

 Main Office

 3517 Union Road

 Cheektowaga, NY 14225

 716-842-1320

 Fax: 716-842-1623

 ONECREDITUNION.ORG

V.A. Medical Center Office 3495 Bailey Avenue Basement E19 Buffalo, New York 14215

Mini-Equity Loan Information and Instructions

To apply, please:

- Review the information and instructions below
- Complete and sign the application
- Bring to your nearest **ONE** CU location, fax to 716-842-1623, or email to Loans@onecuny.com

ELIGIBILITY

- Member owned and occupied dwelling, not to exceed four apartments
- Must have good credit rating with the credit union and other creditors
- Taxes and homeowners insurance must be current

INTEREST RATE*

• Check the rates section of our website or call us

AMOUNT MEMBER CAN BORROW

• \$5,000 - \$25,000, up to 100% of available equity in the home

PREPAYMENT PENALTY

• None

NMLS 405407

CLOSING COSTS/EXPENSE

• Contact **ONE** CU. Closing costs are member's responsibility and are based on the amount borrowed. They are generally under \$550

INSURANCE

• Prior to the loan closing, borrower must provide proof of homeowners insurance (including flood coverage if necessary), naming **ONE** Credit Union, its successors and assigns, as loss payee

DOCUMENTS

- These documents are needed at the time your application is submitted. Photocopies are acceptable:
 - o Deed
 - o Survey
 - o Statement of mortgage balance
 - o Two current paycheck stubs or proof of other income
 - o Property tax paid receipts



3517 Union Road Cheektowaga, NY 14225 716-842-1320 Fax: 716-842-1623 www.onecreditunion.org

Home Equity Application

Check below to indicate	the type of credit for	or which you	are applying. Mar	ried Applicants may	y apply for a se	parate account.				
 Individual Credit: You must complete the Applicant section about yourself and the Other section about your spouse if 1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI) 2. your spouse will use the account, or 3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, 										
complete the Other section to the extent possible about the person on whose payments you are relying.										
Joint Credit: Each Applicant must individually complete appropriate section below. If Co-Applicant is spouse of the Applicant, mark the Co-Applicant box. If this is an application for joint credit, Applicant and Co-Applicant each agree and acknowledge the intent to apply for joint credit (sign below):										
Applicant's Signature	Co-Applicant's Signa	ture			Date					
(Seal)				X (Seal)						
Amount Requested \$	Pur	oose:	(Seal)					(Seal)		
PAYMENT PROTEC	CTION Are you in	nterested in h	aving your loan prot	ected? Yes	No No		•			
If you answer "yes", the o						es not affect your lo	oan appro	val. In order for		
your loan to be covered, y APPLICANT INFOR	•	a separate ap	plication that explain	OTHER	ditions.		SPOUSE			
NAME (Last - First - Initial)				NAME (Last - First - Initi						
			BIRTH DATE	DRIVER'S LICENSE NU						
DRIVER'S LICENSE NUMBER/STATE			BIRTHDATE	DRIVER 3 LICENSE NO	JMBER/STATE		BIRTH DATE			
ACCOUNT NUMBER	NUMBER SOCIAL SECURITY/TAX IDE		NTIFICATION NUMBER	ACCOUNT NUMBER	SOCIAL SECURITY/	SOCIAL SECURITY/TAX IDENTIFICATION NUMBER				
HOME PHONE	ME PHONE CELL PHONE BUSINES		ESS PHONE/EXT.	HOME PHONE	IONE	BUSINESS PHONE/EXT.				
EMAIL ADDRESS		ľ		EMAIL ADDRESS	I		1			
PRESENT ADDRESS (Street - City - State - Zip) OWN RENT LENGTH AT RESIDENCE			PRESENT ADDRESS (Street - City - State - Zip) OWN RENT LENGTH AT RESIDENCE							
PREVIOUS ADDRESS (Street - C	ity - State - Zip) OWN		ENGTH AT RESIDENCE	PREVIOUS ADDRESS	(Street - City - State -	Zip) OWN R	ENT LENG	TH AT RESIDENCE		
COMPLETE FOR JOINT CREE PROPERTY STATE:	DIT, SECURED CREDIT	OR IF YOU LIV	VE IN A COMMUNITY	COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:						
		0 (Single - Divorce	d - Widowed)	MARRIED	SEPARATED [Widowed)		
LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)				(Exclude Self)	DENTS NOT LISTED	BY OTHER APPLICANT				
EMPLOYMENT INF	1									
NAME AND ADDRESS OF EMPLOYER				NAME AND ADDRESS OF EMPLOYER						
YOUR TITLE/GRADE SUPERVISOR'S NAME				YOUR TITLE/GRADE SUPERVISOR'S NAME						
START DATE HOURS AT WORK IF SELF EMPLOYED, TYPE OF BUSINESS				START DATE HOURS AT WORK IF SELF EMPLOYED, TYPE OF BUSINESS						
IF EMPLOYED IN CURRENT POSITION LESS THAN TWO YEARS, COMPLETE PREVIOUS				IF EMPLOYED IN CURRENT POSITION LESS THAN TWO YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS						
EMPLOYER NAME AND ADDRESS				JADDRESS						
STARTING DATE	ENDIN	G DATE		STARTING DATE		ENDING DATE				
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR YES NO				MILITARY: IS DUTY ST	ATION TRANSFER	EXPECTED DURING NE	XT YEAR	YES NO		
WHERE		SEPARATION	IDATE	WHERE		SEP	ARATION DA	TE		
INCOME INFORMA	TION									
NOTICE: Alimony, child support choose to have it con		income need not			hild support, or separ have it considered.	ate maintenance income	need not be r			
EMPLOYMENT INCOME \$	PER		NET GROSS	EMPLOYMENT INCOM		PER		NET GROSS		
OTHER INCOME \$ SOURCE	PER			OTHER INCOME \$		PER				

NORE EQUITY SYSTEM © CUNA Mutual Group 1991, 2003, 08, 2012, 13, 2021 All Rights Reserved

	nclude Street, City, State and Zip Code)									
NAME AND ADDRESS OF NEAREST R	ELATIVE NOT LIVING WITH YOU	AME AND ADDR	ESS OF	NEAREST RELA	TIVE N	NOT LIVING	G WITH Y	OU		
RELATIONSHIP	HOME PHONE R	ELATIONSHIP				HOME F	PHONE			
PROPERTY (Please inclu	ude Principal Dwelling, Second Home, Vacation,	Investment,	etc.)							
PROPERTY TYPE	LIST PROPERTIES THAT YOU OWN AND ADDRESS OF P	ROPERTY		MARKET VALUE	F		AS COLL OTHER L			OTHER
			\$					NO		+ -
						<u> </u>				
			\$			YES		NO		
			\$			YES		NO		
WHAT IS THE PROPERTY THAT WILL	BE GIVEN AS SECURITY?		IS AN PROPE	IYONE OTHER	THAN	I YOUR	SPOUSE	A PA	ART OWNER	OF THIS
List every lien associated with this prop a debt.	perty below. A lien is a legal claim filed against property as security	for payment of								
				S PROPERTY TH		PLICANT'S	ADDRES	SS LIST	ED IN THE "AF	PPI ICANT
FIRST MORTGAGE HELD BY				MATION" SECTIO						
	PRESENT BALANCE \$		🗌 Y	'ES 🗌 NO						
OTHER LIENS (Liens include mortgages	s, deeds of trust, land contracts, judgments and past due taxes):									
	PRESENT BALANCE \$									
ASSETS (Please include	Auto, Boat, Stocks, Bonds, Cash, etc.)									
```		TION	MA	RKET VALUE/		EDGED AS			OWNED	BY
ASSET DESCRIPTION	LIST LOCATION OF ASSET OR FINANCIAL INSTITU	TION	PRES	SENT BALANCE		FOR ANO	THER LO	AN	APPLICANT	OTHER
			\$			YES		NO		
			\$			YES		NO		
			\$			YES		NO		
						1				
			\$			YES		NO		
			\$			] YES		NO		
			\$			] YES		NO		
			\$			YES		NO		
DEBTS (Please include A	uto Loans, Credit Cards, Second Mortgages, Ho	me Associat	ion Di	les etc.)		,				
				,						
	CREDITOR NAME OTHER THAN THIS CREDIT UNION								OWNED	BY
DEBT	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)	INTEREST R	RATE	PRESENT BALA	NCE	MONTH	LY PAYN		OWNED APPLICANT	BY OTHER
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#### STATE LAW NOTICES

Notice to Ohio Residents: 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.

Notice to Nebraska Residents: A credit agreement must be in writing to be enforceable under Nebraska law. To protect you and us from any misunderstandings or disappointments, any contract, promise, undertaking, or offer to forebear repayment of money or to make any other financial accommodation in connection with this loan of money or grant or extension of credit, or any amendment of, cancellation of, waiver of, or substitution for any or all of the terms or provisions of any instrument or document executed in connection with this loan of money or grant or extension of credit, must be in writing to be effective.

**Notice to Wisconsin Residents:** (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			
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<b>^</b>	(Seal)	ĺ		

#### SIGNATURES

#### By signing or otherwise authenticating below:

You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of all your debts and obligations. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received and for other accounts, products, or services we may offer you or for which you may qualify. If you request, the credit union will tell you the name and address of any credit bureau from which it received a credit report on you. You understand that it is a crime to willfully and deliberately provide incomplete or incorrect information in this application. If there are any important changes, you will notify us in writing immediately. You also agree to notify us of any change in your name, address or employment within a reasonable time thereafter.

Арр	licant's Signature	Date	Other Signature			Date	
X		(Seal)	X				(Seal)
	LOAN ORIGINATOR ORGANIZATION		NMLSR ID NUMBER		-		
	LOAN ORIGINATOR		NMLSR ID NUMBER		-		
CR	EDIT UNION USE ONLY						
DATE	APPROVED	APPROVED LIMIT:		DEBT RATIC	/SCORE		
	DECLINED (Adverse Action Notice Sent)			BEFORE	AFTER		
	OFFICER/CREDIT /ITTEE COMMENTS:						
SIGN	ATURES: LOAN OFFICER CREDIT COMMITTEE						
Sigr	ature	Date	Signature			Date	
X		(Seal)	X				(Seal)