

TOWPATH CREDIT UNION

ACCOUNT#

STRETCHPAY LOAN APPLICATION

Individual Applicant Information	
Name:	S.S. #
Address:	City: State: Zip:
Home Phone: Cell Phone:	How long have you lived at current address:
Own ___ Rent ___	Years ___ Months ___
Email Address:	Drivers License#/State of Issue:
Financial Information	
Checking Institution Name:	Routing#: Account#
Are you currently contemplating filing Bankruptcy of any kind? ___ Yes ___ No	
Are you currently in the process of any Bankruptcy proceedings? ___ Yes ___ No	
Any suits or judgments against you? ___ Yes ___ No	If yes, explain.
Are you currently a participant in consumer credit counseling or any other debt management program? ___ Yes ___ No	
Employment Information	
Employer:	Employer Address:
Work phone: Hire Date:	Job Title: ___ Full Time ___ Part Time
Gross Wages per pay period:	Pay period: ___ weekly ___ biweekly ___ semi-monthly ___ monthly
Is your paycheck direct deposited? ___ Yes ___ No Where: _____	
Reference Information (Must Provide Two References)	
Reference #1 Name:	Reference #2 Name:
Address:	Address:
Phone:	Phone:
Relationship to you:	Relationship to you:
Authorization	
<p>I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below, I authorize you to check my credit and employment history, to have a consumer credit report prepared on me for the purpose of evaluating this application for credit, and to answer questions others may ask you about my credit record with you. I understand that I must update this credit information at your request and if my financial condition changes. 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. Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of fraud.</p>	
Applicant Signature/Date	
For Credit Union Use Only: ___ Approved ___ Denied	Amount: _____ Reasons: _____
<p>_____ Loan Officer(s) Signature/Date</p>	
revised 1/4/2010	