

# **APPLY TODAY**

## **FOR A CHOICE ONE**

### **HOME EQUITY FIXED RATE LOAN**

#### **Choice One Home Equity Fixed Rate Loan Features**

- . Low Fixed Rates
- . No Fees (Includes Application Fee, Appraisal, Tax Monitoring and Title Insurance when loan amount exceeds \$50,000)
- . Terms up to 15 years
- . Borrow Up to 80% of value
- . Debt Protection – Life, Disability and Involuntary Unemployment
- . Automatic Payment Options
- . Online Access

#### **Submit Attached Completed Application Along With**

- . Attached Authorization Form
- . Existing Mortgage Statement
- . Prior and Current Year Property Tax Receipts
- . Homeowner's Insurance Policy
- . Proof of Income for the last 30 days
- . Name, Address, Account Number and Payoff Amount of any debts to be paid

#### **For Complete Details**

Questions call 570-823-7676 Press 2 Press 2.

Or Visit us at: <https://choiceone.org/loans/home-equity-loans/>



## Application

**NOTE AND COMPLETE** **NOTICE TO OHIO APPLICANTS:** The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

**WISCONSIN RESIDENTS ONLY:** (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

SIGNATURE FOR WISCONSIN RESIDENTS ONLY \_\_\_\_\_ DATE \_\_\_\_\_

**Married Applicants may apply for a separate account.**

**Individual Credit:** Complete **Applicant** section. Complete **Co-Applicant, Spouse**, (referred to as "Other") section: (1) about your spouse if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI), or (2) if your spouse will use the Account. Please check box to indicate whom the information is about.

**Joint Credit:** Each Applicant must **individually** complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

**Amount Requested \$** \_\_\_\_\_ **Purpose:** \_\_\_\_\_

**Repayment:**  Payroll Deduction  Cash  Automatic Payment  Military Allotment  \_\_\_\_\_

**STATEMENT OF INTENT** Are you interested in having your loan protected?  Yes  No  
If you answer "yes", the credit union will disclose the cost to protect your loan. The protection is voluntary and does not affect your loan approval. In order for your loan to be covered, you will need to sign a separate application that explains the terms and conditions.

| <b>APPLICANT INFORMATION</b> <b>APPLICANT</b>   |            |                        |                     | <b>OTHER</b> <input type="checkbox"/> <b>CO-APPLICANT</b> <input type="checkbox"/> <b>SPOUSE</b>  |            |                        |                     |
|---|------------|------------------------|---------------------|---|------------|------------------------|---------------------|
| NAME (Last - First - Initial)   |            |                        |                     | NAME (Last - First - Initial)   |            |                        |                     |
| DRIVER'S LICENSE NUMBER/STATE   |            |                        | BIRTH DATE          | DRIVER'S LICENSE NUMBER/STATE   |            |                        | BIRTH DATE          |
| ACCOUNT NUMBER  |            | SOCIAL SECURITY NUMBER |                     | ACCOUNT NUMBER  |            | SOCIAL SECURITY NUMBER |                     |
| HOME PHONE  | CELL PHONE | BUSINESS PHONE/EXT.    |                     | HOME PHONE  | CELL PHONE | BUSINESS PHONE/EXT.    |                     |
| PRESENT ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT  |            |                        | LENGTH AT RESIDENCE | PRESENT ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT  |            |                        | LENGTH AT RESIDENCE |
| PREVIOUS ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT   |            |                        | LENGTH AT RESIDENCE | PREVIOUS ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT   |            |                        | LENGTH AT RESIDENCE |
| COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:<br><input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed) |            |                        |                     | COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:<br><input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed) |            |                        |                     |
| LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)  |            |                        |                     | LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)  |            |                        |                     |

| <b>EMPLOYMENT INFORMATION</b>   |               |                                    |  |
|---|---------------|------------------------------------|--|
| NAME AND ADDRESS OF EMPLOYER  |               |                                    |  |
| YOUR TITLE/GRADE  |               | SUPERVISOR'S NAME                  |  |
| START DATE  | HOURS AT WORK | IF SELF EMPLOYED, TYPE OF BUSINESS |  |
| IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS   |               |                                    |  |
| STARTING DATE   |               | ENDING DATE                        |  |
| MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR <input type="checkbox"/> YES <input type="checkbox"/> NO<br>WHERE _____ ENDING/SEPARATION DATE _____ |               |                                    |  |

| <b>INCOME INFORMATION</b>   |  |   |  |
|---|--|---|--|
| NOTICE: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered. |  |   |  |
| EMPLOYMENT INCOME \$ _____ PER _____  |  | <input type="checkbox"/> NET <input type="checkbox"/> GROSS |  |
| OTHER INCOME \$ _____ PER _____   |  | SOURCE _____  |  |

| <b>REFERENCES</b> Please include Street, City, State and Zip. |  |            |  |
|---|--|------------|--|
| NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU      |  |            |  |
| RELATIONSHIP  |  | HOME PHONE |  |
| NAME AND ADDRESS OF PERSONAL FRIEND - NOT A RELATIVE          |  |            |  |
| RELATIONSHIP  |  | HOME PHONE |  |
| NAME AND ADDRESS OF PERSONAL FRIEND - NOT A RELATIVE          |  |            |  |
| RELATIONSHIP  |  | HOME PHONE |  |



**AUTHORIZATION TO OBTAIN INFORMATION**

**I AUTHORIZE THE CHOICE ONE FCU TO REQUEST VERIFICATION OF MY FINANCIAL ACCOUNTS, OTHER ASSETS, EMPLOYMENT EARNINGS RECORDS AND ALSO A CONSUMER CREDIT REPORT. I FURTHER AUTHORIZE MY FINANCIAL INSTITUTION(S) AND EMPLOYER (S) TO ACCEPT A COPY OF THE DOCUMENT AS THEIR AUTHORIZATION TO RELEASE SUCH INFORMATION.**

**CUSTOMER SIGNATURE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**CUSTOMER SIGNATURE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**THIS INFORMATION IS CONFIDENTIAL AND WILL ONLY BE USED TO PROCESS YOUR HOME EQUITY MORTGAGE LOAN APPLICATION.**

