

Dairyland Power Credit Union

3200 East Avenue South
 P.O. Box 817
 La Crosse, WI 54602-0817
 (608) 787-1283

LOAN APPLICATION

Married Applicants may apply for a separate account. Check the appropriate box to indicate Individual Credit or Joint Credit.

Individual Credit: Complete **Applicant** sections if only the applicant's income is considered for loan approval. Complete **Applicant** and **Co-Applicant** sections: (1) if you are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of credit requested, or; (2) if you reside in a Community Property State, or; (3) if you are relying on property located in a Community Property State as a basis for repayment of the credit requested. Community Property States include: AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI.

Joint Credit: Complete **Applicant** and **Co-Applicant** sections if your co-applicant will be contractually liable for repayment of the loan and initial below:
 We intend to apply for joint credit _____ (Applicant Initials) _____ (Co-Applicant Initials)

PLEASE CHECK BELOW TO INDICATE THE TYPE OF ACCOUNT(S) AND TYPE OF CREDIT FOR WHICH YOU ARE APPLYING.

Account/Loan: Individual Joint
 (Including ATM/Debit Card Access to the Account if Available)

Amount Requested \$ _____

Purpose/Collateral: _____ Other Loan Request _____

Repayment: Payroll Deduction Billing Notice Automatic Payment Web Pay Other

APPLICANT				<input type="checkbox"/> CO-APPLICANT		<input type="checkbox"/> NON-APPLICANT SPOUSE/OTHER		<input type="checkbox"/> GUARANTOR	
NAME (Last - First - Initial)		ACCOUNT NUMBER		NAME (Last - First - Initial)		ACCOUNT NUMBER			
SOCIAL SECURITY NUMBER		MOTHER'S MAIDEN NAME		SOCIAL SECURITY NUMBER		MOTHER'S MAIDEN NAME			
E-MAIL ADDRESS		FAX NUMBER		E-MAIL ADDRESS		FAX NUMBER			
DRIVER'S LICENSE NUMBER/STATE		AGES OF DEPENDENTS		DRIVER'S LICENSE NUMBER/STATE		AGES OF DEPENDENTS			
BIRTH DATE	HOME PHONE	BUSINESS PHONE/EXT.		BIRTH DATE	HOME PHONE	BUSINESS PHONE/EXT.			
PRESENT ADDRESS (Street - City - State - Zip)		<input type="checkbox"/> OWN <input type="checkbox"/> RENT		PRESENT ADDRESS (Street - City - State - Zip)		<input type="checkbox"/> OWN <input type="checkbox"/> RENT			
		YEARS/MONTHS AT THIS ADDRESS				YEARS/MONTHS AT THIS ADDRESS			
PREVIOUS ADDRESS (Street - City - State - Zip)		<input type="checkbox"/> OWN <input type="checkbox"/> RENT		PREVIOUS ADDRESS (Street - City - State - Zip)		<input type="checkbox"/> OWN <input type="checkbox"/> RENT			
		YEARS/MONTHS AT THIS ADDRESS				YEARS/MONTHS AT THIS ADDRESS			
PLEASE COMPLETE ONLY IF YOU ARE APPLYING FOR JOINT CREDIT, SECURED CREDIT, OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE.					PLEASE COMPLETE ONLY IF YOU ARE APPLYING FOR JOINT CREDIT, SECURED CREDIT, OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE.				
<input type="checkbox"/> MARRIED (WA and CA Only: includes registered domestic partners)					<input type="checkbox"/> MARRIED (WA and CA Only: includes registered domestic partners)				
<input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)					<input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)				

EMPLOYMENT/INCOME

NAME AND ADDRESS OF EMPLOYER				NAME AND ADDRESS OF EMPLOYER			
HIRE DATE		POSITION		HIRE DATE		POSITION	
SUPERVISOR'S NAME		IF SELF EMPLOYED, TYPE OF BUSINESS		SUPERVISOR'S NAME		IF SELF EMPLOYED, TYPE OF BUSINESS	
EMPLOYMENT INCOME (GROSS) \$ _____ PER _____				EMPLOYMENT INCOME (GROSS) \$ _____ PER _____			
OTHER INCOME NOTICE: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it				OTHER INCOME NOTICE: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it			
OTHER INCOME		SOURCE		OTHER INCOME		SOURCE	
\$ _____	PER _____	SOURCE		\$ _____	PER _____	SOURCE	
\$ _____	PER _____	SOURCE		\$ _____	PER _____	SOURCE	
\$ _____	PER _____	SOURCE		\$ _____	PER _____	SOURCE	
PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS				PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS			
STARTING DATE		ENDING DATE		STARTING DATE		ENDING DATE	
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO				MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO			
WHERE: _____ ENDING/SEPARATION DATE: _____				WHERE: _____ ENDING/SEPARATION DATE: _____			

REFERENCES

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		HOME NUMBER	NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		HOME NUMBER
		RELATIONSHIP			RELATIONSHIP

WHAT YOU OWE	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)	INTEREST RATE	PRESENT BALANCE	MONTHLY PAYMENT	OWED BY	
					APPLICANT	OTHER
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHECKED:			TOTALS	\$	\$	

WHAT YOU OWN	LIST LOCATION OF PROPERTY OR FINANCIAL INSTITUTION	MARKET VALUE	PLEGDED AS COLLATERAL FOR ANOTHER LOAN	OWNED BY	
				APPLICANT	OTHER
		\$			
		\$			
		\$			
		\$			
		\$			

OTHER INFORMATION ABOUT YOU - IF YOU ANSWER "YES" TO ANY QUESTION OTHER THAN #1, EXPLAIN ON AN ATTACHED SHEET.	APPLICANT	OTHER
1. ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?		
2. DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGMENTS OR HAVE YOU EVER FILED FOR BANKRUPTCY, HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13, HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST 7 YEARS, OR BEEN A PARTY IN A LAWSUIT?		
3. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?		
4. ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE? FOR WHOM (Name of Others Obligated on Loan): _____ TO WHOM (Name of Creditor): _____		

STATE NOTICES

OHIO RESIDENTS ONLY: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy 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.

<p>WISCONSIN RESIDENTS: Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Legally Separated</p> <p>If married: the name of my spouse is _____</p> <p>Spouse's SSN: _____ <input type="checkbox"/> Spouse's Address (if different) _____</p> <p>Notice: 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.</p> <p>MARRIED WISCONSIN RESIDENTS APPLYING FOR AN INDIVIDUAL ACCOUNT: By signing here, I state that the credit being applied for, if granted, will be incurred in the interest of the marriage or family of the Borrower(s).</p> <p align="center">X _____</p>

LOAN APPLICATION SIGNATURES

PLEASE READ BEFORE SIGNING:

All the information in this application is true. I understand that section 1014 Title 18 U.S. Code makes it a federal crime to knowingly make a false statement on this application. You have my permission to check it. You may retain this application even if not approved. If this application is approved, I agree to honor the provisions of the credit or loan agreement and security agreement covering my account or loan. (If this application is for two of us, this statement applies to both of us.)

Credit Report Authorization. By signing this Application, I authorize you to obtain my credit report for the purposes of evaluating this application and to obtain subsequent credit reports on an on-going basis in connection with this transaction, and for all other legitimate purposes, such as reviewing my accounts or taking collection action on the account.

Vermont Residents: Applicant provided consent via phone _____ (Credit Union Initials)

IMPORTANT NOTICE ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for me: When I open an account, you will ask for my name, address, date of birth, and other information that will allow you to identify me. You may also ask to see my driver's license or other identifying

SIGNATURE OF APPLICANT X	DATE	SIGNATURE OF CO-APPLICANT X	DATE
-----------------------------	------	--------------------------------	------

HAVE YOU OMITTED ANYTHING? REMEMBER: INCOMPLETE APPLICATIONS CANNOT BE PROCESSED.

FOR CREDIT UNION USE ONLY							
DATE	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED (Adverse Action Notice)	APPROVED LIMITS:	SIGNATURE	LINE OF CREDIT	OTHER	OTHER	DEBT RATIO/SCORE BEFORE AFTER
			\$0	\$0	\$0	\$ 0	0 0 %
LOAN OFFICER COMMENTS:							
SIGNATURES X _____				X _____			
DATE				DATE			