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## AUTO LOAN APPLICATION

## MEMBER'S INFORMATION

FIRST & LAST NAME						
HOME ADDRESS						
RESIDED AT THIS ADDRESS SINCE (Please list month and year)						
ACCOUNT NUMBER	EMAIL ADDRESS					
BIRTHDATE	DRIVER'S LICENSE NUMBER		STATE			
SOCIAL SECURITY #		GROSS MONTHLY INCOME				
HOME PHONE	CELL	WORK	PREFERRED? H   W   C			
NAME & ADDRESS OF EMPLOYER						
START DATE	SUPERVISOR'S N	AME				
WHICH DO YOU PAY (Please check one)  RENT MORTGAGE MONTHLY AMOUNT \$						
ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN? (Please check one) 🗌 YES 🛛 NO						
AMOUNT REQUESTED \$						
SPOUSE OR CO-APPLICANT INFORMATION (OPTIONAL)						
FIRST & LAST NAME						
HOME ADDRESS						

RESIDED AT THIS ADDRESS SINC	<b>E</b> (Please list month and year)		
ACCOUNT NUMBER		_ EMAIL ADDRESS	
BIRTHDATE	_ DRIVER'S LICENSE NUMBER		STATE
SOCIAL SECURITY #		ROSS MONTHLY INCOME	
HOME PHONE	CELL	WORK	PREFERRED? H   W   C
NAME & ADDRESS OF EMPLOYER			
START DATE	SUPERVISOR'S NAME		
WHICH DO YOU PAY (Please check	(one) 🗌 RENT 🗌 MORTGAGE	MONTHLY AMOUNT \$	
ARE YOU A U.S. CITIZEN OR PERM	ANENT RESIDENT ALIEN? (Plea	se check one) 🗌 YES 🗌 NO	

\*Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered as a basis for repayment. If self-employed, please supply last 2 years of tax returns. You promise that everything you have stated in this application is correct to the best of your knowledge. 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. Terms and Conditions: By signing below, I/we authorize Liberty Savings Federal Credit Union to check my/our credit and employment history and report my/our credit performance to others who may properly receive this information. I/we understand that you may contact me/us for further information and that this application must be completed for the credit union to process my/our request.

CO-APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

