

CLOSED END HOME EQUITY LOAN

HOW DO I FIGURE MY EQUITY? Equity is the value of your property minus any

outstanding debt or liens against it.

MINIMUM LOAN AMOUNT: \$5,000

MAXIMUM LOAN AMOUNT: \$150,000

ANNUAL PERCENTAGE RATE: * Prime + 1.00% for up to 180 months

* Prime + 2.00% for up to 180 months

No fees or closing costs.

A premium is added for loans with an

LTV greater than 80%

FEES & CHARGES: Application fee is \$50

Closing costs are \$175-\$750

OTHER CHARGES:

There is a Late Payment Fee of 10% of the monthly payment or \$25, whichever is greater, if your payment is not received within 10 days of your due date.

**** Available only to Owner Occupied Residence ****

**** First or Second Lien Position Only *****

PLEASE RETURN THE FOLLOWING ITEMS WITH YOUR COMPLETED APPLICATION:

- 1. \$50 Application Fee
- 2. Copies of paystubs for the last 30 days from each applicant
- 3. Copy of Home Owner's Insurance Policy
- 4. Copies of two most recent utility bills



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Caton Tam		Fax: (216) 920-2030				Date			Account Numb	per	
CREDIT UNION, I		www.EatonFamilyCU.									
APPLICANT INFORMATION Type of Credit. Check the	DN. Marrie d type of cred	d Applicants may apply food dit for which you wish to a	r an individua pply.	l loan/separate ac	count.				_		
☐ Individual credit If y ☐ Joint credit If you are			•	• •		cant secti	on and the Spou	use/Co-Applicant	section.		
You must initial here if you	intend to	annly for Joint Credit: Ann	nlicant: 🗶	Co-Apr	nlicant: 🗶						
Spouse Information. You rof repayment; (3) you live property agreement or con	nust also c in a commi	omplete the Spouse section into property state (AZ, C						ount; (2) you are i Alaska resident a	relying on your spou and are currently su	ise's income as bject to a comm	a source nunity
Type of Credit Applied For	, ,	1. 7									
☐ Open End Home Equit		redit Closed End Hon	ne Equity 2nd	Mortgage Prope	erty Type:	☐ Single	e Family Home	☐ Condominiur	n 🔲 Townhouse	Other	
Amt Requested \$						-					
Property Address:						_			_		
Payment Method:			Il Deduction	☐ Automatic Pay	vment (AC	H)					
Optional Credit Insurance		•			•	,	rance election t	that discloses the	terms and condition	ns must be sign	ed for
coverage to become effect					•						
APPLICANT	ive. Tour	are interested in.	gic Orcait Life	insurance 🔲 o					ance		
	l he ecoured	hu colleterals or /h\ vau live	in a community	, proporty states or			SE CO-A		and or (h) you live in	a aammunitu near	andre ototoe on
Complete only if: (a) credit wil (c) you are an Alaska resident MARRIED SEPARAT	subject to a	community property agreeme	ent or communi	ty property state, or	(c) y	ou are an MARRIED	Alaska resident s ☐ SEPARATE	ubject to a commun	eral; or (b) you live in ity property agreemen ED (Single, Divorced,	t or community pro	operty trust:
APPLICANT NAME					SPO	JSE/CO-AF	PPLICANT NAME				
SOCIAL SECURITY NO.	DRIVER	S LICENSE NO. & STATE	BIRTH DA	ΤΕ	SOC	AL SECUR	RITY NO.	DRIVER'S LICE	NSE NO. & STATE	BIRTH DATE	
HOME PHONE NO.	CEL	L PHONE	DO YOU:		HOM	E PHONE I	NO.	CELL PHONE		DO YOU:	
			OWN	RENT						OWN	RENT
MOTHER'S MAIDEN NAME		E-MAIL ADDRESS			MOT	HER'S MAI	DEN NAME	RE	LATIONSHIP TO APPLICA	ANT	
CURRENT STREET ADDRESS		l	APT. NO.	SINCE	CUR	RENT STRI	EET ADDRESS	<u>'</u>		APT. NO.	SINCE
CITY/STATE/ZIP			I		CITY	/STATE/ZIF)				II
FORMER ADDRESS (if current les	s than 2 years)	1		YEARS THERE	FOR	MER ADDR	RESS(if current less to	han 2 years)		YEA	RS THERE
PERSONAL REFERENCE 1 (Name	e and Address)	RELATIONSHIP		PER	SONAL REF	FERENCE 1 (Name a	and Address)		RELATIONSHIP	
			PHONE NO.		1					PHONE NO.	
EMPLOYMENT & INCO	ME If you a	re self-employed, attach a financia	al statement and y	our most recent income	tax return.						
CURRENT EMPLOYER	,		HIRE DAT			RENT EMP	LOYER			HIRE DATE	
CURRENT ADDRESS					CUR	RENT ADD	RESS				
WORK PHONE NO.	POSITI	ON	MONTHLY GRO	OSS INCOME	WOR	K PHONE	NO.	POSITION	N S	MONTHLY GROSS IN	NCOME
FORMER EMPLOYER (if current le	ess than 2 year	s)			FOR	MER EMPL	OYER (if current less	s than 2 years)	<u> </u>		
OTHER INCOME You nee	ed not list incor	ne from alimony, child support or s	separate maintena	nce unless you wish it o	considered for	purposes o	of granting this credit.				
SOURCE OF OTHER INCOME		FREQUENCY	MONTHLY \$	INCOME	SOU	RCE OF 01	THER INCOME	FREQUE	NCY N	MONTHLY INCOME	
ASSETS & DEPOSITS	Please check	he appropriate boy helow		Applicant OR C - S	nouse/Co-Ann	licant					
CHECK ONE		INANCIAL INSTITUTION NAME		CURRENT	CHECK	ONE	1	FINANCIAL I	NSTITUTION NAME		RENT
A C TYPE	·			BALANCE	A	С	TYPE				ANCE
			\$							\$	
			\$							\$	
AUTO #1 MAKE	MODEL	YEAR	VA \$	LUE	AUTO #	‡2 MAKE		MODEL	YEAR	VALUE \$	
REAL ESTATE TYPE				LUE	OTHER	ASSETS				VALUE	
			\$							\$	

HOME FOLLITY INCODARTION										
HOME EQUITY INFORMATION - List a	any liens against y	your house. A lien is a legal claim filed		perty as security for paym ENT BALANCE	nent of a debt.	MONTHLY PAY	MENIT			
FIRST MORTGAGE HELD BY			PRES	ENI BALANCE		\$	IVIEIN I			
OTHER LIENS (DESCRIBE)										
IS THE PROPERTY DESCRIBED IN THIS SECTION	YOUR PRINCIPA	AL DWELLING? Tyes No	IS AI	NYONE OTHER THAN Y	OUR SPOUSE A P	PART OWNER OF Y	OUR HO!	ΛΕ?	Yes 🗌	No
		vith or without a balance. CO-APPLICANT D - DEBTS TO BE PAID (DEE IE I OANI	IS CDANTED						
DI EASE CHECK					4050	DALANCE	Π.		\/ D 4\/4	
A C D LIST ALL OBLIGATIONS INCL	UDING CREDIT (UNION LOANS (Attach separate sheet if no	ecessary)	ACCOUNT NUI	MBER	BALANCE		MONTH	Y PAYN	MENTS
FINANCIAL INFORMATION PLEASE AN	SWER THE FOL	I OWING OUESTIONS AND IF A "YES	" ANSWER	IS GIVEN EXPLAIN ON	Ι Δ SEPΔRΔΤΕ SH	FFT	Applic		Со-Ар	
					THE STATE OF	LLI.	YES	NO	YES	NO
HAVE YOU EVER FILED FOR BANKRUPTCY DO YOU HAVE ANY OUTSTANDING JUDGM		STADJUSTMENT FLAN CONFIRME	DUNDER	CHAPTER 13?						
HAVE YOU HAD PROPERTY FORECLOSED	=	N A DEED IN LIEU OF FORECLOSI	IDE IN THI	ELACTIVEADO2						
4. ARE YOU A PARTY IN A LAWSUIT?	UPON OR GIVE	IN A DEED IN LIEU OF FOREGLOS	JKE IN INI	ELASI/ TEARS!						
5. ARE YOU OTHER THAN A U.S. CITIZEN OR	DEDMANENTD	ECIDENT ALIENS								
6. IS YOUR INCOME LIKELY TO DECLINE IN T										
7. ARE YOU A CO-MAKER, CO-SIGNER OR GL										
7. ARE TOO A CO-MAREN, CO-SIGNER OR GO	ARANTOR ON	ANT LOAN NOT LISTED ABOVE?								
FOR WHOM (Name of other obligated on loan):		TO \	VHOM (Name of Credit	or):					
	INFOF	RMATION FOR GOVERNM	FNT MC	NITORING PLIR	POSES					
disclosure laws. You are not required to furnish this in it. If you furnish the information, please provide both to note the information on the basis of visual observe satisfy all requirements to which the lender is subject. BORROWER:	ethnicity and race ation or surname. under applicable s h this informatio NOT Hispan Asian White	. For race, you may check more than of If you do not wish to furnish the infonstate law for the particular type of loan and ic or Latino Black or African American	one designa mation, plea applied for.) CO-BORF Ethnicity Race:	ion. If you do not furnish se check the box below ROWER:	n ethnicity, race, or s. (Lender must revi I do not wish to fu Hispanic or Latin American Indian skan Native Native Hawaiian er Pacific Islande Female	sex, under Federal new the above mater urnish this informate o NOT Hispa or Asia or White	egulations rial to ass stion anic or L an ite	atino Blac America	nder is re the discl	equired losures
SIGNATURES Are you surrently on a	otivo militory o	http://www.com/sha								
SIGNATURES — Are you currently on active promise that the information stated in this Home Ect any review, increase, extension or renewal of credit, and of the credit received by you. False or misleading staten You will notify the Credit fulion in writing immediately obtain credit. If you request, you will be provided the namy security agreement, pledge, advance disbursement subject to the terms and conditions of such security agreement institutions to obtain, verify, and record information information that will allow us to identify you. We may a OHIO RESIDENTS: The Ohio laws against discrimina individual upon request. The Ohio civil rights commiss WISCONSIN RESIDENTS: For any provision of any namy to be provided with a copy of the Agreement, decreased. This credit request, if approved, will be incurred Wisconsin Resident Signature X Applicant	quity Loan Applica d in connection wit nents in your appli of any changes in me and address o voucher or similar eement, pledge, ac is FOR OPENIN at identifies each liso ask to see you tion requires that ion administers of arrital property ac ee or statement o ed in the interest of	tion is true and correct to the best of you hany collection activities involving credit cation may cause any loan to be in defa your name, address or employment. You for any credit bureau from which we received occument that may be executed, now odvance disbursement voucher or similar of GANEW ACCOUNT: To help the ge person who opens an account. What ur driver's license or other identifying did all creditors make credit equally availated ompliance with this law. The prement, court decree under WIST so we have actual knowledge of its terms be of the marriage or family of the undersigned.	extended to ult. You agree ou understanded a credit or in the futured occument. overnment if this means occuments. ole to all cree 766.70, or sefore any congred.	o you. The Credit Union mee that this application shand that it is a federal crim report. You understand a e, in connection with such ight the funding of terrofor you: When you open dit worthy customers and tatement under WI ST §	ay also obtain credit all be the Credit Unic le to willfully and del nd agree that if your or credit will secure the virism and money la an account, we will d that credit reportin 766.59 to adversely	reports to update, in- no's property whether liberately provide inci- application is approv- application is approv- approving activities, it ask for your name, ag agencies maintain affect the rights of t	crease, ex or not this omplete o ved, that a payment o Federal la address, separate	ttend, rer s applicat r incorrec ny collate f funds a aw requir date of credit hi	new or co ion is app to informateral description dvanced res all fir birth, and stories o	ollection proved. ation to ribed in to you, nancial d other on each t Union
Credit Union Use Only										
Loan Approved ☐ Yes ☐ No Loan Officer Signature		ed ☐ Yes ☐ No ittee Signature	Mortgag	e Loan Originator:		Mortgage Loan	Officer I	Vame:		
X	X		<i>NMLSR</i>	ID #.		NMLSR ID#:				



Agreement of Financial Responsibility

I/we have applied for a Home Equity Loan with the Eaton Family Credit Union.

I/we understand and agree that should my/our loan request be declined, or canceled, for any reason prior to closing, I/we am/are responsible for reimbursing the Eaton Family Credit Union for all cost incurred by them prior to decline or cancellation within 30 days.

In return, the Eaton Family Credit Union agrees to acquire the needed information one step at a time. Also, the Credit Union agrees to discuss any derogatory information received with me/us prior to continuing with my/our loan request. This process will insure that, should a problem arise, my financial responsibility will be kept to a minimum. Finally, should my/our request be declined or cancelled prior to closing, the Credit Union will provide me/us with a detailed listing of what services were performed, by whom and at what cost within 3 days of decline or cancellation.

Signature	Date	Signature	Date

To our NEW LOAN Member

Thank you for obtaining a loan through YOUR Credit Union!

NAME LOAN # DESCRIPTION OF PROPERTY: YEARMAKE MODEL VIN#	Comprehensive and Collision Coverage and the EATON FAMILY CREDIT MUST BE LISTED AS LIENHOLDER OR LOSS PAYEE of policy. 1. This property is collateral on well as a second control of the collateral on well as a second control of the collateral on well as a second control of the collateral on well as a second control of the collateral on well as a second control of the collateral on well as a second control of the collateral on well as a second control of the collateral on well as a second control of the collateral on well as a second control of the collateral on the collateral on the collision of the control of the collateral on the collision of	, on your our loan
ATTN: IN 333 Babl	MILY CREDIT UNION SURANCE CENTER bitt Road Suite 100 blid, Oh 44123	
2. The MAXIMUM allowed deductible is	s \$1000.00	
In addition, please provide us with your agent's	s \$1000.00 name and telephone number. Include your insurance	e company
In addition, please provide us with your agent's name and policy information if known:		
In addition, please provide us with your agent's name and policy information if known: Agent (or Agency) Name	name and telephone number. Include your insuranc	
In addition, please provide us with your agent's name and policy information if known: Agent (or Agency) Name/Pol Insurance Co/Pol Contact our Insurance Ce Information can be FA *As a part of your agreement with the credit to avoid a charge for insurance being addefective on the date of the loan. If the vehice		ossible uld be Loan",