

24 DAVIS AVENUE, KEARNY, NJ 07032 · PH: 201-991-6078 · FAX: 201-991-6852 · NMLS 507571

Dear Applicant:

Thank you for your inquiry regarding a **Home Equity Line of Credit** with Schuyler Savings Bank. The information and requirements herein are designed to facilitate the processing of your application.

Please note that **each and every** person named on the Deed to the property **must** also complete an application. This loan will be granted on primary residences only.

**PLEASE SUBMIT THE FOLLOWING ITEMS**

**APPLICATION**: Complete all applicable sections, date and sign.

**INCOME VERIFICATION**: Please submit a copy of two of your most recent pay-stubs as well as copies of your W-2 Forms and **signed** copies of your Federal Tax Returns, including all pertinent schedules, covering the most recent two-year period.

**ADDITIONAL DOCUMENTATION**: Please provide the following:

* Copy of Homeowners Insurance Policy
* Copy of Deed
* Copy of Current Tax Bill
* Acknowledgement of Receipt for the Important Terms Disclosure and booklet entitled ‘*When Your Home Is On The Line*”.

Once your loan request is approved, Schuyler Savings Bank must be named as a mortgagee on your Homeowner’s Insurance Policy. Coverage on the dwelling must be equal to or greater than the total balances of your existing first mortgage and pending equity loan. If your property is located in a flood prone area, we will require a copy of the Flood Insurance Policy naming Schuyler Savings Bank as mortgagee as well. **You may obtain property insurance from any agent, broker or other person of your choice.**

|  |  |  |  |
| --- | --- | --- | --- |
| Schuyler Savings Bank Logo | ☐ HOME EQUITY LOANAmount Requested $Number of Months | ☒ HOME EQUITY CREDIT LINELimit Requested $Click or tap here to enter text.Introductory Rate PeriodClick or tap here to enter text. | If you intend to apply for joint credit, please initial here: Applicant Co-Applicant |

 Purpose of Financing:Click or tap here to enter text.

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| --- | --- |
| **IMPORTANT: READ THESE DIRECTIONS BEFORE COMPLETING APPLICATION.**If this is an application for individual credit and you are relying on your own income or assets and not the income or assets of a spouse or other person as a basis for the extension and repayment of the credit requested, complete only the Applicant section and sign the application. | If this in application for joint credit or if this is an application for individual credit but you are relying on the income or assets of a spouse or other person as a basis for the extension and repayment of the credit requested, both the 1st Applicant and 2nd Applicant sections should be completed. If this is an application for joint credit, both parties should sign the application. |
| **SECTION 1: TELL US ABOUT YOURSELF (APPLICANT)** |
| FIRST, MIDDLE INITIAL, LAST NAME OF APPLICANTClick or tap here to enter text. | MARITAL STATUS\*[ ]  MARRIED [ ]  UNMARRIED [ ]  SEPERATED | SOCIAL SECURITY NUMBERClick or tap here to enter text. |
| STREET ADDRESSClick or tap here to enter text. | APT NO.Click or tap here to enter text. | CITYClick or tap here to enter text. | COUNTYClick or tap here to enter text. | STATEClick or tap here to enter text. | ZIP CODEClick or tap here to enter text. |
| YEARS THEREClick or tap here to enter text. | PHONE NUMBERClick or tap here to enter text. | EMAIL ADDRESSClick or tap here to enter text. | BIRTHDATEClick or tap here to enter text. | NUMBER OF Click or tap here to enter text. DEPENDENTS | AGESClick or tap here to enter text. |
| PREVIOUS ADDRESS (if at present address less than 2 years)Click or tap here to enter text. | CITYClick or tap here to enter text. | STATEClick or tap here to enter text. | ZIP CODEClick or tap here to enter text. | YEARS THEREClick or tap here to enter text. |
| PRESENT EMPLOYERClick or tap here to enter text. | ADDRESSClick or tap here to enter text. | BUSINESS PHONEClick or tap here to enter text. | POSITION/TITLEClick or tap here to enter text. | YEARS THEREClick or tap here to enter text. |
| PREVIOUS EMPLOYER (if at present employer less than 2 years)Click or tap here to enter text. | ADDRESSClick or tap here to enter text. | BUSINESS PHONEClick or tap here to enter text. | POSITION/TITLEClick or tap here to enter text. | YEARS THEREClick or tap here to enter text. |
| ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION | PRESENT GROSS SALARY OR COMMISSION$Click or tap here to enter text. [ ]  WK [ ]  MO [ ]  YR |
| OTHER INCOME: $Click or tap here to enter text. [ ]  WK [ ]  MO [ ]  YR | SOURCES OF OTHER INCOMEClick or tap here to enter text. | Have you been Bankrupt in the last 10 years? [ ]  YES [ ]  NO | If YES, please provide details on a separate paper. |
| Has a judgement been entered against you or your salary garnished in the last 7 years? [ ]  YES [ ]  NO |
| **SECTION 2: TELL US ABOUT YOURSELF (CO-APPLICANT)** |
| FIRST, MIDDLE INITIAL, LAST NAME OF APPLICANTClick or tap here to enter text. | MARITAL STATUS\*[ ]  MARRIED [ ]  UNMARRIED [ ]  SEPERATED | SOCIAL SECURITY NUMBERClick or tap here to enter text. |
| STREET ADDRESSClick or tap here to enter text. | APT NO.Click or tap here to enter text. | CITYClick or tap here to enter text. | COUNTYClick or tap here to enter text. | STATEClick or tap here to enter text. | ZIP CODEClick or tap here to enter text. |
| YEARS THEREClick or tap here to enter text. | PHONE NUMBERClick or tap here to enter text. | EMAIL ADDRESSClick or tap here to enter text. | BIRTHDATEClick or tap here to enter text. | NUMBER OF Click or tap here to enter text.DEPENDENTS | AGESClick or tap here to enter text. |
| PREVIOUS ADDRESS (if at present address less than 2 years)Click or tap here to enter text. | CITYClick or tap here to enter text. | STATEClick or tap here to enter text. | ZIP CODEClick or tap here to enter text. | YEARS THEREClick or tap here to enter text. |
| PRESENT EMPLOYERClick or tap here to enter text. | ADDRESSClick or tap here to enter text. | BUSINESS PHONEClick or tap here to enter text. | POSITION/TITLEClick or tap here to enter text. | YEARS THEREClick or tap here to enter text. |
| PREVIOUS EMPLOYER (if at present employer less than 2 years) Click or tap here to enter text. | ADDRESSClick or tap here to enter text. | BUSINESS PHONEClick or tap here to enter text. | POSITION/TITLEClick or tap here to enter text. | YEARS THEREClick or tap here to enter text. |
| ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION | PRESENT GROSS SALARY OR COMMISSION$Click or tap here to enter text. [ ]  WK [ ]  MO [ ]  YR |
| OTHER INCOME: $Click or tap here to enter text. [ ]  WK [ ]  MO [ ]  YR | SOURCES OF OTHER INCOMEClick or tap here to enter text. | Have you been Bankrupt in the last 10 years? [ ]  YES [ ]  NO | If YES, please provide details on a separate paper. |
| Has a judgement been entered against you or your salary garnished in the last 7 years? [ ]  YES [ ]  NO |
| **SECTION 3: YOUR FINANCIAL OBLIGATIONS (Include Charge Accounts, Installment Contract, etc. Use separate sheet if necessary.)** |
| NAME OF COMPANY OR BANK | ACCOUNT NUMBER | PRESENT BALANCE | MONTHLY PAYMENT | CONSOLIDATE? |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | [ ]  YES [ ]  NO |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | [ ]  YES [ ]  NO |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | [ ]  YES [ ]  NO |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | [ ]  YES [ ]  NO |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | [ ]  YES [ ]  NO |
| OTHER DEBTS (Including Obligations, Suits, Judgements, Legal Claims, Child Support, Maintenance Payments, as well as Co-Borrower/Guarantor of other financial obligations) | Click or tap here to enter text. | Click or tap here to enter text. | [ ]  YES [ ]  NO |
| **SECTION 4: STATEMENT OF ASSETS –** If you have a recent financial statement that includes this information, attach copy in lieu of completing this section. |
| Asset | Name of Company/Bank | Account Number | Current Balance/Value | Comment/Description |
| Checking/Savings | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Checking/Savings | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Checking/Savings | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Stocks/Bonds | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Stocks/Bonds | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Stocks/Bonds | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Other Assets | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
|  |  |  |  |  |
| **SECTION 5: INFORMATION REGARDING PROPERTY SECURING LOAN** |
| PROPERTY [ ]  SINGLE FAMILY [ ]  CONDO [ ]  2 TO 4 FAMILY | [ ]  PRIMARY[ ]  RENTAL[ ]  VACATION | DATE OF PURCHASEClick or tap here to enter text. | PURCHASE PRICEClick or tap here to enter text. |
| ADDRESS OF PROPERTYClick or tap here to enter text. | CITYClick or tap here to enter text. | COUNTYClick or tap here to enter text. | STATEClick or tap here to enter text. | ZIP CODEClick or tap here to enter text. |
| NAME(S) OF OWNER(S) ON DEEDClick or tap here to enter text. | DEVELOPMENT NAMEClick or tap here to enter text. |
| ORIGINAL AMOUT OF MORTGAGE$Click or tap here to enter text. | CURRENT BALANCE(S)$Click or tap here to enter text. | MORTGAGE ACCOUNT NUMBERClick or tap here to enter text. | PROPERTY VALUEClick or tap here to enter text. |
| NAME AND ADDRESS OF MORTGAGE HOLDERClick or tap here to enter text. |
| YR. HOUSE BUILTClick or tap here to enter text. | NO. OF ROOMSClick or tap here to enter text. | NO. OF BEDROOMSClick or tap here to enter text. | NO. OF BATHSClick or tap here to enter text. | FAMILY ROOM OR DEN[ ]  YES [ ]  NO | GROSS LIVING AREAClick or tap here to enter text. SQ. FT. | GARAGE/CAR PORTClick or tap here to enter text. | CENTRAL AIR[ ]  YES [ ]  NO |
| BLOCK #Click or tap here to enter text. | LOT #Click or tap here to enter text. | ANNUAL TAX$Click or tap here to enter text. |
| **SIGNATURES: PLEASE READ BEFORE SIGNING** |
| In the following paragraph the words “I, me, and my” refer to all persons signing below and/or “you and your” refer to the Lender. I declare that information in this application is true and complete. No suits, judgements, bankruptcy proceedings, or legal claims are now pending against me. You may investigate information in the application. I authorize any individual or consumer reporting agency to give you additional information. This application will remain your property. You may provide information to others whether or not credit is granted. X X  APPLICANT’S SIGNATURE DATE CO-APPLICANT’S SIGNATURE DATE |
| \*For purposes of this document. The terms ‘marriage’, ‘married’, ‘spouse’, ‘wife’, ‘husband’, or other terms describing the marital relationship, shall mean and include the analogous terms describing a civil union relationship, including but not limited to, ‘civil union couple’ (‘married couple’), ‘civil union license’ (‘marriage license’), ‘civil union certificate’ (‘marriage license’), ‘civil union’ (‘marriage’), and ‘one partner in a civil union couple’ (‘spouse’, ‘husband’, ‘wife’). | AN EQUAL HOUSING OPPORTUNITY LENDERMember FDIC | C:\Users\jwinn\AppData\Local\Microsoft\Windows\INetCache\Content.MSO\222ED777.tmp |