

Instructions for the Loan Application and the blank Application

Member:

Please forward recent income statements (paystubs) of all household income to your credit union office.

IF possible, email a very good picture of the front of each of your driver's licenses (picture ID). (from a cellphone?)

If you did not put a general purpose for the loan request on the application, please give one in a note along with the income statement (paystubs).

If you are retired and your Social Security or Pension is not deposited into the credit union, please send a copy of either an award letter or copy of your bank statement showing the latest deposited amount(s).

If you are permanently disabled and on fixed income, and your SSI, etc. is not deposited directly into your account at KEMBA Louisville CU, please send a copy of your bank statement showing the latest deposited amount(s).

The credit union's FAX number is (502) 459-4528
or
you may scan/email a reply to this email.

Other options are:

1. If you are a Kroger employee, you may use the interoffice-store mail system or U.S. mail
2. Drop the income statement(s) off at the credit union office during office hours or drop in the night-drop box if after hours.

Your credit union office's address is: KEMBA Louisville CU, 4017 Poplar Level Rd., Louisville, KY 40213-1523

Please call us, email or FAX us if you have questions

Thank you for using your credit union!

NMLS#1140548 NMLS#414341

Loan Application



NMLS#1140548 NMLS#603237 NMLS#414341

4017 Poplar Level Rd. Louisville, KY 40213-1523
(800) 536-2210 or (502)459-1411 FAX (502)459-4528

This Application may be used to apply for any of the following: Closed-End Home Equity Open-End Home Equity Overdraft Protection
 Personal Closed-End Loan Visa Credit Card
 Personal Open-End Loan _____ Number of Cards _____
 Security To Be : Auto Shares Other _____ Name(s) to Appear _____
 Payment Method: _____ On Card(s) _____
 Payroll Deduction Cash Pay Transfer From Savings Transfer From Checking
Purpose of Loan: _____ **Amount Requested \$** _____

Check the Appropriate Box

NOTICE: Married Applicants who are Credit Union members may apply for a separate account. Check the appropriate box below to indicate the type of credit for which you are applying.

Individual Credit: Complete Applicant Section. Complete other section as follows: (1) Information about your spouse if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI), or your spouse will use the account. (2) Information about the party making the payments if you are relying on alimony, spousal support or separate/spousal maintenance as a basis for repayment.

Joint Credit: Provide information about both of you by completing Applicant and Co-Applicant sections. NOTE: The Credit Union cannot consider you as a Co-borrower if you are not a Credit Union member. You will not be considered a Co-signer or Guarantor unless you make arrangements to become a Credit Union member.

Guarantor: Provide information about both of you by completing Applicant and Guarantor sections. The Guarantor will not receive loan proceeds but is necessary in order for the borrower to receive this loan; and will be liable upon borrower's default.

APPLICANT				SPOUSE / CO-APPLICANT			
PERSONAL INFORMATION				PERSONAL INFORMATION			
Marital Status: (Check One) If you reside in or are relying on property in a community property state or if you are applying for a secured credit or joint account. <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED				Marital Status: (Check One) If you reside in or are relying on property in a community property state or if you are applying for a secured credit or joint account. <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED			
Credit Union Account No.		Social Security Number		Credit Union Account No.		Social Security Number	
First Name	Middle Initial	Last Name (Jr./Sr.)		First Name	Middle Initial	Last Name (Jr./Sr.)	
Current Street Address		Apt. No.	<input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Other Years at address	Current Street Address		Apt. No.	<input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Other Years at address
City		State	Zip	City		State	Zip
Date of Birth		Home Phone No.		Date of Birth		Home Phone No.	
E-mail Address		Cell Phone		E-mail Address		Cell Phone	
		No. of Dependents				No. of Dependents	

EMPLOYMENT INCOME				EMPLOYMENT INCOME					
Present Employer		Gross Monthly Salary		Present Employer		Gross Monthly Salary			
Address		City	State	Zip	Address		City	State	Zip
Position/Type of Work		Start Date	Work Phone No.		Position/Type of Work		Start Date	Work Phone No.	
You will not need to list income from alimony, child support, or separate maintenance unless you wish it considered for purposes of granting this credit.				You will not need to list income from alimony, child support, or separate maintenance unless you wish it considered for purposes of granting this credit.					
No. of years in this line of work	List any other type of income		Gross Monthly Amount	No. of years in this line of work	List any other type of income		Gross Monthly Amount		

OUTSTANDING DEBTS				OUTSTANDING DEBTS			
<input type="checkbox"/> MTG	Monthly Pmt/Rent	Balance	Market Value	<input type="checkbox"/> MTG	Monthly Pmt/Rent	Balance	Market Value
<input type="checkbox"/> RENT				<input type="checkbox"/> RENT			
Who do you pay Rent/Mtg to?			<input type="checkbox"/> Live with Parents	Who do you pay Rent/Mtg to?			<input type="checkbox"/> Live with Parents
Additional Loans On Your Home		Total Mo. Payments	Total Balance	Additional Loans On Your Home		Total Mo. Payments	Total Balance
Who do you pay Second Mortgage or other Real Estate Loans to?				Who do you pay Second Mortgage or other Real Estate Loans to?			
Have you or your Spouse/Co-Applicant ever filed for bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes - explain on separate sheet				Do you or your Spouse/Co-Applicant have credit under any other Name? <input type="checkbox"/> No <input type="checkbox"/> Yes - List Name _____			
I/We have listed all debts and pending credit applications <input type="checkbox"/> Yes <input type="checkbox"/> No - explain on a separate sheet							
Are you a U.S. Citizen? <input type="checkbox"/> No <input type="checkbox"/> Yes		Are you a co-maker on any loan? <input type="checkbox"/> No <input type="checkbox"/> Yes		Do you have past due loans? <input type="checkbox"/> No <input type="checkbox"/> Yes			

A = Applicant
 C = Spouse/Co-Applicant
 D = Debts to be paid off if loan granted

Credit Information Please list all open accounts with or without a balance. Attach separate sheet if necessary.

Please Check			Type of Loan	Lender (or other) Name, Address List all obligations and Credit Union Loans	Account Number	Balance	Monthly Payment
A	C	D					
TOTALS							

ASSETS AND DEPOSITS Attach a separate sheet if necessary.

Type	Bank (or other) Name, Address	Account Number	Approximate Balance	Type	Bank (or other) Name, Address	Account Number	Approximate Balance
Car 1: Year-Make-Model			Balance Owed	Car 1: Year-Make-Model			Balance Owed
Car 2: Year-Make-Model			Balance Owed	Car 2: Year-Make-Model			Balance Owed

PERSONAL REFERENCE		PERSONAL REFERENCE	
Nearest Relative (not living with you)	Relationship	Nearest Relative (not living with you)	Relationship
Address	Phone	Address	Phone

OPTIONAL CREDIT INSURANCE Complete this Insurance Disclosure only if you are applying for a Personal Line of Credit Account. Credit Insurance Disclosures for Closed-End Loans are furnished separately. Your Loan Officer has details.

Credit Life and/or Credit Disability Insurance are not required to obtain credit under this plan and will be included only if requested immediately below by the APPLICANT. The monthly insurance rates are shown below. Each month the insurance charge is calculated by multiplying the outstanding balance of the Account on the last day of that month by the rate shown.

Monthly Premium Rates Per \$1000 of Outstanding Balance- You must CHECK ONE OR MORE of the boxes below.				
CREDIT LIFE:	Single Coverage -	<input type="checkbox"/> Yes <input type="checkbox"/> No	Joint Coverage -	<input type="checkbox"/> Yes <input type="checkbox"/> No
CREDIT DISABILITY:	Single Coverage -	<input type="checkbox"/> Yes <input type="checkbox"/> No	Joint Coverage -	<input type="checkbox"/> Yes <input type="checkbox"/> No

Note: For Closed-End loans an appropriate disclosure will be furnished if Your Credit is approved. If this application is for a Personal Line of Credit Account and you are applying for Credit Insurance, You authorize us to add the required premiums to Your Account, charge a Finance Charge on the premiums at the rate which applies to Your Account, and forward such premiums to the Insurance Company.

X _____ X _____
 SIGNATURE OF APPLICANT DATE SIGNATURE OF CO-APPLICANT DATE

SIGNATURE – READ CAREFULLY BEFORE SIGNING. PER YOUR MEMBERSHIP AGREEMENT AND/OR LOAN AGREEMENTS WITH US YOU GIVE US A SECURITY INTEREST IN YOUR ACCOUNT(S) AND CERTAIN OTHER PROPERTY PLEDGED AS DESCRIBED IN SAID AGREEMENTS.

You agree and attest that your name and address shown herein is your legal name and the place of your residence, and such address is the proper address for all notice(s) required by this Application, and you further understand that any changes in this address must be submitted to us in writing to be effective. You agree that everything stated in this application, whether oral, written, or through FAX machine, is true and correct to the best of your knowledge. Each applicant, authorized user, guarantor, co-signer or other party signing below, (together herein referred to as "applicant(s)" hereby makes application for the account(s)/services/loan(s) indicated. Each applicant consents that the Credit Union may undertake to verify their eligibility for any account(s), loan(s) and service(s) now and in the future, including adjustment of credit limits. In addition, all applicants authorize us to make inquiry to determine your employment history and to obtain information concerning any accounts with other institutions and your credit history, including any credit reports. Applicants specifically consent that the Credit Union may report information concerning their account(s) services to others; and that we may provide the reasons should we determine you to be ineligible for any services to the other applicants. The Credit Union or its agent is authorized to investigate your creditworthiness, employment history, and to obtain a credit report and to answer questions about the credit history with you. You understand that any false or misleading statements in your application may cause any loan to be in default. You agree that this Application shall be the Credit Union's Property whether or not this Credit Application is approved.

NOTICE: By submitting this application by facsimile or electronically, you agree to the same terms that apply to a signed application. If there is a co-applicant on this loan, that co-applicant has authorized the submission of this application. This facsimile or electronic submission qualifies as your signature. It is understood that you will have to sign loan documents before funds can be disbursed. Indirect lending: If this application is submitted to the Credit Union by a third party such as a car dealer, you authorize us to disclose to such third party the Credit Union's loan decision including the reason(s) for its decision.

Authorized User/Card. You also request that an additional card be issued in the name of the Authorized User for use by the persons identified herein. The undersigned specifically acknowledge their responsibility for all purchases and/or cash advances made by the Authorized User or anyone that Authorized User allows to use any card(s) issued in connection with your credit card account. The Authorized User(s) may also be responsible for all purchases and cash advances they make or authorize.

Applicant's Signature	Date	SECURITY AGREEMENT AND PLEDGE. By signing this application, acceptance or authorized use of any credit card(s) issued, you pledge your shares as defined by your Credit Card Agreement to secure payment of your obligations on this account. You understand that collateral securing other loans will secure this account; and that property purchased with your credit card(s) will also secure this account.	
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Co-Applicant's Signature	Date	Authorized User (Print Name)	Date
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For Credit Union Use Only					
Date	<input type="checkbox"/> Approved <input type="checkbox"/> Denied (Adverse Action Notice Sent)	Approved Signature Limits	Limit of Credit	Other	Other Debt Ratio/Score
		\$	\$	\$	\$
Loan Officer Comments:					
Signature	Date	Signature	Date		
X		X			