

## HOME EQUITY LOAN APPLICATION CHECKLIST

Thank you for applying for a home equity loan with Metro Medical Credit Union. To expedite the processing of your application, please return the following forms and information:

Home Equity Questionnaire

Completed Loan Application

Current Tax Appraisal

Mortgage Statement indicating current balance

Copy of Deed of Trust on first lien

Copy of Homeowner's Insurance Policy

Copy of two most recent pay stubs and W-2 forms from last two years

If self-employed, last two years' tax returns (all schedules)

### Current MMCU Home Equity Loan Rates (based on credit score)

\$10,000.00	up to 60 months	rate as low as _____
\$20,000.00	up to 120 months	rate as low as _____
\$30,000.00	up to 180 months	rate as low as _____
\$40,000.00>	up to 240 months	rate as low as _____

Please call us at 214-630-0611 if you have any questions about our home equity loan products. Again, thank you for applying for a home equity loan with Metro Medical Credit Union. We appreciate the opportunity to serve you.

Sincerely,

**Imelda Buchanan**

Loan Officer Name

NMLS# 812759

Loan Officer Signature



## HOME EQUITY LOAN INFORMATION

- Only one (1) home equity loan is allowed within the last 12 months
- Minimum loan amount is \$10,000.
- We do not offer home equity loans on rental property, investments, mobile homes, manufactured housing (i.e. mobile homes, pre-fab homes), condos, duplexes, townhomes or log homes.
- Loan cannot exceed 80% of loan-to-value (LTV), including all liens. This means your loan cannot exceed 80% of the equity in your home.
- Home equity loans can only be made on your primary residence/ homestead.
- Please consult your tax advisor regarding deductions of interest.
- Normal time from application to funding is 20 days.

How much can you borrow?	
County tax appraisal of your home	\$ _____
Multiply by 80%	x.80
Your Gross Equity	\$ _____
Subtract balance of mortgage	- _____
Subtract balance of other liens	- _____
Estimated net equity available to borrow at this time	\$ _____

Please submit the following items with your home equity loan application

Statement from mortgage company indicating current balance on first liens.

Copy of Deed of Trust on first liens.

Copy of Homeowner's Insurance Policy.

Copy of two most recent pay stubs and W2 forms from last two years. Both borrower and co-borrower need to provide these documents.

If self-employed, you'll need to provide complete tax returns from the last two years (all schedules.)

All disclosures must be signed by names appearing on deed and residing at primary residence.

Copy of County Tax Appraisal.

Tax records will be checked during the title search to ensure property taxes are current. **All property taxes must be current prior to funding of home equity loan.**

Please return all documents and disclosures to:  
Metro Medical Credit Union  
Attn: Loan Department  
8828 Stemmons Frwy., Ste. 113  
Dallas, TX 75247



8828 Stemmons Freeway  
 Suite 113  
 Dallas, TX 75247  
 Tel: (214) 630-0611

HOME EQUITY LOAN APPLICATION  
 Metro Medical Credit Union | NMLS #804892



Date	Account Number
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**APPLICANT INFORMATION.** Married Applicants may apply for an individual loan/separate account.  
 Type of Credit. Check the type of credit for which you wish to apply.  
 Individual credit -- If you are applying for individual credit, complete the Applicant section.  
 Joint credit -- If you are applying for joint credit with your spouse or another person, complete the Applicant section and the Spouse/Co-Applicant section.

You must initial here if you intend to apply for Joint Credit: Applicant: X Co-Applicant: X

**Spouse Information.** You must also complete the Spouse section if any of the following apply: (1) your spouse will use your account; (2) you are relying on your spouse's income as a source of repayment; (3) you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI or Puerto Rico); or (4) you are an Alaska resident and are currently subject to a community property agreement or community property trust.

**Type of Credit Applied For:**  
 Closed End Home Equity Loans Property Type:  Single Family Home  
 Amt Requested \$ \_\_\_\_\_ Purpose: \_\_\_\_\_ Term (CE Only): \_\_\_\_\_ Approximate Value of Home: \_\_\_\_\_  
 Property Address: \_\_\_\_\_  
 Payment Method:  Cash  Payroll Deduction  Automatic Payment (ACH)

**Optional Payment Protection** -- If you answer "yes" the Credit Union will disclose the cost of optional payment protection to you. A separate election that discloses the terms and conditions must be signed for protection to become effective. Are you interested in having this loan protected?  Yes  No

APPLICANT  CO-SIGNER

Complete only if: (a) credit will be secured by collateral; or (b) you live in a community property state; or (c) you are an Alaska resident subject to a community property agreement or community property trust:  
 MARRIED  SEPARATED  UNMARRIED (Single, Divorced, Widowed)

APPLICANT NAME

SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	CELL PHONE*	DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT
MOTHER'S MAIDEN NAME	E-MAIL ADDRESS	
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP		
FORMER ADDRESS (if current less than 2 years)		YEARS THERE
PERSONAL REFERENCE 1 (Name and Address)	RELATIONSHIP	
	PHONE NO.	

SPOUSE  CO-APPLICANT

Complete only if: (a) credit will be secured by collateral; or (b) you live in a community property state; or (c) you are an Alaska resident subject to a community property agreement or community property trust:  
 MARRIED  SEPARATED  UNMARRIED (Single, Divorced, Widowed)

SPOUSE/CO-APPLICANT NAME

SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	CELL PHONE*	DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT
MOTHER'S MAIDEN NAME	RELATIONSHIP TO APPLICANT	
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP		
FORMER ADDRESS (if current less than 2 years)		YEARS THERE
PERSONAL REFERENCE 1 (Name and Address)	RELATIONSHIP	
	PHONE NO.	

**EMPLOYMENT & INCOME** If you are self-employed, attach a financial statement and your most recent income tax return.

CURRENT EMPLOYER	HIRE DATE	
CURRENT ADDRESS		
WORK PHONE NO.	POSITION	MONTHLY GROSS INCOME \$
FORMER EMPLOYER (if current less than 2 years)		

**OTHER INCOME** You need not list income from alimony, child support or separate maintenance unless you wish it considered for purposes of granting this credit.

SOURCE OF OTHER INCOME	FREQUENCY	MONTHLY INCOME \$
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**ASSETS & DEPOSITS** Please check the appropriate box below. INDICATE: A - Applicant OR C - Spouse/Co-Applicant

CHECK ONE			FINANCIAL INSTITUTION NAME	CURRENT BALANCE	CHECK ONE			FINANCIAL INSTITUTION NAME	CURRENT BALANCE
A	C	TYPE			A	C	TYPE		
				\$				\$	
				\$				\$	
AUTO #1 MAKE	MODEL	YEAR	VALUE \$		AUTO #2 MAKE	MODEL	YEAR	VALUE \$	
REAL ESTATE TYPE			VALUE \$		OTHER ASSETS			VALUE \$	

**HOME EQUITY INFORMATION** - List any liens against your house. A lien is a legal claim filed against property as security for payment of a debt.

FIRST MORTGAGE HELD BY	PRESENT BALANCE	MONTHLY PAYMENT \$
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OTHER LIENS (DESCRIBE)

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

PLEASE CHECK			LIST ALL OBLIGATIONS INCLUDING CREDIT UNION LOANS (Attach separate sheet if necessary)	ACCOUNT NUMBER	BALANCE	MONTHLY PAYMENTS
A	C	D				

1. HAVE YOU EVER FILED FOR BANKRUPTCY OR HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13? 2. DO YOU HAVE ANY OUTSTANDING JUDGMENTS? 3. HAVE YOU HAD PROPERTY FORECLOSED UPON OR GIVEN A DEED IN LIEU OF FORECLOSURE IN THE LAST 7 YEARS? 4. ARE YOU A PARTY IN A LAWSUIT? 5. ARE YOU OTHER THAN A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN? 6. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS? 7. ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE?	<b>Applicant</b>		<b>Co-Applicant</b>	
	YES	NO	YES	NO

FOR WHOM (Name of other obligated on loan): \_\_\_\_\_ TO WHOM (Name of Creditor): \_\_\_\_\_

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, sex, and race) 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 designations for "Ethnicity" 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, sex, and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

**BORROWER**

Hispanic or Latino  
 Mexican  Puerto Rican  Cuban  
 Other Hispanic or Latino - Print origin: \_\_\_\_\_  
*Examples: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.*

Not Hispanic or Latino  
 I do not wish to furnish this information

American Indian or Alaska Native - Print name of enrolled or principal tribe: \_\_\_\_\_  
 Asian  
 Asian Indian  Chinese  Filipino  Japanese  Korean  Vietnamese  
 Other Asian - Enter race: \_\_\_\_\_  
*Examples: 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: \_\_\_\_\_  
*Examples: Fijian, Tongan, and so on.*

White  
 I do not wish to provide this information

Female  Male  I do not wish to furnish this information

**CO-BORROWER**

Hispanic or Latino  
 Mexican  Puerto Rican  Cuban  
 Other Hispanic or Latino - Print origin: \_\_\_\_\_  
*Examples: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.*

Not Hispanic or Latino  
 I do not wish to furnish this information

American Indian or Alaska Native - Print name of enrolled or principal tribe: \_\_\_\_\_  
 Asian  
 Asian Indian  Chinese  Filipino  Japanese  Korean  Vietnamese  
 Other Asian - Print race: \_\_\_\_\_  
*Examples: 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: \_\_\_\_\_  
*Examples: Fijian, Tongan, and so on.*

White  
 I do not wish to provide this information

Female  Male  I do not wish to furnish this information

<b>To Be Completed by Financial Institution (for application taken in person):</b>	<b>Borrower</b>	<b>Co-Borrower</b>
Was the ethnicity collected on the basis of visual observation or surname?	<input type="checkbox"/> NO <input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> YES
Was the sex collected on the basis of visual observation or surname?	<input type="checkbox"/> NO <input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> YES
Was the race collected on the basis of visual observation or surname?	<input type="checkbox"/> NO <input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> YES

The Demographic Information was provided through:  
 Face-to-Face interview (includes Electronic Media w/ Video Component)  Telephone Interview  Fax or Mail  Email or Internet

**SIGNATURES - Are you currently on active military duty?  Yes  No**

You promise that the information stated in this Home Equity Loan Application is true and correct to the best of your knowledge. You authorize the Credit Union to obtain credit reports when updating its records in connection with any review, increase, extension or renewal of credit, and in connection with any collection activities involving credit extended to you. The Credit Union may also obtain credit reports to update, increase, extend, renew or collection of the credit received by you. False or misleading statements in your application may cause any loan to be in default. You agree that this application shall be the Credit Union's property whether or not this application is approved. You will notify the Credit Union in writing immediately of any changes in your name, address or employment. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information to obtain credit. If you request, you will be provided the name and address of any credit bureau from which we received a credit report. You understand and agree that if your application is approved, that any collateral described in any security agreement, pledge, advance disbursement voucher or similar document that may be executed, now or in the future, in connection with such credit will secure the Credit Union for repayment of funds advanced to you, subject to the terms and conditions of such security agreement, pledge, advance disbursement voucher or similar document.  
 \*Permission to Contact: By providing the Credit Union with a wireless phone number (cell phone), you consent to receiving calls, including autodialed and prerecorded messages from the Credit Union or its third party debt collector at that number.

**IMPORTANT INFORMATION 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 you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.  
**OHIO RESIDENTS:** The Ohio laws against discrimination requires 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:** For any provision of any marital property agreement, court decree under WI ST § 766.70, or statement under WI ST § 766.59 to adversely affect the rights of the Credit Union, the Credit Union must be provided with a copy of the Agreement, decree or statement or have actual knowledge of its terms before any credit is approved or account opened. Sign if you are NOT applying for this loan account with your spouse. This credit request, if approved, will be incurred in the interest of the marriage or family of the undersigned.

Wisconsin Resident Signature \_\_\_\_\_ Date \_\_\_\_\_

X \_\_\_\_\_ X \_\_\_\_\_  
 Applicant/Co-Signer Date Spouse/Co-Applicant Date

<b>Credit Union Use Only</b>			
Loan Approved <input type="checkbox"/> Yes <input type="checkbox"/> No Loan Officer Signature	Loan Approved <input type="checkbox"/> Yes <input type="checkbox"/> No Credit Committee Signature	Mortgage Loan Originator: NMLSR ID #:	Mortgage Loan Officer Name: NMLSR ID #:
X	X		



8828 Stemmons Freeway  
 Suite 113  
 Dallas, TX 75247  
 Tel: (214) 630-0611

EQUAL CREDIT  
 OPPORTUNITY ACT NOTICE



Account No. \_\_\_\_\_

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicants income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.

The Federal Agency that administers compliance with this law concerning this Credit Union is:

The Federal Agency that administers compliance with this law concerning this Credit Union is:  
**Federal Trade Commission, Dallas Regional Office, 1999 Bryan Street, Suite 2150, Dallas, Texas 75201-6808.**

**SIGNATURES**

<i>X</i>	_____	<i>X</i>	_____
Borrower Signature	Date	Borrower Signature	Date
<i>X</i>	_____	<i>X</i>	_____
Borrower Signature	Date	Borrower Signature	Date



8828 Stemmons Freeway  
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 Dallas, TX 75247  
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**NOTICE OF PENALTIES FOR MAKING FALSE  
 OR MISLEADING WRITTEN STATEMENT**

**Warning: Intentionally or knowingly making a materially false or misleading written statement to obtain property or credit, including a mortgage loan, is a violation of Section 32.32, Texas Penal Code, and, depending on the amount of the loan or value of the property, is punishable by imprisonment for a term of 2 years to 99 years and a fine not to exceed \$10,000.**

I/we, the undersigned home loan applicant(s), represent that I/we have received, read, and understand this notice of penalties for making a materially false or misleading written statement to obtain a home loan.

I/we represent that all statements and representations contained in my/our written home loan application, including statements or representations regarding my/our identity, employment, annual income, and intent to occupy the residential real property secured by the home loan, are true and correct as of the date of loan closing.

EXECUTED this \_\_\_\_\_.

\_\_\_\_\_  
 Borrower

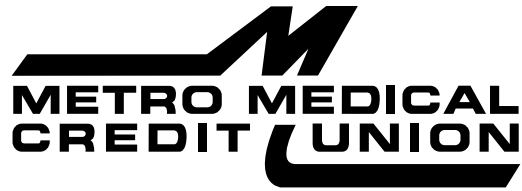
\_\_\_\_\_  
 Borrower

**Metro Medical Credit Union**  
 Credit Union

By: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_



**BORROWER SIGNATURE AUTHORIZATION**

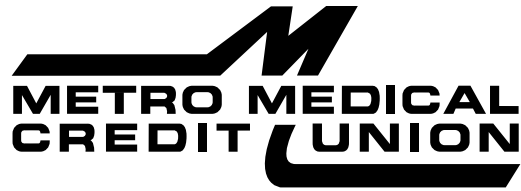
Privacy Act Notice: The information is to be used by the agency collection it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA): by 12 USC, Section 1701 et. Seq. (if HUD/FHA) by 42 USC, 1452b (if HUD/CPD): and Title 42 USC, 1471 et. Seq. (if USD/FmHA)

<b>1. Borrower</b>		<b>2. Name and address of Lender/Broker</b>	
		Metro Medical Credit Union 8828 N. Stemmons Frwy, Suite #113 Dallas, TX 75247	
<b>3. Date</b>	<b>4. Loan Number</b>		

I hereby authorize the Lender/Broker to verify my past and present employment earning records, back accounts, stock holdings and any other asset balances that are needed to process my mortgage loan application. I further authorize the Lender/Broker to order a consumer credit report and verify other credit information, including past and present mortgage and landlord reference. It understood that a copy of this form will also serve as authorization.

The information that the Lender/Broker obtains is only to be used in the processing of my application for a mortgage loan.

_____	_____
Borrower	Date
_____	_____
Borrower	Date



INSURANCE NOTIFICATION FORM

Member Name Account Number

Address City State Zip Code

Insurance Company Agent's Name

Address City State Zip Code

Policy Number Effective Date

Phone Number Fax Number

Spoke to Date Loan Officer

Metro Medical Credit Union has my permission to obtain any and all information pertaining to taking a lien position with my insurance company. If my coverage must be raised in order to cover the lien amount required, I agree to allow them to act on my behalf. I understand and agree that it is my responsibility to obtain and keep insurance coverage on my property and will do so.

Borrower Date Co-Borrower Date

Dear Agent,

Metro Medical Credit Union (the Lienholder) is making a Home Equity/ Home Improvement loan to the above-referenced member secured by the homestead designated above. Our member has indicated that insurance coverage for the homestead is being secured by you. This property is pledged to us as Mortgagee on the policy. Please list us as the first or second lienholder and have our lien read as follows: Metro Medical Credit Union, 8828 Stemmons Frwy., Suite 113, Dallas, TX 75247. Our phone number is 214.630.0611. Please fax us a copy of the endorsement showing our lien added. Our fax number is 214.688.7042, Attn: Lending. This loan is scheduled for closing and we will need this confirmation of the added lien before closing can take place.

Thank you for your assistance.

Loan Officer, NMLS #812759 Date