



MORTGAGE LOAN APPLICATION

Application Date: _____

Membership #: _____

<input type="checkbox"/> Fixed Rate Mortgage / Home Equity Loan	<input type="checkbox"/> First Lien
<input type="checkbox"/> Variable Rate Mortgage / Home Equity Loan	<input type="checkbox"/> Second Lien
<input type="checkbox"/> Life Insurance (2nd Lien's only)	<input type="checkbox"/> Disability Insurance (2nd Lien's Only)

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

Applicant	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (inc. single & divorced)
Co-Applicant	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (inc. single & divorced)

Property is the in the name of: Applicant Alone Co-applicant Alone Both

	Applicant	Co-applicant		
Are you liable for alimony, child support or maintenance payments?	YES	NO	YES	NO
Are there any judgements, garnishments, or legal proceedings against you?	YES	NO	YES	NO
Have you ever filed for bankruptcy? If yes, when? _____	YES	NO	YES	NO

Primary Applicant Information:

Name:		Birthdate:	
Home Address:		Length of Residence:	
Collateral Property Address:	<input type="checkbox"/>	Check Box if same as home address	
Preferred Contact #	Social Security #	E-mail Address	
Current Employer:	Hire Date:	Position:	Work Phone #:
Gross Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annual			

Nearest Relative (not living with you)

Name: _____ Phone #: _____ Relationship: _____

HMDA Information	Race:
Sex	<input type="checkbox"/> American Indian or Alaska Native
<input type="checkbox"/> Male	<input type="checkbox"/> Asian
<input type="checkbox"/> Female	<input type="checkbox"/> Black or African American
<input type="checkbox"/> Other	<input type="checkbox"/> Native Hawaiian or other Pacific Islander
Ethnicity:	<input type="checkbox"/> Caucasian
<input type="checkbox"/> Hispanic / Latino	<input type="checkbox"/> Prefer not to Answer
<input type="checkbox"/> Not Hispanic / Latino	<input type="checkbox"/> N/A
<input type="checkbox"/> Prefer not to Answer	
<input type="checkbox"/> N/A	

RELATIONSHIP TO APPLICANT: _____

Co-Applicant Information:			
Name:		Birthdate:	
Home Address:		Length of Residence:	
Collateral Property Address:	<input type="checkbox"/>	Check Box if same as home address	
Preferred Contact #	Social Security #	E-mail Address	
Current Employer:	Hire Date:	Position:	Work Phone #:
Gross Salary: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annual			
Nearest Relative (not living with you)			
Name: _____		Phone #: _____	Relationship: _____
HMDA Information		Race:	
Sex	Ethnicity:	<input type="checkbox"/> American Indian or Alaska Native	
<input type="checkbox"/> Male	<input type="checkbox"/> Hispanic / Latino	<input type="checkbox"/> Asian	
<input type="checkbox"/> Female	<input type="checkbox"/> Not Hispanic / Latino	<input type="checkbox"/> Black or African American	
<input type="checkbox"/> Other	<input type="checkbox"/> Prefer not to Answer	<input type="checkbox"/> Native Hawaiian or other Pacific Islander	
	<input type="checkbox"/> N/A	<input type="checkbox"/> Caucasian	
		<input type="checkbox"/> Prefer not to Answer	<input type="checkbox"/> N/A

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

1. Application fee.
2. Proof of all Income.
3. Statement from your mortgage company verifying the present balance owed.
4. Current homeowners insurance showing annual premium.
5. Real Estate Taxes. (school & county)

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 (or will become) a member of Wheatland FCU.
6. You understand and agree to all of the above.

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.

Applicant Signature _____		Date _____		Co-Applicant Signature _____		Date _____	
OFFICE USE ONLY	Amount Applied For: _____		Point?	YES	NO	County Geocode (state & county): _____	
	Term: _____		For Sale?	YES	NO	_____	
	Purpose: _____		<input type="checkbox"/> Zoned Residential			Census Tract (state, county, census tract): _____	
		<input type="checkbox"/> Primary	<input type="checkbox"/> Investment	_____			

LOAN ORIGINATOR: _____
 ORGANIZATION: **Wheatland Federal Credit Union NMLSR: 491613**

NMSLR: _____