

Member Information

Full Name: Account Number: DOB:
Address: City: State: Zip:
Phone Number: Email: Social Security #:
Occupation: Employer: Start Date:
Monthly Gross Income: Monthly Rent/Mort. Length of Residence:

Loan Information

Loan Type: ☐ Purchase ☐ Refinance ☐ Lease Buy-Out ☐ Purpose ☐ Other
Amount Requested: Loan Terms/Months: Odometer:
Year: Make: Model: VIN:

Guarantor ☐

Co-Borrower ☐

Full Name: Account Number: DOB:
Address: City: State: Zip:
Phone Number: Email: Social Security #:
Occupation: Employer: Start Date:
Monthly Gross Income: Monthly Rent/Mort. Length of Residence:

Nearest Relative

Full Name: Phone Number: Relationship:

You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any changes you will notify us in writing immediately. You authorize the Motion FCU 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 Motion FCU will rely on the information in this application and your credit report to make its decision. If you request, Motion FCU will tell you the name and address of any credit bureau which it received a credit report on you. It is a federal crime to willfully and deliberately provide incorrect information on loan applications made to Motion FCU or state chartered credit unions insured by the NCUA.

Applicant Signature

Date:

Co-Borrower/Garuntor

Date: