Residential Credit Application - Additional Applicant

(Not for Fannie, Freddie, FHA, VA or USDA)



(Creditor's Name and Address)

For Creditor Use Only					HMDA ☐ YES	□ NO
Creditor Loan No./Unive	rsal Loan Identifier			Cen	sus Tract	
	Verify and complete the information as directed by y					
1. Type of Credit A	pplication					
☐ I am applying for indiv	idual credit.					
☐ I am applying for joint		joint Co-Applic	ants whose r	names are		
By signing, you intend to	apply for joint credit.					
_,gg, ,						
Applicant for Joint Credit			Co-A	pplicant for Joint Cred	it	
2. Applicant Inform	ation					
This section asks about v	our personal information a	nd vour income fr	om emplovm	ent and other sources.	such as retiremen	t, that you want
considered to qualify for	•	, ,	o op.o,	one and out of our obj,		t, that you make
2a. Personal Inform	ation					
				Control Constitution Name		
Name (First, Middle, Last,	, δυπιχ)			Social Security Numb		ımber)
Alternate Names - List an	ny names by which you are	known or any na	mes	Date of Birth (mm/dd/yyyy)		
	reviously received (First, N	•		U.S. Citizen		tatus (If U.S. Citizen is i
				☐ Yes ☐ No	☐ Permanent	☐ Non-Permanent
Government ID Information	n ID Type	ID Number		1		
Issued By			Issue D	ate	Expiration Date	
Marital Status	Dependents (not list	ed by another Ap	plicant)	Contact Information		
☐ Married	Number			Home Phone		
☐ Separated	Ages			Cell Phone		_
Unmarried	and Civil Union Domondia	Dantmanakin Danis		Work Phone		Ext.
Reciprocal Beneficiary Re	red, Civil Union, Domestic I Plationship.)	-artnersnip, Kegis	iterea	Email		
Current Address						l l;4 #
Street		Cara ZID		C		Unit #
City How Long at Current Add	drage? Vagra Man	State ZIP	No primary l	Country housing expense $\ \Box$ O	wn Dont (è	/m on
					WII L Neilt (\$	/mon
	LESS than 2 years, list For	mer Address \square	Does not ap	oply		Unit #
Street		State ZIP		Country		Onit #
City How Long at Former Add	ress? Years Mon		No primary I	Country housing expense $\ \Box$ O	wn 🗌 Rent (\$	/mon
	rent from Current Address	☐ Does not ap	• •	<u> </u>		,
Street	com canoni Addiess	_ 2000 not up	r <i>1</i>			Unit #
City		State ZIP		Country		
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2b. Current Employment	t/Self Employı	ment and Inc	Come Does not apply		
Employer or Business Name				Gross Monthly I	ncome
Street			Unit #	Base	/month
City	State	ZIP	Country	Overtime \$	/month
Phone				Bonus	/month
Position or Title			Charle if this statement applicat	Commission \$	/month
Position or Title			Check if this statement applies:	Military	
Start Date	(mm/dd/yyyy)		member, property seller, real	Entitlements	·
How long in this line of work?	Years N	/lonths	estate agent, or other party to the transaction.	Other S	,
			the transaction.	TOTAL	/month
☐ Check if you are the Busine Owner or Self-Employed		•	hare of less than 25%. Monthly hare of 25% or more. \$	/ Income (or Loss)	
2c. IF APPLICABLE, Con	mplete Inform	ation for Ad	ditional Employment/Self En	nployment and l	ncome 🗌 Does not apply
Employer or Business Name				Gross Monthly I	ncome
Street			Unit #	Base \$	/month
City	State	ZIP	Country	Overtime \$	/month
Phone				Bonus	/month
				Commission	/month
Position or Title			Check if this statement applies:	Military	
Start Date	(mm/dd/yyyy)		☐ I am employed by a family member, property seller, real	Entitlements \$	/month
		_	estate agent, or other party to	Other	/month
How long in this line of work?	Years N	<i>l</i> lonths	the transaction.	TOTAL	/month
	mplete Inform	ation for Pre	evious Employment/Self-Emp	ployment and Inc	come Does not apply
Provide at least 2 years of curr	ent and previous	employment a	nd income.		T
Employer or Business Name				☐ Check if you	Previous Gross
Street			Unit #	were the Business	Monthly Income
City	State	ZIP	Country	Owner or	\$ /month
Position or Title				Self-Employed	
Start Date	(mm/dd/yyyy)	End Date	(mm/dd/yyyy)		
2e. Income from Other	Sources	Does not apply	y		
	rces below. Unde	r Income Sour	ce, choose from the sources listed	here:	
Automobile AllowanceBoarder IncomeCapital Gains	Disability Foster Care	 Interest and Mortgage Cr Certificate Mortgage Dir Payments 	edit • Public Assistance • Retirement	 Royalty Payn Separate Maintenance Social Securi Trust 	Benefits • VA Compensation
NOTE: Reveal alimony, child su for this loan.	ipport, separate i	maintenance, o	r other income ONLY IF you want i	it considered in dete	rmining your qualification
Income Source - Use list above					Monthly Income
					\$
					\$
					\$
			Provid	le TOTAL Amount H	
Applicant Name:					
Posidential Credit Application Additional A	nnligent				UCA PE ADD 9/1/2020

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My information for Section 3 is listed on the Residential Credit Application with (insert name of Application Application with a context of the context of					
4. Financial Information - Real Estate My information for Section 4 is listed on the Residential Credit Application with (insert name of Application 4)					
(insert name of Applicar	nt)				
past financial history.					
	□ NO	☐ YES			
vears?	│	☐ YES			
If YES, complete (1) and (2) below: (1) What type of property did you own: primary residence (PR), FHA secondary residence (SR), second home (SH), or investment property (IP)?					
pouse (SP), or jointly with					
liation with the seller of the property?	□ №	\square YES			
ur closing costs or down payment) I have not disclosed on this loan	□ NO	☐ YES			
ot the property securing this loan) on	\$				
n?	□ NO	☐ YES			
2. Have you or will you be applying for any new credit (e.g., installment loan, credit card, etc.) on or before closing this loan that is not disclosed on this application?					
nge lien, such as a clean energy lien ram)?	□ №	☐ YES			
application?	□ №	☐ YES			
G. Are there any outstanding judgments against you?					
H. Are you currently delinquent or in default on a Federal debt?					
liability?	□ №	☐ YES			
?	□ №	☐ YES			
whereby the property was sold to a balance due?	□ NO	☐ YES			
	□ №	☐ YES			
☐ Chapter 12 ☐ Chapter 13	□ NO	☐ YES			
[☐ Chapter 12 ☐ Chapter 13				

7. State Notices

California Residents. California Civil Code 1812.30(j) requires we notify you that if you, the applicant, are married, you may apply for a separate account.

Massachusetts Residents. Under Massachusetts statute, Mass. Gen. L. ch. 184, Section 17B, you, the Applicant (and Co-Applicant) are entitled to know the following:

- 1. The responsibility of the attorney for the Mortgagee is to protect the interest of the Mortgagee.
- 2. Mortgagors may, at their own expense, engage an attorney of their own selection to represent their interests in the transaction.

For Home Equity Line of Credit. The current annual percentage rate for finance charges and, if the rate may vary, a statement to that effect and of the circumstances under which the rate may increase and whether there are any limitations on any such increase, as well as the effects of any such increase; the conditions under which a finance charge may be imposed, including the time period within which any credit extended may be repaid without incurring a finance charge; whether any annual fee is charged and the amount of any such fee; and whether any other charges or fees may be assessed, the purposes for which they are assessed, and the amounts of any such charges or fees.

New York Residents. A consumer report may be ordered in connection with your application. Upon your request, we will inform you whether or not a report was ordered. If a report was ordered, we will tell you the name and address of the consumer reporting agency that provided the report. Subsequent reports may be ordered or utilized in connection with an update, renewal or extension of credit for which you have applied.

Ohio Residents. Equal Credit Opportunity Notice: You are hereby provided the following "Equal Credit Opportunity" notice as required by Section 4112.021 of the Ohio Revised Code. "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."

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Texas Residents. The owner of the homestead is not required to apply the proceeds of the extension of credit to repay another debt except debt secured by the homestead or debt to another lender.

Wisconsin Residents. Notice to Married Applicants. No provision of any marital property agreement, unilateral statement under Wisc. Statutes §766.59 or a court decree under Wisc. Statutes §766.70 adversely affects the interest of the lender unless the lender, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the lender is incurred.

For married Wisconsin Residents. The credit being applied for, if granted, will be incurred in the interest of my marriage or family. I understand the creditor may be required by law to give notice of this transaction to my spouse.

My signature for Section 8 is on the Residential Credit Application with (insert name of Applicant) 9. Military Service This section asks questions about your (or your deceased spouse's) military service. Military Service - Did you (or your deceased spouse) ever serve, or are you currently serving, in the United States Armed Forces? NO YES If YES, check all that apply: Currently serving on active duty with projected expiration date of service/tour (mm/dd/yyyy) Currently retired, discharged, or separated from service Only period of service was as a non-activated member of the Reserve or National Guard Surviving spouse 10. Demographic Information HMDA - see attached addendum GMI - see attached addendum N/A

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Applicant Name:

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11. Loan Originator Information			
To be completed by your Loan Originator .			
Loan Originator Organization Name			
Address			
Loan Originator Organization NMLSR ID#	Stat	te License ID#	
Loan Originator Name			
Loan Originator NMLSR ID#	Stat	te License ID#	
Email			Phone
Signature	Date (mm/dd/yyyy)		

Applicant Name: