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 loans@hawaiiifcu.org

# APPLICATION

CU NMLS #407940

There are costs associated with the use of a credit card. Information about costs, rates and fees may be contained in disclosures provided with this application or by calling us collect at \_\_\_\_\_ or writing to us at the address stated on this application.

**Check below to indicate the type of credit for which you are applying. Married Applicants may apply for a separate account.**

**Individual Credit:** You must complete the Applicant section about yourself and the Other section about your spouse if

1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI)
2. your spouse will use the account, or
3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.

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

**LOANLINER Account/Loan:**  Individual  Joint **Credit Card Account:**  Individual  Joint  
 (Including ATM/Debit card access to the account if available)

If this is an application for joint credit, Applicant and Co-Applicant each agree and acknowledge the intent to apply for joint credit (sign below):

Applicant <span style="float:right">Date</span>	Co-Applicant <span style="float:right">Date</span>
<b>X</b>	<b>X</b>
(Seal)	(Seal)

Amount Requested \$ \_\_\_\_\_  Credit Limit Requested \$ \_\_\_\_\_  
 Reason for Loan: \_\_\_\_\_

<b>APPLICANT</b>				<b>OTHER</b> <input type="checkbox"/> CO-APPLICANT <input type="checkbox"/> SPOUSE <input type="checkbox"/> GUARANTOR <input type="checkbox"/> OTHER			
NAME (Print)				NAME (Print)			
ACCOUNT NUMBER		SOCIAL SECURITY NUMBER		ACCOUNT NUMBER		SOCIAL SECURITY NUMBER	
BIRTH DATE		EMAIL ADDRESS		BIRTH DATE		EMAIL ADDRESS	
HOME PHONE	CELL PHONE	WORK PHONE		HOME PHONE	CELL PHONE	WORK PHONE	
DL NUMBER OR STATE ID/PASSPORT NUMBER		MOTHER'S MAIDEN NAME		DL NUMBER OR STATE ID/PASSPORT NUMBER		MOTHER'S MAIDEN NAME	
PRESENT ADDRESS (Street - City - State - Zip)			<input type="checkbox"/> OWN <input type="checkbox"/> RENT	PRESENT ADDRESS (Street - City - State - Zip)			<input type="checkbox"/> OWN <input type="checkbox"/> RENT
			TIME AT RESIDENCE				TIME AT RESIDENCE
YOUR MONTHLY RENT/MORTGAGE \$ _____				YOUR MONTHLY RENT/MORTGAGE \$ _____			
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)			
<b>EMPLOYMENT/INCOME</b>				<b>EMPLOYMENT/INCOME</b>			
EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME				EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME			
NAME AND ADDRESS OF EMPLOYER			STARTING DATE	NAME AND ADDRESS OF EMPLOYER			STARTING DATE
<b>NOTICE:</b> ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.				<b>NOTICE:</b> ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.			
EMPLOYMENT INCOME PER MONTH \$ _____		JOB TITLE		EMPLOYMENT INCOME PER MONTH \$ _____		JOB TITLE	
OTHER INCOME PER MONTH \$ _____		SOURCE OF OTHER INCOME		OTHER INCOME PER MONTH \$ _____		SOURCE OF OTHER INCOME	
<b>MILITARY:</b> IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE _____				<b>MILITARY:</b> IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE _____			
ENDING/SEPARATION DATE _____				ENDING/SEPARATION DATE _____			

REFERENCE		REFERENCE	
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	
RELATIONSHIP	PHONE	RELATIONSHIP	PHONE
NAME AND ADDRESS OF NON-FAMILY MEMBER		NAME AND ADDRESS OF NON-FAMILY MEMBER	
RELATIONSHIP	PHONE	RELATIONSHIP	PHONE

**STATE LAW NOTICE(S)**

**Notice to Nebraska Residents:** A credit agreement must be in writing to be enforceable under Nebraska law. To protect you and us from any misunderstandings or disappointments, any contract, promise, undertaking, or offer to forebear repayment of money or to make any other financial accommodation in connection with this loan of money or grant or extension of credit, or any amendment of, cancellation of, waiver of, or substitution for any or all of the terms or provisions of any instrument or document executed in connection with this loan of money or grant or extension of credit, must be in writing to be effective.

**Notice to New York Residents:** New York residents may contact the New York State Department of Financial Services to obtain a comparative listing of credit card rates, fees, and grace periods. New York State Department of Financial Services: 1-800-342-3736 or www.dfs.ny.gov.

**Notice to Ohio Residents:** The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy 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.

**Notice to Wisconsin Residents:** (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

Signature for Wisconsin Residents Only	Date
<b>X</b>	(Seal)

**SIGNATURES**

By signing or otherwise authenticating below:

- 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 what you owe. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. 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. It is a crime to willfully and deliberately provide incomplete or incorrect information in this application.
- If you are applying for a credit card, you understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the Consumer Credit Card Agreement and Disclosure.

Applicant's Signature	Date
<b>X</b>	(Seal)

Other Signature	Date
<b>X</b>	(Seal)