



Married Applicants: May apply for a separate account.
Individual Credit: You must complete the **Applicant** section about yourself and the **Other** section about your spouse if:
1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI),
2. your spouse will use the account, or
3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.
Joint Credit: Each Applicant must **individually** complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.
Guarantor: Complete the **Other** section if you are a guarantor on an account/loan.

LOANLINER Account/Loan: Individual Joint
(Including ATM/Debit Card Access to the Account if Available)
Amount Requested \$ _____
Purpose/Collateral: _____
Repayment: Payroll Deduction Cash Military Allotment Automatic Payment

PAYMENT PROTECTION Are you interested in having your loan protected? Yes No
If you answer "yes", the credit union will disclose the cost to protect your loan. The protection is voluntary and does not affect your loan approval. In order for your loan to be covered, you will need to sign a separate application that explains the terms and conditions.

APPLICANT	
NAME _____	
ACCOUNT NUMBER _____	
SOCIAL SECURITY NUMBER _____	DRIVER'S LICENSE NUMBER/STATE _____
AGES OF DEPENDENTS _____	EMAIL ADDRESS _____
BIRTH DATE _____ HOME PHONE _____	CELL PHONE _____ BUSINESS PHONE/EXT. _____
PRESENT ADDRESS (Street - City - State - Zip) _____	<input type="checkbox"/> OWN <input type="checkbox"/> RENT LENGTH AT RESIDENCE _____
PREVIOUS ADDRESS (Street - City - State - Zip) _____	<input type="checkbox"/> OWN <input type="checkbox"/> RENT LENGTH AT RESIDENCE _____
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)	

OTHER		<input type="checkbox"/> CO-APPLICANT	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> OTHER
NAME _____				
ACCOUNT NUMBER _____				
SOCIAL SECURITY NUMBER _____		DRIVER'S LICENSE NUMBER/STATE _____		
AGES OF DEPENDENTS _____		EMAIL ADDRESS _____		
BIRTH DATE _____ HOME PHONE _____		CELL PHONE _____ BUSINESS PHONE/EXT. _____		
PRESENT ADDRESS (Street - City - State - Zip) _____		<input type="checkbox"/> OWN <input type="checkbox"/> RENT LENGTH AT RESIDENCE _____		
PREVIOUS ADDRESS (Street - City - State - Zip) _____		<input type="checkbox"/> OWN <input type="checkbox"/> RENT LENGTH AT RESIDENCE _____		
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)				

EMPLOYMENT/INCOME		
NAME AND ADDRESS OF EMPLOYER _____		
TITLE/GRADE _____	START DATE _____	HOURS AT WORK _____
SUPERVISOR'S NAME _____	IF SELF EMPLOYED, TYPE OF BUSINESS _____	
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.		
EMPLOYMENT INCOME \$ _____ Per _____	OTHER INCOME \$ _____ Per _____	
<input type="checkbox"/> NET <input type="checkbox"/> GROSS	SOURCE _____	
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO		
WHERE _____	ENDING/SEPARATION DATE _____	

EMPLOYMENT/INCOME		
NAME AND ADDRESS OF EMPLOYER _____		
TITLE/GRADE _____	START DATE _____	HOURS AT WORK _____
SUPERVISOR'S NAME _____	IF SELF EMPLOYED, TYPE OF BUSINESS _____	
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.		
EMPLOYMENT INCOME \$ _____ Per _____	OTHER INCOME \$ _____ Per _____	
<input type="checkbox"/> NET <input type="checkbox"/> GROSS	SOURCE _____	
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO		
WHERE _____	ENDING/SEPARATION DATE _____	

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS _____	STARTING DATE _____
_____	ENDING DATE _____

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS _____	STARTING DATE _____
_____	ENDING DATE _____

REFERENCE	RELATIONSHIP _____
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU _____	HOME PHONE _____

REFERENCE	RELATIONSHIP _____
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU _____	HOME PHONE _____



Dear Member,

Enclosed is the Loan Application you requested. Please be careful to fill it out completely and sign accordingly. Please return all forms to Silverado Credit Union. You will receive your copies after your loan is funded.

To qualify your application for committee review, the following is required:

1. You must be a Primary account holder at Silverado Credit Union.
2. The attached "Loanliner" form must be filled out completely. All of your debts and open accounts must be listed. Also include any loans for which you have Co-signed.
3. You must provide verification of your current income. Please submit copies of your last two pay stubs. If you are self-employed you should provide the previous two years Federal Income Tax returns, and a Profit & Loss statement for the current year. If you are retired, copies of your retirement and Social Security disclosure statements will suffice to verify income.
4. You must carry Comprehensive and Collision coverage, plus Fire and Theft for all vehicle loans. For loans under \$25,000.00 the maximum deductible can be \$500.00; for loans over \$ 25,000.00, the maximum deductible can be \$1,000.00.

FOR PROMPT SERVICING OF YOUR LOAN- You need to have your insurance agent FAX an Insurance Binder to (707) 965-0142, ATTENTION LOAN DEPARTMENT.

INSURANCE COMPANY NAME: _____
INSURANCE COMPANY ADDRESS: _____ _____
INSURANCE COMPANY PHONE #: _____
INSURANCE COMPANY POLICY #: _____

Save your application as a PDF and send it over your home banking portal via messages attach a file.
You may choose to print and mail it to: Silverado Credit Union P.O. Box 330 Angwin, CA 94508

**INCOMPLETE APPLICATIONS SLOW THE PROCESS!
THANK YOU FOR SUPPORTING YOUR CREDIT UNION**