SAN TAN Credit Union
Our #1 Reason Is You.
78 W Ray Road, Suite One
Chandler AZ 85225
480-963-5661
Fax 480-963-3574
www.santancu.org

Share Secured Credit Application

STCU ACCOUNT #_____

AMOUNT REQUESTED: $_____

PURPOSE: _____

Married Applicants may apply for a separate account. Check the appropriate box to indicate Individual or Joint credit and complete applicant section.
Complete co-applicant or spouse section: (1) about your spouse if you live in a community property state, or (2) if your spouse will use the account or (3) if there is a co-applicant on this account.

CHECK ACCOUNT CHOICE: (ONLY ONE)
❑ **INDIVIDUAL ACCOUNT** ❑ **JOINT ACCOUNT**

CHECK REPAYMENT CHOICE:
❑ PAYROLL DEDUCTION ❑ CASH/PAYMENT COUPON
❑ AUTOMATIC TRANSFER ❑ OTHER
PREFERRED PAYMENT DATE: _____

ACCOUNT # TO BE USED AS COLLATERAL: _____

PLEASE INDICATE YOUR PREFERRED PAYMENT FREQUENCY:
❑ MONTHLY ❑ BI-WEEKLY ❑ SEMI-MONTHLY ❑ WEEKLY

NOTE: BI-WEEKL, SEMI-MONTHLY OR WEEKLY PAYMENTS REQUIRE AUTOMATICE TRANSFER OR PAYROLL DEDUCTION.

APPLICANT

NOTE: ALL APPLICABLE SECTIONS SHOULD BE FILLED OUT COMPLETELY. IF NOT, PROCESSING OF YOUR APPLICATION MAY BE DELAYED.

LAST NAME	FIRST	MIDDLE	SOCIAL SECURITY NUMBER

DATE OF BIRTH	WORK PHONE	HOME PHONE	CELL PHONE	E-MAIL ADDRESS

CURRENT ADDRESS	CITY	STATE	ZIP

MAILING ADDRESS (IF DIFFERENT THAN ABOVE)

❑ CO-APPLICANT ❑ SPOUSE

COMPLETE THIS SECTION ONLY IF CO-APPLICANT OR SPOUSE IS APPLYING FOR A JOINT ACCOUNT.

LAST NAME	FIRST	MIDDLE	SOCIAL SECURITY NUMBER

DATE OF BIRTH	HOME PHONE	WORK PHONE	CELL PHONE	E-MAIL ADDRESS

CURRENT ADDRESS	CITY	STATE	ZIP

MAILING ADDRESS (IF DIFFERENT THAN ABOVE)

SIGNATURES (S) PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING:

This statement is submitted to obtain credit and I/we certify that all information herein is true and complete. I/we agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I/we agree to be bound by the terms and conditions of the loan. I/we 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. I/we understand that the credit union will rely on the information in this application and our credit report to make its decision. If you request, the credit union will tell you the name and address of any credit bureau from which it received a credit report. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to state chartered credit unions insured by NCUA. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. **Security Agreement and Pledge**. By signing this this application, acceptance or authorized use of any credit card(s) issued, I/we pledge our shares as defined by our Membership Agreement to secure payment of my/our obligations on this account. **Additional Security**: I/we understand that collateral securing other loans will secure this account; and that property purchased with my/our credit card(s) will also secure this account.

_____ _____

APPLICANT SIGNATURE **DATE** **CO-APPLICANT SIGNATURE** **DATE**

REVISED 4-2009