



BETHEX

FEDERAL CREDIT UNION

20 East 179th Street, LL _ Bronx, NY 10453 _ Tel: (718) 299-9100 _ Fax: (718) 294-4950
www.bethexfcu.org

Consumer Loan Application

Account Number / Numero de Cuenta: _____ Amount \$ _____
Purpose/Proposito _____
Length of payment / Tiempo para pagar _____
Name/Nombre: _____
Address/Direccion: _____

Home Phone / Telefono de la casa: (____) _____ - _____
Monthly Rent / Renta Mensual: _____
SSN / Numero de Seguro Social: _____ - _____ - _____
Date of Birth / Fecha de Nacimiento: _____
Employment / Empleo: _____
How Long / Tiempo Alli: _____
Address/Direccion: _____

Work Phone/Telefono Trabajo:(____) _____
Supervisor/ Gerente _____
Current Salary / Sueldo: \$ _____

Weekly, Biweekly, Monthly (Select one) / Semanal, Quincenal, Mensual
(Seleccione uno)
Nearest Relative / Familiar mas cercano: _____
Address Direccion: _____
Home Phone / Telefono de la casa: _____

Signature / Firma: _____ Date / Fecha: _____

FOR OFFICIAL USE ONLY/PARA USO DE LA OFFICINA

Amount of Loan: \$ _____ Monthly Installments: _____ Term: _____

Pledge Amount: _____ Loan Balance: _____

Credit Report: Yes _____ No _____ Co-Signer: Yes _____ No _____

Direct Dep: Yes _____ No _____ Loan Approved: Yes _____ No _____

Signature of Loan Officer _____ Date Acted On _____