



Loan Application

Amount Requested: \$

Type of Loan: _____

_____/_____/_____
Full Name Date of Birth

Address

_____/_____/_____
City/State/Zip Driver's License # / Exp Date

_____/_____
Mother's Maiden Name Social Security Number
() ()

_____/_____
Home Phone Work Phone
\$

_____/_____/_____
Monthly Gross Income* Employer # of years
S

_____/_____
Residence Payments Years at Residence
()

_____/_____
Reference #1 Name Phone

Joint Applicant's Information

_____/_____/_____
Full Name Date of Birth

Address

_____/_____/_____
City/State/Zip Driver's License # / Exp Date

_____/_____
Mother's Maiden Name Social Security Number
() ()

_____/_____
Home Phone Work Phone
\$

_____/_____/_____
Monthly Gross Income* Employer # of years
S

_____/_____
Residence Payments Years at Residence
()

_____/_____
Reference #2 Name Phone

*Income from alimony, child support or separate maintenance need not be revealed unless you wish such income to support a request for credit. In some instances, ECU will require your signature(s) to be authorized upon closing.

I/We certify everything I/we have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved, and I/we authorize you to share this application with any of our affiliates for the purpose of determining whether I/we might qualify for other products you or those affiliated offer. I/we authorize you to check my/our record with you. I/we understand that I/we must update credit information at your request if my/our financial conditions changes.

ANY FAX OF MY SIGNATURE MAY BE HELD EQUALLY ENFORCEABLE AS MY GENUINE SIGNATURE.

Applicant's Signature Date

Joint Applicant's Signature Date

Complete & detach then mail to 1401 Lakeshore Dr Lodi CA 95242 or fax to (209) 444-2426