

203 South Dakota Street Aberdeen, SD 57401 Phone: (605) 725-0900 Fax: (605) 725-0899

www.hcpfcu.coop

Copies of pay stubs need to be included with the loan application along with a \$40 loan application fee.

## **APPLICATION**

Check below to indicate the type of credit for which you are applying. Married Applicants may apply for a separate account.										
Individual Credit: You must complete the Applicant section about yourself and the Other section about your spouse if										
<ol> <li>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)</li> <li>your spouse will use the account, or</li> </ol>										
			me as a basis for repaym	nent If you are relying o	n income from	n alimony cl	nild support or separate			
			on to the extent possible							
			Ily complete appropriate							
Co-Applicant box.										
Account/Loan: Indiv	Account/Loan: Individual Joint									
If this is an application f	or joint credit	, Applicant a	nd Co-Applicant each agr	ee and acknowledge the	intent to appl	y for joint cre	edit (sign below):			
Applicant Signature			Date	Co-Applicant Signature Date						
X			/C N	X	(0 1)					
<b>N</b>			(Seal)	<u> </u>			(Seal)			
Amount Requested \$				☐Credit Limit Requeste	ed \$					
Purpose/Collateral:										
PAYMENT PROTECTION Are you interested in having your loan protected? TYES 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	2010.00, 70	<u> </u>	orgin a coparate approar	OTHER CO-APPI			ARANTOR OTHER			
NAME (Last - First - Initial)				NAME (Last - First - Initial)	LICAIVI USI	0035	ARANTOR DOTTER			
TV WE (East 1 list militar)				TV WE (East 1 list linear)						
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER/I		INDIVIDUAL TAX ID NUMBER	ACCOUNT NUMBER	SOCIAL SECU	SOCIAL SECURITY NUMBER/INDIVIDUAL TAX ID				
BIRTH DATE	EMAIL ADDRESS			BIRTH DATE	EMAIL ADDR	SS				
HOME PHONE	CELL PHONE		BUSINESS PHONE/EXT.	HOME PHONE	CELL PHONE		BUSINESS PHONE/EXT.			
DRIVER'S LICENSE NUMBER/STATE AGES OF DEPENDENTS				DRIVER'S LICENSE NUMBER	DRIVER'S LICENSE NUMBER/STATE AGES OF DEPENDENTS					
PRESENT ADDRESS (Street – City – State – Zip) OWN RENT				PRESENT ADDRESS (Street	– City – State – Zi	p)	OWN RENT			
LENGTH AT RESIDENCE				-	,	. ,	LENGTH AT RESIDENCE			
PREVIOUS ADDRESS (Street – City – State – Zip)  OWN RENT				PREVIOUS ADDRESS (Stree	t – City – State – Z	(ip)	OWN RENT			
LENGTH AT RESIDENCE							LENGTH AT RESIDENCE			
MORTGAGE/RENT OWED TO				MORTGAGE/RENT OWED TO	)					
MORTGAGE BALANCE	MONTHLY PAY	/MENT	INTEREST RATE	MORTGAGE BALANCE	MONTHLY PAY	/MENT I	INTEREST RATE			
\$	\$		%	\$	\$		%			
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:				COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUL PROPERTY STATE:						
MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)			MARRIED SEPA		NMARRIED (Sino	gle - Divorced - Widowed)				
EMPLOYMENT/INCOME				EMPLOYMENT/IN	NCOME					
EMPLOYMENT STATUS FULL TIME PART TIME HOURS PER WEEK				EMPLOYMENT STATUS FULL TIME PART TIME HOURS PER WEEK						
START DATE:				START DATE:						
NAME AND ADDRESS OF EMPLOYER				NAME AND ADDRESS OF EMPLOYER						
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT				NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.						
BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.  EMPLOYMENT INCOME PER OTHER INCOME PER			EMPLOYMENT INCOME P	ME PER						
\$ \$				\$		\$				
TITLE/GRADE SOURCE			TITLE/GRADE		SOURCE					
PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN TWO YEARS				PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN TWO YEARS						
20.20.20.00.00.00.00.00.00.00.00.00.00.0										
STARTING DATE ENDING DATE			=	STARTING DATE		ENDING DATE				
STARTING DATE ENDING DATE			-	STAKTING DATE	_					
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES NO				MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES NO						
WHERE		ENDI	NG/SEPARATION DATE	WHERE		END	ING/SEPARATION DATE			

REFERENCE NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			REFERENCE NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU									
NAME AND ADDRESS OF NEA	AREST RELATIV	E NOT LIVING WITH YOU		NAME /	AND AD	DRESS OF NEA	REST RELA	IIVE NO I	LIVING WIT	. H YOU		
RELATIONSHIP HOME PHONE				RELATIONSHIP HOME PHONE				ME PHONE				
WHAT YOU OWE												
DEBT	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)			INTEREST RATE		PRESENT BALANCE		MONTHLY PAYMENT		ENT -	OWED BY APPLICANT OTHER	
RENT FIRST MORTGAGE (Incl. Tax & Ins.)				% \$			\$					
(III.)					%	\$		\$				
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LIST ANY NAMES UNDER WH AND CREDIT HISTORY CAN B		DII REFERENCES		TOTA	LS	\$		\$				
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WHAT YOU OWN				Т			PI FDGF	AS COL	LATERAL		OWNE	D BY
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					\$		S	□ NO	+ +	1		
							□ NO					
					\$	YE			□ NO			
	\$							┝	1			
								APPI	ICANT	OTHER		
OTHER INFORMATION ABOUT YOU IF YOU ANSWER "YES" (BY CHECKING THE BOX) TO ANY QUESTION OTHER THAN #1, EXPLAIN ON AN ATTACHED SHEET  1. ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?								7111				
<ol> <li>ARE 100 A U.S. CITIZEN OR FERMINARIY RESIDENT ALIEN?</li> <li>DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGMENTS OR HAVE YOU EVER FILED FOR BANKRUPTCY, HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13, HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST SEVEN YEARS, OR BEEN A PARTY IN A LAWSUIT?</li> </ol>												
3. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?												
<ol> <li>ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE?</li> <li>FOR WHOM (Name of Others Obligated on Loan):</li> </ol>									_	_		
TO WHOM (Name of Creditor):												
STATE LAW NOTI												
misunderstandings or d accommodation in conn	isappointme lection with the lection with the	credit agreement must be ints, any contract, promise, unhis loan of money or grant or one of any instrument or document of any instrument.	ındertakiı r extensi	ng, or off on of cre	fer to dit, or	forebear repa any amendn	ayment of nent of, ca	money ancellat	or to ma ion of, wa	ake an aiver o	y othe of, or su	r financial ubstitution
and that credit reporting compliance with this law Notice to Wisconsin F	g agencies m /. Residents: (	o laws against discrimination aintain separate credit histor 1) No provision of any marit affect the rights of the Cred	ries on eat	ach indiverty agree	idual ement	upon request , unilateral st	atement	o Civil I under S	Rights Co Section 76	ommis 66.59,	sion ac	dministers art decree
decree, or has actual ke	nowledge of ur spouse. Ti	its terms, before the credit in the credit is terms, before the credit being applied for, if	is grante	d or the	accou	int is opened	. (2) Plea	se sign	if you ar	e not	applyir	ng for this
Signature for Wisconsin Res	sidents Only	Dat	te									
X			(Seal)									

## **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 what you owe. If there are any important changes you will notify us in writing immediately. 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. You understand that the Credit Union will rely on the information in this application and your 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 on you. It is a crime to willfully and deliberately provide incomplete or incorrect information in this application. Applicant's Signature Other Signature Date Date (Seal) (Seal) **CREDIT UNION USE ONLY** APPROVED LIMITS: SIGNATURE LINE OF CREDIT OTHER □ APPROVED DECLINED DEBT RATIO/SCORE: BEFORE AFTER (Adverse Action Notice Sent) LOAN OFFICER COMMENTS: Credit Committee or Loan Officer Signatures Credit Committee or Loan Officer Signatures Date Date (Seal) (Seal)



08/01/2025

LOAN TYPE Annual Loan Percentage Rate

Secured Loans: Lowest Rate 5.85%

Non-Titled Secured: Lowest Rate 9.00%

Signature Loans: Lowest Rate 10.00%

(See a loan officer for maximum amounts and terms)

Overdraft Protection Loans: 15.00%

Stafford and Parent Plus Student Loans: Set by Dept of Education

Mortgages and Home Equity Loans Call for Current Rates

(May be adjusted annually)

Share Secured and Share Certificate Loans 4% over current rate paid on security

The following tiers and corresponding credit scores will determine your final interest rate

A+ A B C D E

740+ 700-739 665-699 625-664 600-624 599-0

Simple interest is charged on the outstanding balance of the loan. There are no prepayment penalties. LifePlus, Disability & Involuntary Unemployment protection may be available. All consumer loans are charged a \$40 loan application fee. All secured title loans will be charged \$15 per vehicle to note the lien and all secured non-titled loans will be charged a UCC fee of \$25 per filing. A fee of \$20 per loan will be charged to defer a loan payment. A \$50 fee will be charged to refinance to lower an interest rate on a current loan. A returned ACH/Check loan payment will be charged a \$10 fee.

All rates are based on APR (Annual Percentage Rate).

A security interest is required on all secured loans. Insurance is required on all secured loans over \$3000 except for share or share certificate secured loans. **Healthcare Plus FCU** is to be listed as the lien holder on the title or UCC-1 lien instrument as well as on the insurance policy.

Your minimum payment will never be less than \$30.00 per month.



