

# HOME EQUITY APPLICATION

Account Number
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Application Number
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## PROPERTY SECURING YOUR LOAN

Property Street Address	City	County	State	Zip
Property Type: <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Condo/Townhome <input type="checkbox"/> Single Family Home <input type="checkbox"/> Improved Land <input type="checkbox"/> Other _____				
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, Divorced, Widowed)				
Approximate Market Value \$	Interest Rate	Purchase Price \$	Prepared Date	Year Built
Homeowners: Please Indicate Name(s) On Deed <input type="checkbox"/> Same as Applicants				Amount Requested \$

### APPLICANT

FULL NAME		
SOCIAL SECURITY NUMBER		BIRTH DATE
CURRENT STREET ADDRESS	APT. NUMBER	SINCE
CITY	COUNTY	
STATE	ZIP	DRIVER'S LICENSE NUMBER/STATE
FORMER ADDRESS (COMPLETE IF CURRENT ADDRESS IS LESS THAN 2 YEARS)		NUMBER OF YEARS
CITY	STATE	ZIP
HOME TELEPHONE	NO. OF DEPENDENTS	AGES OF DEPENDENTS

### CO-APPLICANT

FULL NAME		
SOCIAL SECURITY NUMBER		BIRTH DATE
CURRENT STREET ADDRESS	APT. NUMBER	SINCE
CITY	COUNTY	
STATE	ZIP	DRIVER'S LICENSE NUMBER/STATE
FORMER ADDRESS (COMPLETE IF CURRENT ADDRESS IS LESS THAN 2 YEARS)		NUMBER OF YEARS
CITY	STATE	ZIP
HOME TELEPHONE	NO. OF DEPENDENTS	AGES OF DEPENDENTS

### EMPLOYMENT AND INCOME

Attach two most recent paycheck stubs. If self-employed, check here  and attach two years federal income tax returns.

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		HIRE DATE
ADDRESS		
WORK TELEPHONE	POSITION	MO. GROSS INCOME \$
FORMER EMPLOYER (If current is less than 2 years)	POSITION	YEARS THERE
WORK TELEPHONE	START/END DATE	MO. GROSS INCOME \$

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		HIRE DATE
ADDRESS		
WORK TELEPHONE	POSITION	MO. GROSS INCOME \$
FORMER EMPLOYER (If current is less than 2 years)	POSITION	YEARS THERE
WORK TELEPHONE	START/END DATE	MO. GROSS INCOME \$

### OTHER INCOME

You need not list income from alimony, child support or separate maintenance payments unless You want it considered in evaluating this credit application.

SOURCE OF OTHER INCOME	MONTHLY AMOUNT \$
NAME AND ADDRESS OF PAYER	NO. OF YEARS RECEIVED

SOURCE OF OTHER INCOME	MONTHLY AMOUNT \$
NAME AND ADDRESS OF PAYER	NO. OF YEARS RECEIVED

### REFERENCES

NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU
PERSONAL REFERENCE - NAME, ADDRESS AND TELEPHONE

NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU
PERSONAL REFERENCE - NAME, ADDRESS AND TELEPHONE

### ASSETS AND DEPOSITS

Attach a separate sheet if necessary.

DESCRIPTION	ACCOUNT NUMBER/TYPE	BALANCE/VALUE

DESCRIPTION	ACCOUNT NUMBER/TYPE	BALANCE/VALUE



# Borrower's Certification & Authorization

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## Certification

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The undersigned certify the following:

1. I/We have applied for a loan from the **State Highway Patrol Federal Credit Union**.  
  
I/We completed a loan application containing various information on the purposes of the loan, the amount and source of the down payment, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application with the employer and/or other documents, nor did I/We omit any pertinent information.
2. I/We understand and agree that the **State Highway Patrol Federal Credit Union** reserves the right to change the mortgage loan review process to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of Title 18, United States Code, Section 1014.

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## Authorization to Release Information

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To Whom It May Concern:

1. I/We have applied for a loan from the **State Highway Patrol Federal Credit Union**.  
  
As part of the application process, **State Highway Patrol Federal Credit Union** may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.
2. I/We understand and agree that the **State Highway Patrol Federal Credit Union** reserves the right to change the mortgage loan review process to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.
3. **State Highway Patrol Federal Credit Union** or any investor that purchases the mortgage may address this authorization to any party names in the loan application.
4. A copy of this authorization may be accepted as an original.
5. Your prompt reply to **State Highway Patrol Federal Credit Union** or the investor that purchased the mortgage is appreciated.

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Borrower

Date

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Borrower

Date

# DEMOGRAPHIC INFORMATION OF APPLICANT AND CO-APPLICANT

Application Number:
Date:

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, race, and sex) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more "Hispanic or Latino" origins, and one or more designations for "Race."

The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race and sex on the basis of visual observation or surname. If you do not wish to provide some or all of this information, please check below.

<p><b>Applicant:</b></p> <p><b>Ethnicity:</b></p> <p><input type="checkbox"/> Hispanic or Latino – <i>Check one or more</i></p> <p style="margin-left: 20px;"><input type="checkbox"/> Mexican      <input type="checkbox"/> Puerto Rican      <input type="checkbox"/> Cuban</p> <p><input type="checkbox"/> Other Hispanic or Latino – <i>Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:</i></p> <p style="margin-left: 20px;">_____</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p><input type="checkbox"/> I do not wish to provide this information (about Ethnicity)</p> <p><b>Race: check one or more</b></p> <p><input type="checkbox"/> American Indian or Alaska Native – <i>Print name of enrolled or principal tribe:</i></p> <p style="margin-left: 20px;">_____</p> <p><input type="checkbox"/> Asian</p> <p style="margin-left: 20px;"><input type="checkbox"/> Asian Indian      <input type="checkbox"/> Chinese      <input type="checkbox"/> Filipino</p> <p style="margin-left: 20px;"><input type="checkbox"/> Japanese      <input type="checkbox"/> Korean      <input type="checkbox"/> Vietnamese</p> <p><input type="checkbox"/> Other Asian – <i>Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:</i></p> <p style="margin-left: 20px;">_____</p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p style="margin-left: 20px;"><input type="checkbox"/> Native Hawaiian      <input type="checkbox"/> Guamanian or Chamorro</p> <p style="margin-left: 20px;"><input type="checkbox"/> Samoan</p> <p><input type="checkbox"/> Other Pacific Islander – <i>Print race, for example, Fijian, Tongan, and so on:</i></p> <p style="margin-left: 20px;">_____</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> I do not wish to provide this information (about Race)</p> <p><b>Sex:</b></p> <p><input type="checkbox"/> Female      <input type="checkbox"/> Male</p> <p><input type="checkbox"/> I do not wish to provide this information (about Sex)</p> <hr/> <p><b>To Be Completed By Credit Union (for an application taken in person)</b></p> <p>Was the ethnicity of the Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>Was the race of the Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>Was the sex of the Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <hr/> <p><b>Applicant Name (print):</b> _____</p>   <p><b>Applicant Signature (optional):</b> _____</p>	<p><b>Co-Applicant:</b></p> <p><b>Ethnicity:</b></p> <p><input type="checkbox"/> Hispanic or Latino – <i>Check one or more</i></p> <p style="margin-left: 20px;"><input type="checkbox"/> Mexican      <input type="checkbox"/> Puerto Rican      <input type="checkbox"/> Cuban</p> <p><input type="checkbox"/> Other Hispanic or Latino – <i>Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:</i></p> <p style="margin-left: 20px;">_____</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p><input type="checkbox"/> I do not wish to provide this information (about Ethnicity)</p> <p><b>Race: check one or more</b></p> <p><input type="checkbox"/> American Indian or Alaska Native – <i>Print name of enrolled or principal tribe:</i></p> <p style="margin-left: 20px;">_____</p> <p><input type="checkbox"/> Asian</p> <p style="margin-left: 20px;"><input type="checkbox"/> Asian Indian      <input type="checkbox"/> Chinese      <input type="checkbox"/> Filipino</p> <p style="margin-left: 20px;"><input type="checkbox"/> Japanese      <input type="checkbox"/> Korean      <input type="checkbox"/> 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By Credit Union (for an application taken in person)</b></p> <p>Was the ethnicity of the Co-Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>Was the race of the Co-Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>Was the sex of the Co-Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <hr/> <p><b>Co-Applicant Name (print):</b> _____</p>   <p><b>Co-Applicant Signature (optional):</b> _____</p>
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