



# Essex County Teachers Federal Credit Union



## Home Equity Loan Application Checklist

Please include a copy of the following with your application:

- |                             |                             |
|-----------------------------|-----------------------------|
| _____ Deed                  | _____ Hazard Insurance      |
| _____ Proof of Income       | _____ Federal Income Tax    |
| _____ Property Tax Bill     | _____ Completed Application |
| _____ \$100 Application Fee | _____ Application Checklist |

### Personal Information:

Name of Applicant: \_\_\_\_\_  
 Name Of Spouse: \_\_\_\_\_  
 Wife's Maiden Name: \_\_\_\_\_  
 Date of Marriage: \_\_\_\_\_ Date of Divorce: \_\_\_\_\_  
 (If divorced please attach copy of judgment of divorce)

Date Home was purchased: \_\_\_\_\_

Address of property to be mortgaged:  
\_\_\_\_\_  
\_\_\_\_\_

### Information about this loan:

Amount to be financed: \$ \_\_\_\_\_  
 Term Requested: \_\_\_\_\_ years

\*Remember a \$150 Closing fee is due on the day of the loan closing

\*If you bring original documents to the credit union we will make the copies needed.

***Where people are worth more than money.™***

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125 Franklin Street, Bloomfield, New Jersey 07003  
 Voice: 973-748-8847 Fax: 973-748-7806 E-mail: info@ectcu.org

**HOW TO APPLY**

- Please complete sections 1 through 8
- Sign and complete section 9
- Return this application to your credit union
- An incomplete or unsigned form may delay processing

**1 NOTE AND COMPLETE**

*Married Applicants may apply for a separate account. Check the appropriate box to indicate Individual Credit or Joint Credit.*

**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.

- 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:** Each Applicant must **individually** complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

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

**STATEMENT OF INTENT**

Are you interested in having your loan protected?  Yes  No  
 If you answer "Yes," then the credit union will disclose the costs of this voluntary payment protection to you. A separate election which discloses the terms and conditions must be signed for protection to be effective.

**2 APPLICANT INFORMATION**

**APPLICANT**

*Please print in ink or type.*

NAME (Last - First - Initial) \_\_\_\_\_  
 DRIVER'S LICENSE NUMBER/STATE \_\_\_\_\_  
 ACCOUNT NUMBER \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_  
 BIRTH DATE \_\_\_\_\_ HOME PHONE \_\_\_\_\_ BUSINESS PHONE/EXT. \_\_\_\_\_  
 PRESENT ADDRESS (Street - City - State - Zip) \_\_\_\_\_  OWN  RENT  
 YEARS AT THIS ADDRESS \_\_\_\_\_  
 PREVIOUS ADDRESS (Street - City - State - Zip) \_\_\_\_\_  OWN  RENT  
 YEARS AT THIS ADDRESS \_\_\_\_\_  
 COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:  
 MARRIED  SEPARATED  UNMARRIED (Single - Divorced - Widowed)  
 LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT  
 (Exclude Self)

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

*Use "SAA" if information is "Same As Applicant".*

NAME (Last - First - Initial) \_\_\_\_\_  
 DRIVER'S LICENSE NUMBER/STATE \_\_\_\_\_  
 ACCOUNT NUMBER \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_  
 BIRTH DATE \_\_\_\_\_ HOME PHONE \_\_\_\_\_ BUSINESS PHONE/EXT. \_\_\_\_\_  
 PRESENT ADDRESS (Street - City - State - Zip) \_\_\_\_\_  OWN  RENT  
 YEARS AT THIS ADDRESS \_\_\_\_\_  
 PREVIOUS ADDRESS (Street - City - State - Zip) \_\_\_\_\_  OWN  RENT  
 YEARS AT THIS ADDRESS \_\_\_\_\_  
 COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:  
 MARRIED  SEPARATED  UNMARRIED (Single - Divorced - Widowed)  
 LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT  
 (Exclude Self)

**3 EMPLOYMENT INFORMATION**

NAME AND ADDRESS OF EMPLOYER \_\_\_\_\_  
 YOUR TITLE/GRADE \_\_\_\_\_ SUPERVISOR'S NAME \_\_\_\_\_  
 START DATE \_\_\_\_\_ HOURS AT WORK \_\_\_\_\_ IF SELF EMPLOYED, TYPE OF BUSINESS \_\_\_\_\_  
 IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS \_\_\_\_\_ STARTING DATE \_\_\_\_\_ ENDING DATE \_\_\_\_\_  
**MILITARY** IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR  YES  NO WHERE \_\_\_\_\_ ENDING/SEPARATION DATE \_\_\_\_\_

NAME AND ADDRESS OF EMPLOYER \_\_\_\_\_  
 YOUR TITLE/GRADE \_\_\_\_\_ SUPERVISOR'S NAME \_\_\_\_\_  
 START DATE \_\_\_\_\_ HOURS AT WORK \_\_\_\_\_ IF SELF EMPLOYED, TYPE OF BUSINESS \_\_\_\_\_  
 IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS \_\_\_\_\_ STARTING DATE \_\_\_\_\_ ENDING DATE \_\_\_\_\_  
 IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR  YES  NO WHERE \_\_\_\_\_ ENDING/SEPARATION DATE \_\_\_\_\_

**4 INCOME INFORMATION**

**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 \$ \_\_\_\_\_  
 NET  GROSS PER SOURCE PER

**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 \$ \_\_\_\_\_  
 NET  GROSS PER SOURCE PER

**5 REFERENCES**

*Please include Street, City, State and Zip.*

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
 NAME AND ADDRESS OF PERSONAL FRIEND -NOT A RELATIVE \_\_\_\_\_ HOME PHONE \_\_\_\_\_

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
 NAME AND ADDRESS OF PERSONAL FRIEND -NOT A RELATIVE \_\_\_\_\_ HOME PHONE \_\_\_\_\_

