

U\$X FEDERAL CREDIT UNION®

1293 FREEDOM ROAD
PO BOX 1728
CRANBERRY TWP PA 16066

Dear Member:

Thank you for your interest in the U\$X Federal Credit Union **Home Equity Loan Program**.

Attached for your information are:

- Highlights of U\$X FCU's Home Equity Loan Program
- Government Monitoring Form
- Home Equity Loan Application

When returning your completed Application and Government Monitoring Form, please also include the following required documents.

1. **Copy of homeowners insurance policy**
2. **Income verification for each applicant and co-applicant**
 - **Regular employment-** One month's current pay stubs and two years W-2's
 - **Self-employment-** Last two years of signed Federal Income Tax Returns- Personal and Business including all schedules
 - **Retirement-** Statement showing deposit of Social Security and/or pension income. Investment statements, 1099's or benefit letters also accepted
 - **Rental Income-** Last 2 years of signed Federal Tax Returns including schedule E
 - **Alimony or Child Support** – Statement showing deposit or receipt of funds
Notice: Alimony, Child Support or other income need not be revealed if you do not choose to have it considered.
3. **Copy of any lease agreement you have on the property (example: oil and gas)**

Additional Documentation maybe required.

If you have any questions, please contact one of our loan specialists at 1-888-219-3159

For current interest rates and available terms, contact one of our offices or visit www.usxfcu.org

U\$X FEDERAL CREDIT UNION®

1293 FREEDOM ROAD
PO BOX 1728
CRANBERRY TWP PA 16066

FIXED RATE HOME EQUITY LOAN HIGHLIGHTS

Purpose: NON-CONFORMING FIXED RATE MORTGAGE
WITH TERMS OF 5, 10, 15 or 20 YEARS

Maximum Loan \$350,000.00

Minimum Loan \$10,000.00

Loan to Value Maximum of 80% of appraised value minus current mortgage balance(s)

Interest Rate Contact Credit Union or visit www.usxfcu.org for current rates

Property Types Single family 2-4 residence

Requirements Appraisal
Property Search
Verification of Income
Homeowners Insurance
Owner Occupied
Primary Residence located in Pennsylvania or Ohio
Flood Insurance may be required
Title Insurance may be required
Other requirements may apply

Closing Costs Approximately \$100 - \$600

DEMOGRAPHIC INFORMATION OF APPLICANT AND CO-APPLICANT

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, race, and sex) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more "Hispanic or Latino" origins, and one or more designations for "Race." The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race, and sex on the basis of visual observation or surname. If you do not wish to provide some or all of this information, please check below.

Account Number:
Property Address:

APPLICANT

Name:

Ethnicity:

Hispanic or Latino – *Check one or more*

Mexican

Puerto Rican

Cuban

Other Hispanic or Latino – *Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:*

Not Hispanic or Latino

I do not wish to provide this information

Race: Check one or more

American Indian or Alaska Native – *Print name of enrolled or principal tribe:*

Asian

Asian Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

Other Asian – *Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:*

Black or African American

Native Hawaiian or Other Pacific Islander

Native Hawaiian

Guamanian or Chamorro

Samoan

Other Pacific Islander – *Print race, for example, Fijian, Tongan, and so on:*

White

I do not wish to provide this information

Sex:

Female

Male

I do not wish to provide this information

CO-APPLICANT

Name:

Ethnicity:

Hispanic or Latino – *Check one or more*

Mexican

Puerto Rican

Cuban

Other Hispanic or Latino – *Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:*

Not Hispanic or Latino

I do not wish to provide this information

Race: Check one or more

American Indian or Alaska Native – *Print name of enrolled or principal tribe:*

Asian

Asian Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

Other Asian – *Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:*

Black or African American

Native Hawaiian or Other Pacific Islander

Native Hawaiian

Guamanian or Chamorro

Samoan

Other Pacific Islander – *Print race, for example, Fijian, Tongan, and so on:*

White

I do not wish to provide this information

Sex:

Female

Male

I do not wish to provide this information

To Be Completed by Financial Institution (for an application taken in person):

<p>Was the ethnicity of the applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>Was the sex of the applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>Was the race of the applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>Was the ethnicity of the co-applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>Was the sex of the co-applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p>Was the race of the co-applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
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To Be Completed by Interviewer:

<p><input type="checkbox"/> Face to face interview</p> <p><input type="checkbox"/> Mail</p> <p><input type="checkbox"/> Telephone</p> <p><input type="checkbox"/> Internet</p>	<p>Interviewer's Name</p> <p>Interviewer's Signature</p> <p>Date</p> <p>(Seal)</p> <p>Interviewer's Phone Number</p>	<p>Name and Address of Interviewer's Employer</p>
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1293 Freedom Road
P.O. 1728
Cranberry TWP, PA 16066
1-888-219-3159

HOME EQUITY YEAR TERM REQUESTED

5 7 10 12 15 20



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.

X 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.

APPLICANT INFORMATION **APPLICANT** **OTHER** **CO-APPLICANT** **SPOUSE**

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.	
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: <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: <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)	

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

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

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

ASSETS/PROPERTY Check box for Applicant/Other. List all assets and account number(s)-- Attach other sheets if necessary.

APPLICANT		OTHER (CO-APPLICANT, SPOUSE)	
SHARE DRAFT OR CHECKING AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY USX Federal Credit Union P.O. Box 1728, Cranberry Twp, PA 16066	SHARE DRAFT OR CHECKING AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY USX Federal Credit Union P.O. Box 1728, Cranberry Twp, PA 16066
SAVINGS AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY USX Federal Credit Union P.O. Box 1728, Cranberry Twp, PA 16066	SAVINGS AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY USX Federal Credit Union P.O. Box 1728, Cranberry Twp, PA 16066

APPLICANT	OTHER	LIST HOME AND ALL OTHER ITEMS YOU OWN AND LOCATION OF PROPERTY For Example: Auto, Boat, Stocks, Bonds, Cash, Household Goods, Real Estate, etc.	MARKET VALUE	PLEGDED AS COLLATERAL FOR ANOTHER LOAN	
	HOME*	SEE ATTACHED	\$	YES	NO
			\$	YES	NO
			\$	YES	NO

*LIST EVERY LIEN AGAINST YOUR HOME -- This section must be completed for the property which will be given as security, if applicable. A lien is a legal claim filed against property as security for payment of a debt. Liens include mortgages, deeds of trust, land contracts, judgments and past due taxes.

FIRST MORTGAGE HELD BY _____ OTHER LIENS (Describe) _____

PRESENT BALANCE \$ _____

IS THE PROPERTY DESCRIBED IN THIS SECTION: YOUR PRINCIPAL DWELLING? YES NO IS ANYONE OTHER THAN YOUR SPOUSE A PART OWNER OF YOUR HOME? YES NO

LISTED AS THE APPLICANT'S ADDRESS IN THE "APPLICANT INFORMATION" SECTION? YES NO

DEBTS In addition to Rent/Mortgage list all other debts (for example, auto loans, credit cards, second mortgage, home assoc. dues, alimony, child support, child care, medical, utilities, auto insurance, IRS liabilities, etc.) Please use a separate line for each credit card and auto loan. Attach other sheets if necessary.

APPLICANT	OTHER	CREDITOR NAME AND ADDRESS	ACCOUNT NUMBER	ORIGINAL BALANCE	PRESENT BALANCE	MONTHLY PAYMENT	PAST DUE
	<input type="checkbox"/> RENT <input type="checkbox"/> MORTGAGE (incl. Tax & Ins.)	SEE DEBT SHEET		\$	\$	\$	
		SEE ATTACHED		\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				TOTALS	\$	\$	\$

LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHECKED _____

FINANCIAL INFORMATION These questions apply to both Applicant and Other.

IF A "YES" ANSWER IS GIVEN TO A QUESTION, EXPLAIN ON AN ATTACHED SHEET

	APPLICANT		OTHER	
	YES	NO	YES	NO
DO YOU HAVE ANY OUTSTANDING JUDGMENTS?				
HAVE YOU EVER FILED FOR BANKRUPTCY OR HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13?				
HAVE YOU HAD PROPERTY FORECLOSED UPON OR GIVEN A DEED IN LIEU OF FORECLOSURE IN THE LAST 7 YEARS?				
ARE YOU A PARTY IN A LAWSUIT?				
ARE YOU OTHER THAN A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?				
IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?				
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): _____

SIGNATURES

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, renewal or extension of the credit received. 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.

X _____ (SEAL) _____
APPLICANT'S SIGNATURE DATE

X _____ (SEAL) _____
OTHER SIGNATURE DATE

CREDIT UNION INFORMATION

LOAN OFFICER ADVANCE APPROVED: YES NO COUNTER OFFER WILL BE MADE, IF ACCEPTED, ADVANCE APPROVED

CREDIT COMMITTEE OR OTHER OUTSIDE INFORMATION CONSIDERED: YES NO IF YES, ATTACH ADDITIONAL SHEET AND DESCRIBE

\$ _____ APPROVED LIMIT _____ DEBT RATIO

REFERRED TO/REASON(S) FOR REFERRAL: _____

DESCRIBE COUNTER OFFER: _____

SPECIFIC REASON(S) FOR REJECTION: _____

SIGNATURES:

LOAN OFFICER **X** _____ DATE **X** _____ DATE

CREDIT COMMITTEE **X** _____ DATE **X** _____ DATE

ECOA NOTICE AND REASON FOR REJECTION SENT OR DELIVERED ON _____ (DATE) BY _____ (INITIALS)

USX Federal Credit Union 736140
LOAN ORIGINATOR ORGANIZATION NMLSR ID NUMBER

LOAN ORIGINATOR _____
NMLSR ID NUMBER