



Better Banking.

Loan Application

JOIN SAC FCU

Please complete this form and send to the address shown below:
SAC FEDERAL CREDIT UNION, P.O. Box 1149, Bellevue, NE 68005-1149



SAC FCU | 402 292 8000 | www.sacfcu.com

* Required Field

General Information

Will there be applying for Individual or Joint Credit ? If Joint, the co-applicant has the same required fields as the primary applicant.

Individual

Joint

Marital Status- Complete if this loan is for:

A. Joint or Secured Credit

B. You reside in or rely on property located in a Community Property State. (AZ, CA, ID, LA, NM, NV, TX, WA, WI)

- Unmarried
Married
Separated
This application is not for joint or secured credit and I do not live in the states listed above.

*Type of Loan Requested

*Loan Amount Requested

*Loan Term Requested



Better Banking.

Loan Application

JOIN SAC FCU

Please complete this form and send to the address shown below: SAC FEDERAL CREDIT UNION, P.O. Box 1149, Bellevue, NE 68005-1149



SAC FCU | 402 292 8000 | www.sacfcu.com

* Required Field

Primary Applicant

*Member Number _____

*Last Name _____

*First Name _____ Middle Name _____

*Social Security # _____

*Date of Birth _____

Number of Dependents _____ Age of Dependents _____

*Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Drivers License # _____ Drivers License State _____

*Home Address _____

*City _____ *State _____ *Zip _____

Time at Current Residence _____ Residence Type Rent Own Other

Monthly Payment _____

Previous Address _____

*City _____ *State _____ *Zip _____

Time at Previous Residence _____ Residence Type Rent Own Other

Present Employer

Name _____ Phone Number _____

Employment Status Full Time Part Time Temp Retired Other _____

Job Title _____ Job Start Date _____

Job End Date _____

Gross Salary _____ Per Year Month Hour



Better Banking.

Loan Application

JOIN SAC FCU

Please complete this form and send to the address shown below: SAC FEDERAL CREDIT UNION, P.O. Box 1149, Bellevue, NE 68005-1149



SAC FCU | 402 292 8000 | www.sacfcu.com

* Required Field

Co-Applicant

*Member Number _____

*Last Name _____

*First Name _____ Middle Name _____

*Social Security # _____

*Date of Birth _____

Number of Dependents _____ Age of Dependents _____

*Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Drivers License # _____ Drivers License State _____

*Home Address _____

*City _____ *State _____ *Zip _____

Time at Current Residence _____ Residence Type Rent Own Other

Monthly Payment _____

Previous Address _____

*City _____ *State _____ *Zip _____

Time at Previous Residence _____ Residence Type Rent Own Other

Present Employer

Name _____ Phone Number _____

Employment Status Full Time Part Time Temp Retired Other _____

Job Title _____ Job Start Date _____

Job End Date _____

Gross Salary _____ Per Year Month Hour



Better Banking.

Loan Application

JOIN SAC FCU

Please complete this form and send to the address shown below: SAC FEDERAL CREDIT UNION, P.O. Box 1149, Bellevue, NE 68005-1149



SAC FCU | 402 292 8000 | www.sacfcu.com

* Required Field

References

Nearest Relative Not Living With You:

Last Name _____ First Name _____

Relationship _____ Phone Number _____

*Home Address _____

*City _____ *State _____ *Zip _____

Debts/Monthly Payments

List all other debts (for example, auto loans, credit cards, second mortgage, home assoc. dues, alimony, child support, child care, medical, utilities, auto insurance, IRS liabilities, etc.) Please use a separate line for each credit card and auto loan.

Debt _____ Monthly Payment _____

Debt _____ Monthly Payment _____

Debt _____ Monthly Payment _____

Debt _____ Monthly Payment _____

Additional Information:

How would you prefer to be contacted?

- Home Phone, Work Phone, Cell Phone, Email, Other (please describe)

Special Instructions/Comments: _____

Income verification is required; other information may be required.

I certify that statements on this application are true and complete. I authorize any person, association, firm or corporation to furnish, on request of this Financial Institution, information concerning me or my affairs.(Sec. 1014, Title 18, U.S. Code makes it a Federal Crime to knowingly make a false statement on this application.)

Primary Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____