



P.O. Box 1052, Northridge, CA 91328
 (818) 993-6328 | (818) 341-5626
 loans@matadors.org | NMLS #504752

HOME EQUITY LINE OF CREDIT APPLICATION

PROPERTY SECURING YOUR LOAN

Property Street Address		City	County	State	Zip
Property Type: <input type="checkbox"/> Single Family Home <input type="checkbox"/> Condominium <input type="checkbox"/> Townhouse <input type="checkbox"/> Other _____		Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried <input type="checkbox"/> Registered Domestic Partner			
Amount Requested	Purpose		Manner In Which Title Will Be Held		
Present Market Value					

Account Number	Loan Number
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APPLICANT

FIRST NAME	INITIAL	LAST NAME	SR.,JR.,I,II
SOCIAL SECURITY NUMBER		BIRTHDATE	
CURRENT STREET ADDRESS		SINCE (Mo.Yr.)	
CITY	STATE	ZIP	
COUNTY	EMAIL ADDRESS		
FORMER ADDRESS (COMPLETE IF CURRENT ADDRESS IS LESS THAN 3 YEARS)		NUMBER OF YEARS	
HOME TELEPHONE	NO. OF DEP.	AGES OF DEPENDENTS	
DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT How Long? _____			

CO-APPLICANT

FIRST NAME	INITIAL	LAST NAME	SR.,JR.,I,II
SOCIAL SECURITY NUMBER		BIRTHDATE	
CURRENT STREET ADDRESS		SINCE (Mo.Yr.)	
CITY	STATE	ZIP	
COUNTY	EMAIL ADDRESS		
FORMER ADDRESS (COMPLETE IF CURRENT ADDRESS IS LESS THAN 3 YEARS)		NUMBER OF YEARS	
HOME TELEPHONE	NO. OF DEP.	AGES OF DEPENDENTS	
DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT How Long? _____			

EMPLOYMENT AND INCOME

If self-employed, check here and attach two years federal income tax returns (include all schedules).

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		SINCE
ADDRESS		
WORK TELEPHONE	POSITION	MO. GROSS INCOME \$
FORMER EMPLOYER (IF CURRENT IS LESS THAN 3 YEARS)	POSITION	YEARS THERE

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		SINCE
ADDRESS		
WORK TELEPHONE	POSITION	MO. GROSS INCOME \$
FORMER EMPLOYER (IF CURRENT IS LESS THAN 3 YEARS)	POSITION	YEARS THERE

OTHER INCOME

You need not list income from alimony, child support or separate maintenance payments unless You want it considered in evaluating this credit application.

SOURCE OF OTHER INCOME	MONTHLY AMOUNT \$
NAME AND ADDRESS OF PAYER	NO. OF YEARS

SOURCE OF OTHER INCOME	MONTHLY AMOUNT \$
NAME AND ADDRESS OF PAYER	NO. OF YEARS

ASSETS AND DEPOSITS

Attach a separate sheet if necessary.

DESCRIPTION	ACCOUNT NUMBER/TYPE	BALANCE/VALUE

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DEMOGRAPHIC INFORMATION OF APPLICANT AND CO-APPLICANT

Application Number:
Date:

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, race, and sex) 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 "Hispanic or Latino" origins, 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, race and sex on the basis of visual observation or surname. If you do not wish to provide some or all of this information, please check below.

<p>Applicant:</p> <p>Ethnicity:</p> <p><input type="checkbox"/> Hispanic or Latino – <i>Check one or more</i></p> <p><input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban</p> <p><input type="checkbox"/> Other Hispanic or Latino – <i>Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:</i></p> <p>_____</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p><input type="checkbox"/> I do not wish to provide this information (<i>about Ethnicity</i>)</p> <p>Race: check one or more</p> <p><input type="checkbox"/> American Indian or Alaska Native – <i>Print name of enrolled or principal tribe:</i></p> <p>_____</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino</p> <p><input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese</p> <p><input type="checkbox"/> Other Asian – <i>Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:</i></p> <p>_____</p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p><input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro</p> <p><input type="checkbox"/> Samoan</p> <p><input type="checkbox"/> Other Pacific Islander – <i>Print race, for example, Fijian, Tongan, and so on:</i></p> <p>_____</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> I do not wish to provide this information (<i>about Race</i>)</p> <p>Sex:</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p><input type="checkbox"/> I do not wish to provide this information (<i>about Sex</i>)</p> <hr/> <p>To Be Completed By Credit Union (for an application taken in person)</p> <p>Was the ethnicity of the Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was the race of the Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was the sex of the Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <hr/> <p>Applicant Name (print): _____</p> <hr/> <p>Applicant Signature (optional): _____</p>	<p>Co-Applicant:</p> <p>Ethnicity:</p> <p><input type="checkbox"/> Hispanic or Latino – <i>Check one or more</i></p> <p><input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban</p> <p><input type="checkbox"/> Other Hispanic or Latino – <i>Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:</i></p> <p>_____</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p><input type="checkbox"/> I do not wish to provide this information (<i>about Ethnicity</i>)</p> <p>Race: check one or more</p> <p><input type="checkbox"/> American Indian or Alaska Native – <i>Print name of enrolled or principal tribe:</i></p> <p>_____</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino</p> <p><input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese</p> <p><input type="checkbox"/> Other Asian – <i>Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:</i></p> <p>_____</p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p><input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro</p> <p><input type="checkbox"/> Samoan</p> <p><input type="checkbox"/> Other Pacific Islander – <i>Print race, for example, Fijian, Tongan, and so on:</i></p> <p>_____</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> I do not wish to provide this information (<i>about Race</i>)</p> <p>Sex:</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p><input type="checkbox"/> I do not wish to provide this information (<i>about Sex</i>)</p> <hr/> <p>To Be Completed By Credit Union (for an application taken in person)</p> <p>Was the ethnicity of the Co-Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was the race of the Co-Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was the sex of the Co-Applicant collected on the basis of visual observation or surname?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <hr/> <p>Co-Applicant Name (print): _____</p> <hr/> <p>Co-Applicant Signature (optional): _____</p>
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