

NEW ORLEANS PORT COMMISSION EMPLOYEES CREDIT UNION APPLICATION FOR LOAN

TYPE OF LOAN _____

DATE:	I HEREBY APPLY FOR A LOAN IN THE AMOUNT OF _____ TO BE USED FOR THE FOLLOWING PRODUCTIVE PURPOSE/S. _____
ACCT. #:	

1. YOURSELF ACTIVE EMPLOYEE RETIRED EMPLOYEE C.U. SHARE AMT. _____

_____ LAST NAME	_____ FIRST	_____ MIDDLE	_____ BIRTH DATE	_____ AGE	_____ SOCIAL SECURITY NO.
_____ STREET ADDRESS		_____ CITY	_____ STATE	_____ ZIP	
AT PRESENT ADDRESS	YRS. _____ MO. _____	_____ HOME PHONE	_____ DRIVERS LICENSE NO./EXP.	_____ STATE	MARTIAL STATUS SINGLE <input type="checkbox"/> SEPARATED <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/>
_____ PREVIOUS ADDRESS		_____ CITY	_____ STATE	_____ ZIP	

2. YOUR INCOME

_____ SUPERVISOR	_____ DEPARTMENT	_____ BUSINESS PHONE	_____ DATE EMPLOYED	_____ GROSS MONTHLY SALARY
ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THE OBLIGATION, ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME RECEIVED UNDER			<input type="checkbox"/> COURT ORDER <input type="checkbox"/> WRITTEN AGREEMENT <input type="checkbox"/> ORAL UNDERSTANDING	\$ _____ OTHER INCOME SOURCE

3. YOUR SPOUSE

_____ LAST NAME	_____ FIRST	_____ MIDDLE	_____ BIRTH DATE	_____ SOCIAL SECURITY NO.	_____ GROSS MONTHLY SALARY
_____ EMPLOYER	_____ DEPARTMENT	_____ POSITION	_____ EMPLOYERS PHONE NO.	_____ DATE EMPLOYED	
_____ EMPLOYERS STREET ADDRESS			_____ CITY	_____ STATE	_____ ZIP
			_____ DRIVERS LICENSE NO./EXP.	_____ STATE	

I HEREBY CERTIFY THAT ALL STATEMENTS MADE INCLUDING THOSE ON THE ATTACHED PAPERS HERETO, ARE TRUE AND COMPLETE AND SUBMITTED FOR THE PURPOSE OF OBTAINING CREDIT. I AUTHORIZE THE PORT OF N.O. C.U. WHO SHALL INCUR NO LIABILITIES OF SAID INVESTIGATIONS, TO INVESTIGATE MY CREDIT FILE AND PERSONAL BACKGROUND FROM TIME TO TIME AS IT DEEMS NECESSARY TO MAKE INQUIRIES PERTAINING TO MY EMPLOYMENT, CREDIT STANDING AND MY FINANCIAL RESPONSIBILITY. I UNDERSTAND THAT ANY FALSE INFORMATION AND STATEMENTS MADE BY ME ON THIS APPLICATION WILL BE CAUSE FOR THE DISAPPROVAL OF THIS LOAN. IF THIS LOAN IS GRANTED, I UNDERSTAND THAT ONLY THOSE SHARES IN EXCESS OF LOAN BALANCE MAY BE WITHDRAWN FROM MY SHARE ACCOUNT UNTIL LOAN IS PAID IN FULL.

SIGNATURE (X) _____ DATE _____

DO NOT WRITE BELOW THIS LINE

CREDIT COMMITTEE USE ONLY

ON _____ THE CREDIT COMMITTEE MET AND APPROVED / DISAPPROVED THIS
APPLICATION FOR A LOAN IN THE AMOUNT OF _____

CHAIRMAN MEMBER MEMBER MEMBER