



**KINECTA™**  
FEDERAL CREDIT UNION

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# Credit Application

## CREDIT REQUEST:

AMOUNT	TYPE OF CREDIT (e.g. new auto, Mastercard, etc.)	PURPOSE

### APPLICANT INFORMATION: *APPLICANT, IF MARRIED, MAY APPLY FOR A SEPARATE ACCOUNT.*

NAME (FIRST, MIDDLE, LAST)				JR./SR.	
CREDIT UNION ACCOUNT NO.		SOCIAL SECURITY NO.		BIRTHDATE / /	
COMPLETE ONLY FOR JOINT OR SECURED CREDIT, OR IF YOU RESIDE IN COMMUNITY PROPERTY STATE (AZ, CA, ID, LA, NM, NV, TX, WA, WI)				<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (SINGLE, DIVORCED, WIDOWED)	
APPLICATION IS FOR: (IF CO-APPLICANT IS OTHER THAN SPOUSE, SEPARATE APPLICATION IS REQUIRED)				<input type="checkbox"/> APPLICANT <input type="checkbox"/> APPLICANT AND SPOUSE <input type="checkbox"/> CO-APPLICANT	
HOME TELEPHONE ( )		WORK TELEPHONE ( )		NO. OF DEPENDENTS (NOT INCLUDING SELF)	
DRIVER'S LICENSE NO.		STATE OF ISSUE		SELF-EMPLOYED <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(IF YES, LAST TWO YEARS OF INCOME TAX RETURNS REQUIRED)</i>	
STREET ADDRESS					
CITY, STATE, ZIP				DATE MOVED TO RESIDENCE MO. ____ YR. ____	
<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER		NAME OF NEAREST RELATIVE (Not living with you)		RELATIVE'S PHONE NUMBER ( )	
MONTHLY PAYMENT \$		RELATIONSHIP			
RELATIONSHIP		RELATIVE'S ADDRESS			

### SPOUSE INFORMATION:

**COMPLETE THIS SECTION IF SPOUSE WILL BE CONTRACTUALLY LIABLE FOR REPAYMENT OR IF APPLICANT IS RELYING ON THE INCOME OF THE SPOUSE AS COMMUNITY PROPERTY OR ON ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME FOR REPAYMENT.**

SPOUSE NAME (FIRST, MIDDLE, LAST)		JR./SR.	
CREDIT UNION ACCOUNT NO.		SOCIAL SECURITY NO.	
WORK TELEPHONE ( )		BIRTHDATE / /	
DRIVER'S LICENSE NO.		STATE OF ISSUE	
EMPLOYER NAME			
EMPLOYER ADDRESS (STREET)			
CITY, STATE, ZIP			
HIRE DATE MONTH ____ YEAR ____		JOB TITLE	
MONTHLY GROSS INCOME \$		(ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE NEED TO BE REVEALED UNLESS YOU WANT SUCH INCOME CONSIDERED AS A BASIS FOR REPAYMENT OF THIS OBLIGATION)	

### EMPLOYMENT DATA: *PLEASE ATTACH RECENT PAY STUB (NON-KINECTA EMPLOYEES ONLY), RETIREES ATTACH EVIDENCE OF INCOME (BENEFITS AND AWARDS LETTERS).*

EMPLOYER NAME		ADDRESS (STREET, CITY, STATE, ZIP)			
HIRE DATE MONTH ____ YEAR ____		MONTHLY GROSS INCOME \$		JOB TITLE	
PRESENT WORK STATUS <input type="checkbox"/> EMPLOYED <input type="checkbox"/> SICK LEAVE <input type="checkbox"/> UNEMPLOYED					
OTHER MONTHLY GROSS INCOME TOTAL \$	(ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE NEED TO BE REVEALED UNLESS YOU WANT SUCH INCOME CONSIDERED AS A BASIS FOR REPAYMENT OF THIS OBLIGATION)		1ST SOURCE OF INCOME & MONTHLY GROSS AMOUNT	2ND SOURCE OF INCOME & MONTHLY GROSS AMOUNT	3RD SOURCE OF INCOME & MONTHLY GROSS AMOUNT

### ASSETS INFORMATION - AUTO:

NAME OF AUTO		MODEL		YEAR		PRESENT UNPAID BALANCE \$	
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### REAL ESTATE (RESIDENCE):

YEAR HOME PURCHASED		MORTGAGE INTEREST RATE		PRESENT UNPAID BALANCE \$		MARKET VALUE \$	
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BY SIGNING BELOW, I/WE CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS ACCURATE, TRUE AND CORRECT. IF THERE ARE IMPORTANT CHANGES IN OUR FINANCIAL CONDITION, I/WE WILL NOTIFY YOU IN WRITING IMMEDIATELY. I/WE UNDERSTAND THAT ANY FALSE STATEMENT FOR THE PURPOSE OF INFLUENCING IN ANY WAY THE ACTION OF ANY FEDERAL CREDIT UNION UPON ANY LOAN APPLICATION IS A VIOLATION OF SECTION 1014, TITLE 18 U.S. CODE. IF APPLICABLE, YOU ARE AUTHORIZED TO MAKE INQUIRIES TO MY/OUR EMPLOYER(S) AS TO MY/OUR SALARY, PAYROLL DEDUCTIONS, ADDRESS OR ANY OTHER PERTINENT INFORMATION AND MAY ALSO REQUEST INFORMATION PERTAINING TO MY PAST, PRESENT OR FUTURE EMPLOYMENT RECORDS.

I/WE AGREE TO PAY KINECTA FEDERAL CREDIT UNION FOR TRANSACTIONS POSTED TO MY/OUR ACCOUNT IN ACCORDANCE WITH THE LOAN AGREEMENT AND ANY DISCLOSURE STATEMENT, THE TERMS AND CONDITIONS OF WHICH ARE INCORPORATED HEREIN BY THIS REFERENCE. I/WE AGREE THAT ANY RESULTING LOAN SHALL BE INTERPRETED IN ACCORDANCE WITH APPLICABLE FEDERAL LAW AND THE LAWS OF THE STATE OF CALIFORNIA WITHOUT RESORT TO CALIFORNIA'S CONFLICTS OF LAW RULES.

I/WE AGREE THAT I/WE ARE RESPONSIBLE FOR THE TRANSACTIONS ON MY/OUR CREDIT ACCOUNT(S) WITH YOU BY ME/US OR BY ANYONE ELSE I/WE AUTHORIZE TO USE THE ACCOUNT EVEN IF THAT PERSON EXCEEDS MY/OUR PERMISSION. THIS INCLUDES, BUT IS NOT LIMITED TO, THE USE OF ANY CHECKS ISSUED TO ME/US AND ANY DUPLICATES AND RENEWALS, AS WELL AS, ANY ADDITIONAL CHECKS ISSUED TO MY/OUR AUTHORIZED USERS AND ANY DUPLICATES AND RENEWALS THEREON. I/WE AUTHORIZE YOU TO GATHER WHATEVER CREDIT INFORMATION YOU CONSIDER NECESSARY AND APPROPRIATE. I/WE AUTHORIZE YOU TO GIVE INFORMATION CONCERNING YOUR CREDIT EXPERIENCE WITH ME/US TO OTHERS. I/WE WAIVE THE PROVISIONS OF CALIFORNIA VEHICLE CODE 1808.21 (OR ANY OTHER STATE) AND AUTHORIZE THE CALIFORNIA DEPARTMENT OF MOTOR VEHICLES (OR ANY OTHER STATE) TO FURNISH MY/OUR RESIDENCE ADDRESS TO YOU. I/WE AUTHORIZE YOU TO SUBMIT MY/OUR CREDIT APPLICATION FOR CONSIDERATION BY A THIRD-PARTY LENDER, UNLESS I/WE CHECK THE BOX BELOW NOT TO SUBMIT MY/OUR APPLICATION TO A THIRD-PARTY LENDER. I/WE UNDERSTAND THAT YOU WILL RETAIN THIS APPLICATION WHETHER OR NOT CREDIT IS APPROVED.

I/WE AGREE THAT A PHOTOCOPY OF FACSIMILE OF THIS APPLICATION SHALL BE AS BINDING AS THE ORIGINAL AND SHALL BE ADMISSIBLE IN LIEU OF THE ORIGINAL IN ANY PROCEEDING IN WHICH IT IS, OR MAY BE, A RELEVANT DOCUMENT.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF SPOUSE OR CO-APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

**NOTE: IF YOU ARE UNABLE TO APPROVE MY APPLICATION, I/WE AUTHORIZE YOU TO SUBMIT MY/OUR CREDIT APPLICATION FOR CONSIDERATION BY A THIRD-PARTY LENDER.**

- YES, SUBMIT MY APPLICATION  
 NO, DO NOT SUBMIT MY APPLICATION

\_\_\_\_\_  
INITIALS OF APPLICANT

\_\_\_\_\_  
INITIALS OF APPLICANT