

APPLICANT				CO-APPLICANT				
Full Name				Full Name				
Street Address			Street Address					
City/State/Zip			City/State/Zip					
Since	Own Rent			Since		Own	Rent	
Previous Address			Previous Address					
City/State/Zip			City/State/Zip					
Since		Own Rent		Since		Own	Rent	
Social Security #	Date o	Date of Birth		Social Security #	Date of	Date of Birth		
Phone (Home)	Phone	(Work)		Phone (Home)	Phone (V	Phone (Work)		
Employer				Employer				
Position/Title Since			Position/Title	Since	Since			
Previous Employer			Previous Employer					
Position/Title	How Lo	How Long		Position/Title	How Lor	How Long		
Marital Status Unmarried Married Separated			Marital Status Unmarried Married Separated			ted		

ASSETS		LIABILITIES		
Cash on hand & in Financial Institutions (Describe in Schedule 1)	\$	Accounts Payable	\$	
Savings Accounts (Describe in Schedule 1)	\$	Notes Payable to Financial Institutions & Others (Describe in Schedule 7)	\$	
IRA or Other Retirement Account (Describe in Schedule 1)	\$	Installment Account (Auto) (Describe in Schedule 7)	\$	
Accounts & Notes Receivable (Describe in Schedule 5)	\$	Mo. Payments \$ Installment Account (Other)	\$	
Life Insurance-Cash Surrender Value Only (Complete Schedule 4)	۷ \$	Mo. Payments \$		
Stocks & Bonds (Describe in Schedule 3)	\$	Loan on Life Insurance Mortgages on Real Estate	\$	
Real Estate (Describe in Schedule 6)	Ś	(Describe in Schedule 6)	\$	
Closely Held Businesses (Describe in Schedule 8)	Ś	Unpaid Taxes	\$	
Automobile-Present Value	\$ \$	Other Liabilities (Describe in Schedule 9)	\$	
Other Personal Property	\$	Total	\$	
	Total \$	Net Worth Total		

APP	CO-APP	ANSWER QUESTIONS YES OR NO	APP	CO-APP
\$	\$	Are you a Co-Maker, Endorser, or Guarantor of any other personal debt? If yes, explain	Yes	Yes
\$	\$		No	No
\$	\$	Are you a defendant in any suit or legal action? If	Yes	Yes
\$	\$	Yes, explain.	No	No
		Have you ever gone through bankruptcy, foreclosure or had a judgement against you? If	Yes No	Yes No
\$	\$	yes, which one, explain.		
\$	\$	Have you made a will?	Yes	Yes
\$	\$		No	No
	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$       \$       Are you a Co-Maker, Endorser, or Guarantor of any other personal debt? If yes, explain         \$       \$       \$	\$       \$       Are you a Co-Maker, Endorser, or Guarantor of any other personal debt? If yes, explain       Yes         \$       \$       Are you a defendant in any suit or legal action? If Yes, explain.       Yes         \$       \$       Are you a defendant in any suit or legal action? If Yes, explain.       Yes         \$       \$       Are you ever gone through bankruptcy, foreclosure or had a judgement against you? If yes, which one, explain.       Yes         \$       \$       Have you made a will?       Yes         \$       \$       Have you made a will?       Yes

\*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

## CASH, SAVINGS, AND CERTIFICATES (Schedule 1)

Name of Financial Institution	Type of Account	Account Balance
	Total \$	

## **RETIREMENT ACCOUNTS (Schedule 2)**

Name of Financial Institution	Type of Account	Account Balance	
	Total \$		

## SECURITIES OWNED (Schedule 3)

Description	No. of Shares	Owners Name(s)	Listed or Unlisted	Current Market Value
			Total Ś	

## LIFE INSURANCE (Schedule 4)

Insurance Company	Insured	Beneficiary	Face Value	Cash Value	Loans
			Total Ś		

Name of Debtor	Description	Description		Maturity	Monthly Receivable		Balance Due
						Total \$	
REAL ESTATE OWNED (Schedule Property Address	Year	Purchase	Creditor	Maturity	Market Value	Mortgage	Monthly Pmt
	Acquired	Price	Creditor	Maturity		Balance	
				Tot	tal \$		
INSTALLMENTS, CREDIT LINES A							
Name of Creditor	Collateral				Maturity	Monthly Pmt	Balance Due
						Total \$	
OTHER ASSETS (Schedule 8) Description						Value	
					Total \$		
OTHER LIABILITES (Schedule 9)							
Description						Value	

I authorize Highmark Federal Credit Union to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of maintaining my account or obtaining a new loan. I understand FALSE statements may result in the discontinuation of services to me and/or denial of credit.

Applicant's Signature

Date

Co-Applicant's Signature

Date