



Main Office:  
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Fixed /  Flexline

Date \_\_\_\_\_

Mortgage / Home Equity Application

Membership # \_\_\_\_\_

I am applying for an individual account in my own name and am relying on my own income or assets and not on the income or assets of any other person as the basis for repaying this credit. Complete all sections, except section B.

I am applying for a joint account or on an account which my co-applicant and I may use. Complete all sections.

Are you or someone in your immediate family in the military  Yes  No

I am applying for an individual account but am relying on income from alimony, child support, or separate maintenance or on the income or assets of another person, as the basis for repaying this credit. Complete all sections, providing information in section B concerning the individual on whose income you are relying.

**Section A: Information Regarding Applicant**

Name			Birth Date	
Present Home Address (Street, City, State, Zip)			<input type="checkbox"/> Own <input type="checkbox"/> Rent Since	
Previous Home Address (Street, City, State, Zip)			<input type="checkbox"/> Own <input type="checkbox"/> Rent # of Years	
Collateral Property Address				
Preferred Contact #	Social Security #	Driver's License #	# of Dependents	Ages
Email Address				

Current Employer	Hire Date	Position	Gross Salary \$ _____/Month
Address (Street, City, State, Zip)			Telephone ( )
Previous Employer	Hire Date	Position	Gross Salary \$ _____/Month
Address (Street, City, State, Zip)			Telephone ( )
Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this credit.			
Type of Other Income	Name and Address of Payer	Amount \$ _____/Month	
Alimony, Child Support, or Separate Maintenance Income			
Received By: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Other		Is it likely that any income relied upon will reduced in the next two years? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Reference	Reference
Address	Address
Relationship Telephone ( )	Relationship Telephone ( )

**Section B: Information Regarding Co-Applicant or Other Party**

Name			Birth Date	
Present Home Address (Street, City, State, Zip)			<input type="checkbox"/> Own <input type="checkbox"/> Rent Since	
Previous Home Address (Street, City, State, Zip)			<input type="checkbox"/> Own <input type="checkbox"/> Rent # of Years	
Preferred Contact #	Social Security #	Driver's License #	# of Dependents	Ages
Email Address				

Current Employer	Hire Date	Position	Gross Salary \$ _____/Month
Address (Street, City, State, Zip)			Telephone ( )
Previous Employer	Hire Date	Position	Gross Salary \$ _____/Month
Address (Street, City, State, Zip)			Telephone ( )
Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this credit.			
Type of Other Income	Name and Address of Payer	Amount \$ _____/Month	
Alimony, Child Support, or Separate Maintenance Income			
Received By: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Other		Is it likely that any income relied upon will reduced in the next two years? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Co-Applicant Relationship			

Marital Status (Do not complete if you are applying for individual credit)

Applicant  Married  Separated  Unmarried (Including single, divorced & widowed)

Co-Applicant  Married  Separated  Unmarried (Including single, divorced & widowed)

Please Check:

Box A If asset or credit is in name of applicant alone

Box C If asset or credit is in name of co-applicant alone

Both If asset or credit is in name of applicant and co-applicant

**Section C: Assets**

Box A C	Asset	Describe Asset	Market Value	Pledged for Another Loan?
<input type="checkbox"/> <input type="checkbox"/>	Home	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> <input type="checkbox"/>	Auto	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> <input type="checkbox"/>	Auto	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> <input type="checkbox"/>	Stock	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> <input type="checkbox"/>	Other	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you intend to proceed after receiving your Loan Estimate, we will need the following:

1. Application fee.
2. Proof of all income.
3. Copy of Deed.
4. Statement from your mortgage company verifying the present balance owed.
5. Home owners insurance declarations page.
6. Real Estate taxes (school and county).

1. Are you liable for alimony, child support or maintenance payments? If **yes**, amount \$ \_\_\_\_\_ **Applicant**  Yes  No **Co-Applicant**  Yes  No

2. Are you an endorser, guarantor, or co-maker for another? If **yes**, name and address of creditor. \_\_\_\_\_ **Applicant**  Yes  No **Co-Applicant**  Yes  No

3. Are there any judgements, garnishments, or legal proceedings against you? If **yes**, explain. \_\_\_\_\_ **Applicant**  Yes  No **Co-Applicant**  Yes  No

3. Have you ever filed for bankruptcy? If **yes**, explain. \_\_\_\_\_ **Applicant**  Yes  No **Co-Applicant**  Yes  No

By signing this application, you agree that:

1. The information provided in this application is correct and complete to the best of your knowledge.
2. The credit union may check your credit and employment history.
3. You authorize Wheatland FCU to request a payoff, tax bill or proof of insurance.
4. The credit union will retain this application whether or not it is approved.
5. You are a member of the credit union.
6. You have read this statement and understand it.

**Correspondence Agreement**

You agree, in order for us to service your account or to collect monies you may owe, that we and/or our agents may contact you by telephone and/or text message at any telephone number associated with your account, including wireless telephone numbers. We and/or our agents may also contact you by email using any email address you provide. Methods of contact may include the use of pre-recorded voice messages and/or the use of an automated telephone dialing system as applicable.

\_\_\_\_\_ Date \_\_\_\_\_ **Borrower Signature**

\_\_\_\_\_ Date \_\_\_\_\_ **Co-Borrower Signature**

**Official Use Only**

Property Value \$ _____	Disability Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>HMDA Information:</b>
Property Equity \$ _____	Life Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No	MSA Code _____
Mortgage Balance \$ _____	Point <input type="checkbox"/> Yes <input type="checkbox"/> No	State _____
Loan Value \$ _____	Is home for sale? <input type="checkbox"/> Yes <input type="checkbox"/> No	County _____
Amount Applied For \$ _____	Type of home _____	Census Tract _____
Term _____ Purpose _____	<input type="checkbox"/> Primary Residence <input type="checkbox"/> Investment Property	US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No

Loan Originator: \_\_\_\_\_ NMLSR # \_\_\_\_\_

Loan Originator Organization: Wheatland Federal Credit Union NMLSR # 491613