TCCU

TAYLORVILLE COMMUNITY CREDIT UNION

P.O. Box 413 801 W. Union Ave. Litchfield, IL 62056 (217) 324-7496 www.tccu.org

Consumer Loan Checklist

- Complete both sides of application and sign and date bottom of 2nd page
- Need proof of income from the last 30 days
- Sales invoice with make, model, mileage, and VIN number of collateral being purchased or refinanced
- If purchasing from individual then written sales invoice of purchase price with copy of title (if possible)
- Proof of insurance-insurance company, name of agent, address and phone number
- Payoff information for current loan (if applicable)

TCCU TAYLORVILLE COMMUNITY CREDIT UNION

HILLSBORO 138 E. Wood Hillsboro, Illinois 62049 PANA 308 S. Poplar Pana, Illinois 62557 LITCHFIELD 801 W. Union Litchfield, Illinois 62056 **TAYLORVILLE** 422 West Main Cross Taylorville, Illinois 62568

CREDIT APPLICATION

TYPE OF CREDIT REQUESTED			Date of Application				
☐ Secured ☐ Unsecured			Amount \$ How Long				
☐ Individual Credit - relying on my income or assets.							
Individual Credit - relying on my ind	come or assets as well as inco	me or assets	–	. –			
from other sources. Joint Credit.							
		Acct	No,				
SECTION A - INDIVIDUAL APPL	ICANT INFORMATION						
LAST FIRST	M.E.						
				Tel, No			
Social Security #		Driver	s License #				
Present Address	City	State	Zip	County	How Long		
Previous Address	City	State	Zip	County	How Long		
Have you applied for credit with us bet	fore? 🔲 No 🔲 Yes - W	hen?	No. Dep	Dep. Ages			
Employer (Company Name & Address	3)				How Long		
Bus. Tel Pos	ition/Title	How C	often Paid?	Take Home Salary Pe	er Month \$		
Previous Employer (Company Name 8	Address)				How Long		
Bus. Tel Pos	ition/Title	How C	often Paid?	Take Home Salary Pe	er Month \$		
Alimony, child support, or separa	te maintenance income need	d not be revealed if you	do not wish to have	ve it considered as a basis fo	r repaying this obligation.		
Alimony, child supp	oort, separate maintenance r	eceived under: 🔲 Co	urt Order 🔲 Writ	iten Agreement 🔲 Oral Un	derstanding		
Sources of Other Income				Amount P	er Month \$		
Name of Nearest Relative Not Living V	With You			Relationship			
Address				Tel. No. ()			
Personal Reference: Name							
Address							
				, , , , , , , , , , , , , , , , , , ,			
SECTION B - JOINT APPLICAN							
Complete only if: for joint credit, for inc	lividual credit relying on incom	e or assets from other so	ources, or applicant	is married and resides in a con	imunity property state.		
Name	Mr.c.	Pirth Data	, ,	Tol Mo			
Social Security #							
Present Address							
Previous Address		State	Zip	County	How Long		
Relationship to applicant							
Have you applied for credit with us bet							
Employer (Company Name & Address					How Long		
Bus. TelPosi	ition/Title	How 0	often Paid?	Take Home Salary Pe			
Previous Employer (Company Name 8					 		
Bus. Tel Posi							
Alimony, child support, or separa		•					
Alimony, child supp	ort, separate maintenance r	eceived under: 🔲 Co	urt Order 🔲 Writ	ten Agreement 🔲 Oral Un			
Sources of Other Income				Amount P	er Month \$		
Name of Nearest Relative Not Living V	With You			Relationship			
Address				Tel. No. ()			
Personal Reference: Name							
Address				Tel. No. ()			
CECTION C MADUTAL CTATUS							
SECTION C - MARITAL STATUS Complete only if: for joint or secured of		Community property of	ete or is rolving on	property located in such a -t-t	e (tipoludes single diversed		
and widowed)	леок, ог аррисант resides in a	a community property St	re or is reiving on t	property localed in such a stat	s. (miciudes single, divorced		
Applicant Marris	d Disparated I) Inmarried*	Other Berty	Marriad Separate	ad Dillummaniad*		

SECTION D - ASSET & DEBT INFORMATION If Section B has been completed, this Section shows the section of the sec	uld be completed giving inform	ation about both the Applicant and	Joint Applicant or (Other Pers	on. Pleas	se mark Applicant-
related information with an "A". If Section B was not assert a section B was not assert as a section B was not a section B was not as a section B was not a section B was		tion about the Applicant in this Se	ction.			
DESCRIPTION OF ASSETS		NAME IN WHICH THE A	NAME IN WHICH THE ACCOUNT IS CARRIED			
Checking Account Number(s) (where)				VALUE \$		
Savings Account Number(s) (where)						
Other Assets (describe)						
TOTAL ASSETS				\$		
OUTSTANDING DEBTS (Include charge accounts	, installment contracts, credit c	 ards, rent, mortgages and other o 	bligations. Use sepa	arate shee	t if neces	sary.)
CREDITOR	ACCOUNT NUMBER	NAME THE ACCT. IS UNDER	ORIGINAL AMT.	PRESE	VT BAL.	MO. PMTS.
Landlord or Mortgage Holder	Rent Payment Mortgage		(OMIT RENT)	(OMIT	RENT)	\$
Automobiles (make, model, year)						
Credit Cards and other debts						
TOTAL DEBTS			\$	\$		\$
Complete the follow Are you obligated to make Alimony, Support or Ma If yes, to (Name & Address) Are you a comaker, endorser, or guarantor on any Are there any unsatisfied judgments against you?	intenance Payments? No loan or contract? No No Yes	If yes, for whom?		Amou		
Have you been declared bankrupt? \(\bigcap\) No \(\bigcap\) Yes						
SECTION E - SECURED CREDIT						1001
Complete only if credit is to be secured. Briefly des			·			
Names & Addresses of all co-owners of the proper If the security is real estate, give the full name of you						
Each of the undersigned hereby represent and warrant to To obtaining or maintaining credit with TCCU on behalf of the Each of the undersigned agrees and understands that TCC credit; 3) Each of the undersigned has read and understand closes and lists the kind, nature and complete and fully discial statement as continuing to be true and correct until a womit any information, or that it was unnecessary to disclose verify the accuracy of the statements made herein and to capproved and TCCU is authorized to answer questions or restands it is a federal and state crime to knowingly make a fail	undersigned, or persons, firms or c U is relying on the Information provs is all information provided in this final loses and lists the kind, nature and ritten notice of a change is given to or list any assets, income or debts in letermine the undersigned's credit equests from others seeking credit	orporations in whose behalf of the uno rided herein (including the designation ancial statement, and the information pil extent of all the undersigned's assets, a TCCU by the undersigned; 5) No per on this financial statement; 6) TCCU is worthiness, but is not obligated to do so or experience information about the un	dersigned may agree to made as to ownership rovided in this financial income and debts as o son employed by TCC authorized to make any to; 7) TCCU may retain	o be liable, of property statement i f this date; U has told o y and all inq n this finance	severally on the control of the cont	r jointly with others; 2) ng to grant or continue complete and fully dis- nay consider this finan- it to the undersigned to U deems necessary to ent even if credit is not
Signature of Applicant		Date				
Signature of Applicant						
Signature of Applicant		Date				
Signature of Applicant			Date			

CONSENT FOR NONAFFILIATED THIRD PARTIES TO DISCLOSE TO TCCU "NONPUBLIC PERSONAL

INFORMATION" CONCERNING THE UNDERSIGNED

In consideration of the undersigned applying for membership with and/or applying for credit from and/or obtaining credit and/or loan(s) from and/or establishing any and all account(s) (including share draft checking, savings, ATM, VISA, debit card, and Christmas Club account(s)) with Taylorville Community Credit Union ("TCCU"), the undersigned, individually and collectively, hereby voluntarily consent(s) and agree(s) that TCCU may, from time to time, obtain any and all written or oral "nonpublic personal information" which shall include, but not limited to, and any all personal and/or financial and/or lending and/or collection and/or loan history and/or account(s) information of any kind, nature, or extent whatsoever, relating to any one or more of the undersigned persons from any and all other financial institutions, credit reporting agencies, insurance companies, employers, governmental entities or agencies, collection agencies or entities, motor vehicle and/or watercraft dealerships, and any and all other third persons or entities (herein individually and collectively referred to as "nonaffiliated third parties")

Any and all nonaffiliated third parties are hereby authorized to rely upon a copy or facsimile copy of this signed Consent without requiring a duplicate signed original thereof.

This consent is intended to be an authorized consent by the undersigned in compliance with and under the Gramm-Leach-Bliley Act, known as the Financial Services Modernization Act, a federal privacy law, and the Federal Regulations adopted there under (a/k/a " Privacy Law") and in compliance with and under any and all other applicable statues, laws, and regulations.

Date Signed:	-
Witness:	_