

**GOODYEAR SAN ANGELO FEDERAL CREDIT UNION**

Mail: PO Box 232

In town: 809 Knickerbocker Rd. Ste E

San Angelo, Texas 76902

San Angelo, Texas 76903

Office 325-227-6520 Fax 325-227-6520

Manager: 325-245-3746

**APPLICATION FOR CLOSED END LOAN**

Complete ALL Information for credit. Complete both sections for joint application in community states.

This loan is based on: (check one):  Applicant's signature;  Secured collateral;  Shares

Applicant name: \_\_\_\_\_ Account # \_\_\_\_\_

 Endorser, guarantor, surety (co-maker) name: \_\_\_\_\_ Joint credit: provide information about both of you in both sections below

Amount Requested: \$ \_\_\_\_\_ Loan Date: \_\_\_\_\_ Loan #: \_\_\_\_\_

Number of monthly payments: \_\_\_\_\_ Payment amount: \$ \_\_\_\_\_ Payment due date: \_\_\_\_\_

Reason for loan: \_\_\_\_\_

Collateral: Year \_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Vin #: \_\_\_\_\_ Miles: \_\_\_\_\_

Collateral: Year \_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Vin #: \_\_\_\_\_ Miles: \_\_\_\_\_

IF THIS IS AN OUT OF TEXAS TITLED VEHICLE LOAN, DO YOU AGREE TO PAY ANY EXPENSE

TO ACQUIRE THE TITLE?  Yes  No

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social security number: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone #: \_\_\_\_\_

May we contact you by email?  Yes  No Your preferred email address: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone \_\_\_\_\_ Address: \_\_\_\_\_

Length of service there? \_\_\_\_\_ years. Current position title: \_\_\_\_\_

Number of dependents: \_\_\_\_\_ ages: \_\_\_\_\_

Name of nearest relative: \_\_\_\_\_ Phone \_\_\_\_\_

Personal reference: \_\_\_\_\_ Phone \_\_\_\_\_

Bank account number: \_\_\_\_\_ Bank name: \_\_\_\_\_

Salary: \$ \_\_\_\_\_ Is this Per month \_\_\_\_ or Per year \_\_\_\_? Is this Net \_\_\_\_ or Gross \_\_\_\_?

Other income: \$ \_\_\_\_\_ per month \_\_\_\_\_ Source: \_\_\_\_\_

Supply a document to verify income(s) with the loan application. \_\_\_\_\_

A PAY CHECK STUB OR IRS INCOME TAX PAGE will help verify the incomes. \_\_\_\_\_

Alimony, child support, or separate maintenance income need not be reported if you do not wish to have it considered as a basis for repaying this loan. \$ \_\_\_\_\_

Will any income be reduced:  Yes  No By how much? \$ \_\_\_\_\_**IF THIS IS A JOINT LIST APPLICANTS INFORMATION HERE :**

Name: \_\_\_\_\_ SS# \_\_\_\_\_ DOB \_\_\_\_\_

Home Address \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ zip: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_

Number of dependents: \_\_\_\_\_ ages: \_\_\_\_\_

Name of nearest relative: \_\_\_\_\_ Phone \_\_\_\_\_

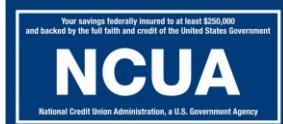
Personal reference: \_\_\_\_\_ Phone \_\_\_\_\_

Bank account number \_\_\_\_\_ Bank: \_\_\_\_\_

Salary: \$ \_\_\_\_\_ per mo. \_\_\_\_ or per year \_\_\_\_ Net \_\_\_\_ Gross

Other income: \_\_\_\_\_ per mo. \_\_\_\_\_ Source: \_\_\_\_\_

Alimony, child support, or separate maintenance income need not be reported if you do not wish to have it considered as a basis for repaying this loan. \_\_\_\_\_

Will any income be reduced:  Yes  No How much? \_\_\_\_\_

**MARITAL STATUS:**APPLICANT:  Married  Single  SeparatedJOINT applicant:  Married  Single  Separated

Outstanding debts: - we will also print a credit report.

Creditor	type	name on loan	original amt.	current balance	payment	current
_____	_____	_____	\$_____	\$_____	\$_____	yes/no
_____	_____	_____	\$_____	\$_____	\$_____	yes/no
_____	_____	_____	\$_____	\$_____	\$_____	yes/no
_____	_____	_____	\$_____	\$_____	\$_____	yes/no
Totals:			\$_____	\$_____		

Are there any unsatisfied judgment?  Yes  No

Which one and to whom: \_\_\_\_\_

Are there any persons obligated on any of the above loans?  Yes  No Who \_\_\_\_\_Is applicant and/or party co-maker, cosigner, or guarantee on any?  Yes  No Who \_\_\_\_\_Has applicant and/or co-maker been the subject of an order for relief under the Federal Bankruptcy Code or an adjudicated bankruptcy under the ACT in the past 10 years?  Yes  No \_\_\_\_\_

Everything that I/we have stated in this application is correct to the best of my/our knowledge. I am authorizing GSAFCU to check my/our credit and employment history and I will answer questions about our credit experience. I am authorizing GSAFCU to verify any information concerning me through third-party sources to resolve any questions or concerns about the information I/we have provided.

Do you want to purchase GAP insurance on your vehicle?  Yes  No \_\_\_\_\_

Cost for the Gap Insurance Policy is \$265.00 payable at time of the loan or during the loan life.

All vehicle loan balances above \$5,000.00 MUST carry full coverage on the vehicle. We MUST be shown as Lien Holder and a current copy of the insurance sent to us each time the policy renews.

**You Need to maintain enough in your account to make all monthly loan payment totals.**

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-maker signature: \_\_\_\_\_ Date: \_\_\_\_\_

Loan Approval information: Account # \_\_\_\_\_ Loan note # \_\_\_\_\_ Share balance \$ \_\_\_\_\_

Loan balances: see our ratio sheet for income/debt ratio \_\_\_\_\_ % Status: \_\_\_\_\_

Meets current loan criteria:  Yes  No

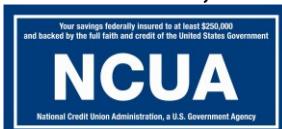
President: James Keith \_\_\_\_\_ Vice-President: Scarlet James \_\_\_\_\_

Secretary: Jim Black \_\_\_\_\_ Loan Officer: Shandra Barchenger \_\_\_\_\_

Loan Officer: Timothy Clark \_\_\_\_\_ Loan Officer: Lisa Jirasek \_\_\_\_\_

Manager: Marshall Stewart \_\_\_\_\_

Additional information regarding this loan and applicant(s): \_\_\_\_\_

**PROVIDE US COPIES OF YOUR PAY CHECK STUB, OR TAX RETURN TO VERIFY INCOME.**View us at [www.GYSAFCU.com](http://www.GYSAFCU.com)Offices: 809 Knickerbocker Suite E  
San Angelo, Texas 7690311570 N US Hwy 277  
San Angelo, Texas 76905

THANK YOU FOR APPLYING FOR A LOAN. CHECK THESE REQUIREMENTS AND PROVIDED THEM TO US.

We do loans on a first come - first serve basis. SO – Please provide all your information as quickly as possible.

Use these guidelines so we can quickly provide you an answer for your request.

- 1) For all loans, please attach or supply a pay check stub, document, or statement so we can verify your income.
- 2) Indicate what you want for a monthly payment so we don't over commit you.
- 3) YOU MUST have at least one extra payment in your share account so we can apply it should your first incoming payment may not be late. (We pay you a dividend on your share balance which could help offset interest rates.)
- 4) Indicate what date of the month you want the payment due. Once selected please provide the payment prior to that date.
- 5) FOR VEHICLE LOANS – WE NEED THE MILEAGE AND VIN (vehicle identification number), NUMBER, AND THE SALES SHEET. PROVIDE A FULL DESCRIPTION LISTING ANY “EXTRAS”. Example. Is the vehicle a 4X4, 2WD, 4WD, 2-door, 4-door, crew cab, club cab, heavy duty, diesel engine 6 or 8 cylinder, off road package, etc. please provide as much detail as possible. List any special add-ons to the vehicle.
- 6) OR - Have the current finance company provide you (then tell us) what the 10-day payoff is on the loan.
- 7) Tell us what your current payments are and the % you are paying on that loan.
- 8) Tell us what date of the month you need the payment to be due. Take it to the DMV and show us as lienholder.
- 9) Have the dealership show us as lienholder, Or when you get the released title you can do it at the DMV.
- 10) For vehicle loans we need your insurance company to show us as lien holder and fax a copy to us.
- 11) FOR OUT OF TEXAS TITLED VEHICLES, YOU MAY BE CHARGED FOR ANY COSTS WE ENCURE IN ACQUIRING THE LIEN ON THE LOAN.
- 12) Build your share balance so we have funds to make loans to other members.
- 13) Let me know if you want a copy of your credit report.

OUR MAILING ADDRESS: GOODYEAR SAN ANGELO FCU  
PO BOX 232  
SAN ANGELO, TEXAS 76902

PAYMENTS ARE EXPECTED PRIOR TO THE DUE DATE.

THANKS FOR MAKING YOUR CREDIT UNION EVEN MORE SUCCESSFUL.

Marshall Stewart, Manager  
For the Board.