

Vacation loan application

FILL OUT THE LOAN APPLICATION BELOW AN RETURN TO PORT TERMINAL FCU

LOAN LIMIT \$3000 - AMOUNT REQUESTED\$_____ \$30 LOAN PROCESSING FEE - 12 Month Pay back

NAME: _____ **IF JOINT SPOUSE'S NAME:** _____

ACCT# _____ **SS#** _____ **TDL#** _____ **DOB** _____

HOME ADDRESS _____

HOME PHONE# _____ **CELL** _____ **EMAIL** _____

EMPLOYER _____ **YEARS** _____ **GROSS PAY\$** _____

SPOUSE EMPLOYER _____ **YEARS** _____ **GROSS PAY\$** _____

CREDIT DISABILITY INS. _____ **SINGLE CREDIT LIFE INS.** _____

RENT \$ _____ **MTG \$** _____

SIGNATURE _____ **CO-SIGNER (if needed)** _____

YOU AUTHORIZE THE CREDIT UNION TO OBTAIN CREDIT REPORTS IN CONNECTION WITH THIS LOAN APPLICATION. ALL TERMS BASED ON QUALIFIED BORROWERS. NON MEMBERS JOIN NOW AND TAKE ADVANTGAGE OF THIS OFFER!!!