

# **SING SING EMPLOYEES FEDERAL CREDIT UNION**

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127 Woodside Ave #205  
Briarcliff Manor, NY 10510  
Phone: (914) 762-3372  
Fax: (914) 762-5612

Office Hours:  
Monday - Thursday  
9:30 AM – 4:30 PM  
Friday 9:00 AM – 12:30 PM

## **LOAN APPLICATION CHECKLIST**

1. **You must be a member in good standing with Sing Sing EFCU along with a minimum of three (3) consecutive months of direct deposits to your share/draft account and have permanent employment.**
2. **Fill out the front and back of the Loan Application completely (that includes answering all questions and providing rent/mortgage amount on the back).**
3. **Once completed hand in two (2) most recent paystubs from all employers along with an additional income. If no paystubs provide most recent retirement docs. If your debt-to-income ratio is high it will be helpful to provide your spouse's income as well. This may require your spouse to co-sign the loan.**
4. **Provide a current lease. If there is no lease provide three (3) most recent rent receipts.**
5. **Fill out, sign and date the Attendance Form and we will fax it to the Personnel Office for completion.**
6. **There is a \$50.00 Application Fee to process your application and run a credit report. This fee is deducted from your share/draft account.**
7. **If your loan is approved, you will need the required security in your account to cover the loan before we can issue a check.**
8. **Loans may take one to two weeks to process.**

**Sing Sing Employees FCU**

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**CONSUMER LOAN APPLICATION**

ACCOUNT NUMBER	DATE
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MARRIED APPLICANTS may apply for a separate account. **Check the type of credit account for which you wish to apply.**  
 **Individual Credit** – You must complete the applicant section about yourself and the other section about your spouse if: (1) You live in a community property state (AK, AZ, CA, ID, LA, NM, NV, P.R., TX, WA, WI); (2) your spouse will use the account; or (3) you are relying on your spouse's income as a source of repayment.  
 **Joint Credit** – If you are applying for a joint account or an account that you and another person will use, you must complete the applicant and Spouse Co-Applicant section.  
 \_\_\_\_\_ Initial here if you intend to apply for Joint Credit

**Type of Credit Applied For:**

Loan Type (auto, credit card, signature): \_\_\_\_\_ Amount Requested: \_\_\_\_\_ Term (mos) \_\_\_\_\_  
 Purpose: \_\_\_\_\_ Collateral Offered: \_\_\_\_\_  
 Payment Method:  Cash  Military Allotment  Payroll Deduction  Automatic Payment  
 Payment Frequency:  Monthly  Other \_\_\_\_\_  
 Authorized User Name (credit card only): \_\_\_\_\_

**CREDIT CARD APPLICANTS:** If this application is used to issue a credit card, you understand that your use or allowing the card to be used will constitute your acknowledgment, receipt and agreement to the terms and conditions of the credit card agreement provided to you with the card.

**APPLICANT**

**SPOUSE**  **CO-APPLICANT**  **CO-SIGNER**

**Complete for secured credit or if you live in a community property state.**  
 MARRIED  SEPARATED  UNMARRIED (Single, Divorced, Widowed)

APPLICANT NAME \_\_\_\_\_

SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	NO. OF DEP.	DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT
MOTHER'S MAIDEN NAME	E-MAIL ADDRESS	
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP CODE		
FORMER STREET ADDRESS (if current less than 2 years)		YEARS THERE
CITY/STATE/ZIP		
PERSONAL REFERENCE 1 (Name and Address)	PHONE NO. & RELATIONSHIP	
PERSONAL REFERENCE 2 (Name and Address)	PHONE NO. & RELATIONSHIP	

**Complete for secured credit or if you live in a community property state.**  
 MARRIED  SEPARATED  UNMARRIED (Single, Divorced, Widowed)

SPOUSE/CO-APPLICANT NAME \_\_\_\_\_

SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	NO. OF DEP.	DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT
MOTHER'S MAIDEN NAME	RELATIONSHIP TO APPLICANT	
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP CODE		
FORMER STREET ADDRESS (if current less than 2 years)		YEARS THERE
CITY/STATE/ZIP		
PERSONAL REFERENCE 1 (Name and Address)	PHONE NO. & RELATIONSHIP	
PERSONAL REFERENCE 2 (Name and Address)	PHONE NO. & RELATIONSHIP	

**EMPLOYMENT & INCOME** If you are self-employed, attach a financial statement and your most recent income tax return.

CURRENT EMPLOYER	HIRE DATE	
CURRENT ADDRESS		
WORK PHONE NO.	POSITION	MONTHLY GROSS INCOME
\$		
FORMER EMPLOYER (if current less than 2 years)		

CURRENT EMPLOYER	HIRE DATE	
CURRENT ADDRESS		
WORK PHONE NO.	POSITION	MONTHLY GROSS INCOME
\$		
FORMER EMPLOYER (if current less than 2 years)		

**OTHER INCOME** You need not list income from alimony, child support or separate maintenance unless you wish it considered for purposes of granting this credit.

SOURCE OF OTHER INCOME	FREQUENCY	MONTHLY INCOME
1.		\$

SOURCE OF OTHER INCOME	FREQUENCY	MONTHLY INCOME
1.		\$

**ASSETS & DEPOSITS** Please check the appropriate box below. INDICATE: **A** - Applicant **OR** **C** - Spouse/Co-Applicant

CHECK ONE			TYPE	FINANCIAL INSTITUTION NAME	CURRENT BALANCE	CHECK ONE			FINANCIAL INSTITUTION NAME	CURRENT BALANCE	
A	C	A				C					
					\$					\$	
					\$					\$	
AUTO #1 MAKE		MODEL	YEAR	VALUE	\$	AUTO #2 MAKE		MODEL	YEAR	VALUE	\$
REAL ESTATE TYPE				VALUE	\$	OTHER ASSETS				VALUE	\$

**CREDIT INFORMATION**

Be sure to list all open accounts with or without a balance. Attach separate sheet if necessary.  
**A - APPLICANT   C - SPOUSE/CO-APPLICANT   D - DEBTS TO BE PAID OFF IF LOAN IS GRANTED**

PLEASE CHECK			LIST ALL OBLIGATIONS INCLUDING CREDIT UNION LOANS	ACCOUNT NUMBER	BALANCE	MONTHLY PAYMENTS
A	C	D				
			RENT OR MORTGAGE			

PLEASE ANSWER THE FOLLOWING QUESTIONS AND INDICATE: A = Applicant   C = Spouse/Co-Applicant	A		C			A		C	
	YES	NO	YES	NO		YES	NO	YES	NO
1. Have you ever filed a petition for bankruptcy? Date:					4. Have you ever had credit in any other name? What Name?				
2. Have you ever had any auto, or furniture repossessed or property foreclosed upon? Date:					5. Have you any suits pending, judgments filed, alimony or child support awards against you?				
3. Are you a co-borrower or co-signer of any loan or lease? For Whom? Where?					6. Are you other than a U.S. citizen or permanent resident alien?				

**OPTIONAL CREDIT INSURANCE** – The Credit Union will disclose the cost of voluntary insurance to you. A separate insurance election that discloses the terms and conditions must be signed for coverage to become effective.

You are interested in:  Single Credit Life Insurance    Joint Credit Life Insurance    Single Credit Disability Insurance    Joint Credit Disability Insurance

**SIGNATURES** – Are you currently on active military duty?  Yes    No

You promise that the information stated in this Total Loan Consumer Loan Application is true and correct to the best of your knowledge. The Credit Union or its agent is authorized to investigate your credit worthiness, employment history, and to obtain a credit report and to answer questions about its credit history with you. The Credit Union may also obtain credit reports to update, increase, extend or renew credit with you. 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 application is approved. You will notify the Credit Union in writing immediately of any changes in your name, address or employment. You understand that it is a crime to willfully and deliberately provide incomplete or incorrect information to obtain credit. If you request, you will be provided the name and address of any credit bureau from which we received a credit report. **As security for any loan to you or on your behalf, you grant the Credit Union a Security Interest in all individual and joint share or other accounts you have with the Credit Union now and in the future. When you are in default you authorize the Credit Union to take that money and apply it to what you owe. Shares and deposits that would have an adverse tax consequence if pledged as security are not subject to this Security Interest.** To help the government fight the funding of Terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license and other identifying information.

**X** \_\_\_\_\_ Date \_\_\_\_\_      **X** \_\_\_\_\_ Date \_\_\_\_\_  
 Applicant    Spouse/Co-Applicant/ Co-Signer

Credit Union Use Only	
Loan Approved <input type="checkbox"/> Yes <input type="checkbox"/> No, reason _____	Comments:  Loan Officer Signature _____ Date _____ <b>X</b>
Debt Ratio/Score: Before _____ After _____	
<input type="checkbox"/> ECOA Notice and reason for Rejection sent or delivered on _____	



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## ATTENDANCE AND TARDY SHEET

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Social Security #: XXX - XX - \_\_\_\_\_

I hereby authorize the Personnel Dept. and/or Timekeeping Dept. to release the following information to the SING SING EMPLOYEES FEDERAL CREDIT UNION

Name of Facility: \_\_\_\_\_

Signature: \_\_\_\_\_

### DO NOT WRITE BELOW THIS LINE

.....  
**FOR EMPLOYERS USE ONLY:**

How long has the employee been employed? \_\_\_\_\_

Is the employee on probation? \_\_\_\_\_

Does the employee have a permanent hold? \_\_\_\_\_

Is the employee currently on leave status? \_\_\_\_\_

Is the employee currently on workers compensation leave? \_\_\_\_\_

Please list employee accruals below:

\_\_\_\_\_  
Vacation                      Personal                      Holiday                      Sick

Has the employee been monitored by the Time Abuse Control Unit in the past year?  
Yes \_\_\_\_\_ No \_\_\_\_\_

**This form was completed by:** \_\_\_\_\_

**Date:** \_\_\_\_\_