

South Bay Credit Union

312 N. Pacific Coast Hwy
 Redondo Beach, CA 90277
 fax (424)275-4387
 direct (310) 374-3436

CREDIT LINE ACCOUNT APPLICATION

ACCOUNT NUMBER - APPLICANT	ACCOUNT NUMBER - CO-APPLICANT	DATE
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<p>Applicant Information PRINT OR TYPE ALL INFORMATION</p> <p>1. If You live in a community property state, are You: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Includes Single, Divorced and Widowed)</p> <p>2. Married applicants can apply for individual credit. Indicate if You would like: <input type="checkbox"/> Individual Credit <input type="checkbox"/> Joint Credit with Your Spouse <input type="checkbox"/> Joint Credit with a Guarantor or another Applicant</p> <p>3. Method of Payment: <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Automatic Share Transfer <input type="checkbox"/> Cash Payment</p> <p>4. Frequency of Payment: <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-Monthly <input type="checkbox"/> Monthly</p>	<p>Spouse/Co-Applicant Information</p> <p>5. Complete Spouse/Co-Applicant information only if any of the following apply: a. This is for joint credit with Your Spouse or other Co-Applicant. b. Your Spouse will use Your Account. c. You're relying on Your Spouse's income as a source of repayment for the credit requested. d. You live in a community property state: Arizona, California, Idaho, Louisiana, New Mexico, Nevada, Texas, Washington, Wisconsin (or Puerto Rico).</p> <p>6. Definitions Whenever used in this application, the words "You" and "Your" refer to the applicant(s), and the words "We", "Us", and "Our" refer to the Lender.</p>
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Credit Applied For:

<input type="checkbox"/> VISA Platinum * <i>*the Card issued is subject to our underwriting guidelines</i>	<input type="checkbox"/> Signature Line of Credit (Including Overdraft Protection)	Credit Limit Requested \$ _____
<input type="checkbox"/> VISA Share Secured	<input type="checkbox"/> Signature Loan	Purpose _____
Personal Property Secured (inc new/used auto)	<input type="checkbox"/> Share/Certificate Secured	Collateral Offered _____
	<input type="checkbox"/> Other Secured	_____

There are costs associated with the use of any Credit Card issued to You by Us. You may request specific information about these costs by contacting Us by telephone at (310) 374-3436 (callers from outside Our area code may call collect) or by writing Us at 312 N. Pacific Coast Hwy., Redondo Beach, California 90277.

APPLICANT

FIRST NAME	INITIAL	LAST NAME
SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER/STATE	BIRTHDATE
CURRENT STREET ADDRESS	YEARS	
CITY	STATE	ZIP
EMAIL ADDRESS		
DO YOU: <input type="checkbox"/> OWN	HOME TELEPHONE	NO. OF DEPENDENTS
<input type="checkbox"/> RENT <input type="checkbox"/> PAY BOARD		AGES OF DEPENDENTS
NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU		

SPOUSE/CO-APPLICANT

FIRST NAME	INITIAL	LAST NAME
SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER/STATE	BIRTHDATE
CURRENT STREET ADDRESS	YEARS	
CITY	STATE	ZIP
EMAIL ADDRESS		
DO YOU: <input type="checkbox"/> OWN	HOME TELEPHONE	NO. OF DEPENDENTS
<input type="checkbox"/> RENT <input type="checkbox"/> PAY BOARD		AGES OF DEPENDENTS
NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU		

EMPLOYMENT AND INCOME If self-employed or retired, attach financial statement or last 2 years income tax returns.

CURRENT EMPLOYER	EMPLOYMENT DATE	
ADDRESS/CITY/STATE/ZIP		
WORK TELEPHONE	POSITION	MONTHLY GROSS INCOME \$
FORMER EMPLOYER (LESS THAN 2 YEARS)	POSITION	YEARS THERE

CURRENT EMPLOYER	EMPLOYMENT DATE	
ADDRESS/CITY/STATE/ZIP		
WORK TELEPHONE	POSITION	MONTHLY GROSS INCOME \$
FORMER EMPLOYER (LESS THAN 2 YEARS)	POSITION	YEARS THERE

OTHER INCOME You need not list income from alimony, child support or separate maintenance payments unless You want it considered in evaluating this credit application.

TYPE/SOURCE OF OTHER INCOME	MONTHLY AMOUNT \$
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ASSETS AND DEPOSITS Attach a separate sheet if necessary.

TYPE	BANK (OR OTHER) NAME AND ADDRESS	ACCOUNT NUMBER	APPROXIMATE BALANCE
Checking			
Savings			
Other			
CAR 1 - YR. - MAKE - MODEL		BALANCE OWED \$	
CAR 2 - YR. - MAKE - MODEL		BALANCE OWED \$	
HOMEOWNERS: PLEASE INDICATE PROPERTY ADDRESS		YEAR PURCHASED	APPROX. VALUE \$

TYPE	BANK (OR OTHER) NAME AND ADDRESS	ACCOUNT NUMBER	APPROXIMATE BALANCE
Checking			
Savings			
Other			
CAR 1 - YR. - MAKE - MODEL		BALANCE OWED \$	
CAR 2 - YR. - MAKE - MODEL		BALANCE OWED \$	
HOMEOWNERS: PLEASE INDICATE PROPERTY ADDRESS		YEAR PURCHASED	APPROX. VALUE \$

