willfully and deliberately provide incomplete or incorrect information in this application.

X (SEAL)	DATE	X (SEAL)	DATE
APPLICANT'S SIGNATURE		OTHER SIGNATURE	

FOR CREDIT UNION USE ONLY							
DATE	APPROVED DENIED (Adverse Action Notice Sent)	APPROVED LIMITS:	SIGNATURE	LINE OF CREDIT	OTHER	OTHER	DEBT RATIO/SCORE BEFORE AFTER
			\$	\$	\$	\$	
LOAN OFFICER COMMENTS:							
SIGNATURES:							
X				X			
DATE				DATE			



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Borrower's Certification & Authorization

CERTIFICATION The undersigned certify the following:

1. I/We have applied for a loan from GEAUGA CREDIT UNION. In applying for the loan, I/we completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/we omit any pertinent information.
2. I/We understand and agree that GEAUGA CREDIT UNION reserves the right to change the loan review process to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this loan, as applicable under the provisions of Title 18, United States Code, Section 1014.

Authorization to Release Information

To Whom It May Concern:

1. I/We have applied for a loan from GEAUGA CREDIT UNION. As part of the application process, GEAUGA CREDIT UNION may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.
2. I/We authorize you to provide to GEAUGA CREDIT UNION, and to any investor to whom GEAUGA CREDIT UNION may sell my/our loan, any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances; credit history; and copies of income tax returns.
3. GEAUGA CREDIT UNION or any investor that purchases the loan may address this authorization to any party named in the loan application.
4. A copy of this authorization may be accepted as an original.
5. Your prompt reply to GEAUGA CREDIT UNION or the investor that purchased the loan is appreciated.

NOTICE TO BORROWERS: This is notice to you as required by the Right to Financial Privacy Act of 1978 that HUD/FHA has a right of access to financial records held by financial institutions in connection with the consideration or administration of assistance to you. Financial records involving your transaction will be available to HUD/FHA without further notice or authorization but will not be disclosed or released by this institution to another Government Agency or Department without your consent except as required or permitted by law.

Borrower's Signature

Borrower's Signature

OPTIONAL CREDIT INSURANCE

Credit life or credit accident and health insurance is protection for both the buyer and seller.

You are entitled to a copy of the policy or certificate of insurance within thirty days after credit is extended.

You **ARE NOT** required to buy credit life insurance or credit accident and health insurance from any particular company or agent. You may use existing policies if insurance is required as additional security.

If you buy credit life insurance, the proceeds will be used to reduce or pay off your unpaid loan or indebtedness when you die. Any insurance proceeds in excess of the amount required to pay off the loan will be paid to your beneficiary or estate.

READ your policy or certificate **CAREFULLY** for what the policy **DOES NOT** cover. For example: Some policies do not pay disability benefits unless you are disabled for 14 or 30 days or if you have a pre-existing condition. Some policies will not provide coverage if you are over age 65. See the policy for details on these.

You may not be eligible for credit accident and health insurance unless you now work at least 25 hours per week.

The customer, debtor, or lessee, shall use this mandated disclosure form and shall initial the appropriate boxes below.

By initialing below, the customer, debtor or lessee acknowledges that he has accepted or declined credit life or credit accident and health insurance.

☐

ACCEPTS CREDIT LIFE INSURANCE

☐

DECLINES CREDIT LIFE INSURANCE

☐

ACCEPTS CREDIT ACCIDENT AND HEALTH INSURANCE

☐

DECLINES CREDIT ACCIDENT AND HEALTH INSURANCE

Please be sure to **INITIAL** in the appropriate boxes. We **cannot** accept with only X's or checkmarks. Thank You

IT IS THE INTENT OF THIS FORM THAT THE DISCLOSURES ARE EASILY SEEN.
THERE SHALL BE NOTHING ELSE ON THIS PAGE.

GAP Plus

Guaranteed Auto Protection

Geauga Credit Union, Inc. has a Great Offer!
What your Insurance Company doesn't cover GAP Plus will.

Purchasing this vehicle is an important decision for you. Did you know that if this vehicle were to be totaled or stolen, your insurance company might not pay off the entire balance?

That's because your Insurance company settlement is based on the vehicle's actual cash value. Vehicles depreciate and the outstanding loan balance is usually higher than the actual cash value. You could end up having to pay off a remaining loan balance for a vehicle you can no longer drive.

We have a product called Guaranteed Auto Protection Plus or GAP Plus that can save you from suffering such a financial loss. **GAP Plus** would pay the difference between your insurance settlement and your loan balance. The cost for this product is only a one-time payment of \$345.00 and can be financed with the loan or paid for up front.

An additional benefit provided by GAP Plus provides you with \$1,000 toward the financing of a replacement vehicle when financed through Geauga Credit Union should you experience a total loss. You are eligible for the \$1,000 regardless of whether or not you experienced a total loss that had an actual GAP Plus amount waived.**

EXAMPLE: Joe Smith purchases a car for \$14,500 and finances the loan through Geauga Credit Union. Six months down the road Joe gets in an accident and totals his car. His insurance company determined the car to be worth \$10,500 and pays this amount to Geauga Credit Union but Joe still owes \$12,500 on the loan. This leaves Joe responsible for \$2,000 out of pocket! That's where **GAP Plus** comes into play; **GAP Plus** will pay the remaining \$2,000 to Geauga Credit Union so Joe does not have to. Also, if Joe finances his new vehicle with Geauga Credit Union, he gets an additional \$1,000 toward his loan.

_____ YES, sign me up for GAP Plus Coverage

_____ Please add GAP Plus Coverage onto my Loan

_____ I will pay for GAP Plus Coverage when I sign the final loan papers

_____ NO, I do not want GAP Plus Coverage at this time

Applicant's Printed Name

Applicant's Signature

Date

Co-Applicant's Printed Name

Co-Applicant's Signature

Date

*Subject to policy limitations

** Finance of new or used vehicle must be done within 90 days from the GAP Plus claim being paid.

***** JUST A REMINDER: the member filling out the left hand side of the loan application, must be the main holder (first name) on the share account. *****

LISTED BELOW ARE THE DOCUMENTS WHICH WE REQUIRE.

- ***1. Proof of income** (one of the following)
 - A. Copy of pay stubs for the most recent month.
 - B. Retirement/disability income: benefit/award letter, or current bank statement showing deposits.
 - C. Self-employment: last 2 years income tax returns and year to date profit loss statement
- ***2. Verification letter** of rent, mortgage payment, mobile home payment, lot rent, etc., if applicant is not responsible for housing expenses.

IF YOU ARE PURCHASING A VEHICLE THROUGH A DEALERSHIP OR PRIVATE OWNER, THE FOLLOWING ARE REQUIRED.

- ***1. Vehicle from dealership**
 - A. Purchase agreement (invoice) from dealer-must list specifics of vehicle (year, make, model, mileage and any extra options). **GCU does NOT finance Salvage Rebuild autos.**
- ***2. Vehicle from private owner**
 - A. Year, make, model, mileage, etc., and **VIN number**, as well as list of options. We will determine value using NADA clean retail value. **GCU does NOT finance Salvage Rebuild autos.**
 - B. **Does current owner have a clear title?**
If not, we need payoff information: Account number; 10 day payoff; per diem; and name and address of bank to send check to. In most cases, the bank will not give us the information over the phone, so it is the **seller's responsibility to provide this information. We will need seller's name and address.**
 - C. Used vehicles through a private owner **must be viewed by Geauga Credit Union before the loan can be processed. No out of state personal sales will be considered.**
 - D. **The title must be in the buyer's name before Geauga Credit Union will disburse money.** These requirements apply to any titled vehicle loan: automobile, snowmobile, 4 wheeler, motorcycle, RV, etc.
 - E. **You are responsible for all sales tax.** Make check payable to Geauga Clerk of Courts for the appropriate tax due based on your county of residence.
 - F. **Seller may be required to sign a POA to GCU to assign title to buyer.**

Other loans:

- ***1. Computer loans:** we need an invoice from the computer company/store listing the year, make, model, serial number, purchase price, etc.

MISCELLANEOUS INFORMATION

- ***1. Bankruptcy filings**
If a bankruptcy has been previously filed, it must have been discharged at least 6 months prior to loan application. If the discharge does not appear on borrower's credit report, a copy of discharge must be provided to GCU.
- ***2. Credit disability / credit life**
Insurance is available at your request. Please initial insurance form in applicable boxes.

These documents are necessary before any loan/visa application will be processed. There may be other requirements based on individual credit worthiness. Please contact our office if you have any questions at (440) 834-4327 or 1-800-333-5971.

**LOAN APPLICATION WILL NOT BE REVIEWED BY THE
LOAN OFFICER/CREDIT COMMITTEE WITHOUT THE ABOVE INFORMATION.**