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Home Equity Loan Application

Fax Form To: (330) 490-4297 or
Interoffice to: Mail Code: 1500

Also Forward Original Form For Valid Signatures

HOW TO APPLY

- Please complete sections 1 through 8
- Sign and complete section 9
- Return this application to the Credit Union for processing.
- An incomplete or unsigned form may delay processing.

SECTION 1 NOTE AND COMPLETE

Married Applicants may apply for a separate account

NOTICE TO OHIO APPLICANTS: The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Check the appropriate box to indicate Individual Credit or Joint Credit

- Individual Credit:** Complete **Applicant** section. Complete **Co-Applicant, Spouse** (referred to as "Other") section: (1) about your spouse if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI), or (2) if your spouse will use the Account. Please check box to indicate whom the information is about.
- Joint Credit:** Provide information about both of you by completing **Applicant** and **Other** section.

Amount Requested: \$ _____ **Purpose:** _____
Repayment: Payroll Deduction Cash Automatic Payment Military Allotment _____

SECTION 2 APPLICANT INFORMATION

APPLICANT		CO-APPLICANT		SPOUSE	
(Please print in ink or type)		Use "SAA" if information is "Same As Applicant"			
Name (Last – First – Middle)		Name (Last – First – Middle)			
Driver's License Number / State		Driver's License Number / State			
Account Number	Social Security Number	Account Number	Social Security Number		
Birth Date	Home Phone	Work Phone	Birth Date	Home Phone	Work Phone
Present Address (Street – City – State – Zip) <input type="checkbox"/> Own <input type="checkbox"/> Rent Years At This Address: _____		Present Address (Street – City – State – Zip) <input type="checkbox"/> Own <input type="checkbox"/> Rent Years At This Address: _____			
Previous Address (Street – City – State – Zip) <input type="checkbox"/> Own <input type="checkbox"/> Rent Years At This Address: _____		Previous Address (Street – City – State – Zip) <input type="checkbox"/> Own <input type="checkbox"/> Rent Years At This Address: _____			
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)		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)			
List Ages Of Dependents Not Listed By Other Applicant (Exclude Self)		List Ages Of Dependents Not Listed By Other Applicant (Exclude Self)			

SECTION 3 EMPLOYMENT INFORMATION

Name And Address Of Employer	Name And Address Of Employer
Job Title/Grade Supervisor's Name	Job Title/Grade Supervisor's Name
Start Date Hours At Work	Start Date Hours At Work
If Self Employed, Type of Business	If Self Employed, Type of Business
If Employed In Current Position Less Than Five Years, Complete: Previous Employer Name And Address	If Employed In Current Position Less Than Five Years, Complete: Previous Employer Name And Address
Start Date: Ending Date:	Start Date: Ending Date:
Military: Is Duty Station Transfers Expected During The Next Year? <input type="checkbox"/> Yes <input type="checkbox"/> No Where: Ending/Separation Date:	Military: Is Duty Station Transfers Expected During The Next Year? <input type="checkbox"/> Yes <input type="checkbox"/> No Where: Ending/Separation Date:

SECTION 4 INCOME INFORMATION

NOTICE: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered.	NOTICE: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered.
Employment Income: Other Income: \$ Per: \$ Per: <input type="checkbox"/> Net <input type="checkbox"/> Gross Source:	Employment Income: Other Income: \$ Per: \$ Per: <input type="checkbox"/> Net <input type="checkbox"/> Gross Source:

SECTION 5 REFERENCES

Name And Address Of Nearest Relative Not Living With You	Name And Address Of Nearest Relative Not Living With You
Relationship: Home Phone:	Relationship: Home Phone:
Name And Address Of Personal Friend –Not A Relative	Name And Address Of Personal Friend –Not A Relative
Home Phone:	Home Phone:

SECTION 6 A ASSETS/PROPERTY

List all assets and account number(s) Attach additional sheets if necessary	
Share Draft or Checking Balance \$ Name And Address Of Depository	Share Draft or Checking Balance \$ Name And Address Of Depository
Savings Balance \$ Name And Address Of Depository	Savings Balance \$ Name And Address Of Depository

SECTION 6 A ASSETS/PROPERTY (Continued)

Check box for Applicant/Other <input type="checkbox"/> Applicant <input type="checkbox"/> Other	List Home And All Other Items You Own And Location Of Property. Examples: Auto, Boat, Stocks, Bonds, Cash, Household Goods, Real Estate, etc. Home*	Market Value \$	Pledged As Collateral For Another Loan? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 6 B *This section must be completed for the property, which will be given as security if applicable.

List Every Lien Against Your Home. A lien is a legal claim filed against property as security for payment of debt. Liens include mortgages, deeds of trust, land contracts, judgments and past due taxes.

First Mortgage Held By	Other Liens (Describe)
Present Balance \$	Present Balance \$

Is the property described in this section your principal dwelling? Yes No
 Is the property described in this section listed as the applicant's address in the applicant information section? Yes No
 Is anyone other than your spouse a part owner of your home? Yes No

SECTION 7 DEBTS

List all other debts. Auto loans, credit cards, second mortgage, home association dues, alimony, childcare, alimony, childcare, child support, IRS liabilities, medical, utilities, insurance, etc. Attach other sheets if necessary.

Indicate ownership of outstanding debt.	Creditor Name And Address	Account Number	Original Balance	Present Balance	Monthly Payment	Past Due?
<input type="checkbox"/> Applicant <input type="checkbox"/> Other	<input type="checkbox"/> Rent <input type="checkbox"/> Mortgage (Include Tax & Insurance)					<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Applicant <input type="checkbox"/> Other			\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 8 FINANCIAL INFORMATION

If a "yes" answer is given to a question, explain on an attached sheet.	Applicant	Other
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any outstanding judgments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever filed for bankruptcy or had a debt adjustment plan confirmed under Chapter 13?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you had property foreclosed upon or given a deed in lieu of foreclosure in the last 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a party in a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you other than a U.S. Citizen or Permanent Resident Alien?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is your income likely to decline in the next two years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a co-maker, co-signer, or guarantor on any loan not listed above?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
For Whom (Name of Others Obligated on Loan)	To Whom (Name of Creditor)	

SECTION 9 SIGNATURES

You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of all your debts and obligations. You authorize Diebold Federal Credit Union to obtain credit reports in connection with this application for credit and for any update, renewal or extension of the credit received. If you request, the credit union will tell you the name and address of any credit bureau from which it received a credit report on you. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to Federal Credit Unions or State Chartered Credit Unions insured by NCUA. If there are any important changes, you will notify us in writing immediately. You also agree to notify us of any change in your name, address, or employment within a reasonable time thereafter.

X _____ **X** _____
 Applicant Signature Date Other Signature Date

SECTION 10 CREDIT UNION INFORMATION – DO NOT WRITE IN THIS SECTION- FOR CREDIT UNION USE ONLY

Loan Officer Advance Approved Yes No
 Credit Committee or Other Counter Offer Will Be Made, If Accepted, Advance Approved
 Outside Information Considered Yes No (If "Yes", attach additional sheet and describe)

Approved Limit: \$ _____ Debt Ratio: _____

Referred to/Reason(s) For Referral: _____ Describe Counter Offer: _____

Specific Reason(s) For Rejection: _____

CREDIT UNION SIGNATURES

X _____ **X** _____
 Loan Officer Date Loan Officer/Other Date

ECOA Notice And Reason For Rejection Sent or Delivered on: _____ Date: _____ Initials: _____



Diebold Federal Credit Union is an Equal Housing Lender.

