

# **ESL Home Equity Application**

## **Before You Apply**

The minimum equity loan or line of credit is \$5,000. If you need less than that amount, please contact us to discuss other options. You can call our Contact Center at 585.336.1000 or 800.848.2265, chat with us using chat banking available at esl.org, or stop by any ESL branch and speak with a representative.

Presently, ESL accepts applications for properties located in New York State in the following counties only: Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Seneca, Wayne, Wyoming, and Yates. Please provide all of the requested information.

#### What You'll Need

The application will take approximately 10 to 15 minutes to complete. You will need:

- Telephone numbers, addresses, and Social Security Number(s) for any persons listed on the application
- Your residency and work history
- Current mortgage information
- Estimated current market value of your home
- Account names, monthly payments, and balances for any debts you want to consolidate

#### Required Reading

- If you are applying for a Home Equity Line of Credit, you must read The Consumer Guide to Home
  Equity Lines of Credit. You'll be asked to confirm that you have read this information in order to begin
  your application for credit. You will also receive a written copy of the disclosure in your initial loan
  disclosure package.
- If you are applying for Home Equity Line of Credit, you must also read the Important Terms of an ESL Federal Credit Union (ESL) Home Equity Line of Credit. You also will receive a written copy of the disclosure in your initial loan disclosure package.

□ I have read The Consumer Guide to Home Equity Lines of Cre	edit.
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# **About Your Loan**

What type of loan are you applying for?						
<ul> <li>Home Equity Line of Credit</li> <li>Increase to Existing Home Equity Line (minimum increase is \$5,000)</li> <li>Fixed Rate Home Equity Loan</li> <li>Fixed Rate Home Equity Loan Term (4 to 20 years):</li> </ul>						
Total Amount Requested	(minimum total loan or line of \$5,000) (Calculator)					
Loan Purpose:						
<ul><li>Bill Consolidation</li><li>Other</li></ul>						
Will this loan pay off an existing first moloan?	rtgage, a home equity loan/line, or other real-estate secured					
O Yes O No						
Where would you like to sign your legal	documents? (Choose one)					
<ul> <li>Batavia Office</li> <li>Brockport Office</li> <li>Chestnut Street Office</li> <li>Cobblestone Court Office</li> <li>Geneseo Office</li> <li>Long Pond Office</li> <li>Mt. Read Office</li> <li>Penfield Office</li> <li>Ridgeway Office</li> <li>Twelve Corners Office</li> <li>ESL Headquarters (225 Officet)</li> <li>Street, Rochester, NY 146</li> </ul>						
Would you like to apply for:						
Group Credit Life Insurance? O Single O Joint O None	e					
Group Disability Insurance? O Single O Joint O None	Group Disability Insurance? O Single O Joint O None					
Insurance is available for Home Eq	uity Lines of Credit only. Applicant must be under age 66.					
Payment Options:						
O Automatic deduction from ESL of	hecking or savings account:					
Member Number						
Account Number						
O Direct Billing						



All Home Equity Line of Credit payments are due on the 25th of the month.

About Applicant(s)	
Your Email Address:	
Primary Applicant:	
My intent is to apply for joint credit? O Yes	s O No
Member Number	
First Name	
Middle Initial	
Last Name	
Date of Birth	_ (mm/dd/yyyy)
Social Security Number	(xxx-xx-xxxx)
Home Telephone	_ (include area code)
Street Address	_
City	_
State	_ (i.e., NY)
Zip	_
How long at residence?	
Years Months	
Your Current Employer:	
Employer's Name	<del></del>
Occupation/Title	O Permanent O Supplemental
Business Phone	(include area code)
Extension	
How long at employer?	
Years Months	
Self-Employed? O Yes O No	
Gross Salary/Income	<del></del>
O Annually O Monthly O Biwe	eekly O Weekly



Your Previous Employer, if less than one year	ar at current employer:
Employer's Name	
How long with this employer?	
Years Months	
Additional Monthly Income, if applicable:	
Amount	
Source	
investments, SIP/401(k), rental income,	ch as second employers, Social Security, MET Pension, etc. Alimony, child support, and separate maintenance income to have it considered as a basis for repayment.
Applicant Investment Accounts:	
Please list the estimated balances in the	e following accounts:
Mutual Funds	
SIP/401(k)	
Stocks/Bonds	
IRA	<del></del>
Other Assets	
If no Co-Applicant, skip to Financial Information	n.
Co-Applicant:	
My intent is to apply for joint credit?	Yes O No
Member Number	
First Name	
Middle Initial	<del></del>
Last Name	
Date of Birth	(mm/dd/yyyy)
Social Security Number	(xxx-xx-xxxx)
Home Telephone	(include area code)
Street Address	
City	<del></del>
State	(i.e., NY)



Zip

How long at residence?	
Years	Months
Your Current Employer:	
Employer's Name	
Occupation/Title	O Permanent O Supplemental
Business Phone	(include area code)
Extension	
How long at employer?	
Years	Months
Self-Employed? O Yes	s O No
Gross Salary/Income	
O Annually O	Monthly O Biweekly O Weekly
Your Previous Employer, if les	s than one year at current employer:
Employer's Name	<del></del>
How long with this emplo	oyer?
Years	Months
Additional Monthly Income, if a	applicable:
Amount	<del></del>
Source	
investments, SIP/401(k),	of income, such as second employers, Social Security, MET Pension, rental income, etc. Alimony, child support, and separate maintenance income you do not wish to have it considered as a basis for repayment.
Co-Applicant Investment Acco	unts:
Please list the estimated	balances in the following accounts:
Mutual Funds	
SIP/401(k)	
Stocks/Bonds	
IRA .	



Other Assets

# **Financial Information**

#### Please list all debts:

Creditor	Purpose	Monthly Payment	Balance	Will you pay off balance with this loan?		
	Mortgage			O Yes	O No	
	Property Tax (if not escrowed)			O Yes	O No	
				O Yes	O No	
				O Yes	O No	
				O Yes	O No	
				O Yes	O No	
				O Yes	O No	

# **Property Description**

Town		
TOWIT		
County		
City		
State	(	i.e., NY)
Zip		
erty Type:		
O Single	amily O Duplex O Condo O	PUD O Manufactured/Mobile Home
Estimated	Value \$	_
major proper	y improvements in the last five y	ears, if applicable:



Other Real Estate Owned:

Property Address	# of Units	Mortgage Balance	Name of Lender	Gross Rental Income	Monthly Mortgage Payment	Monthly Taxes & Insurance Payment (if not escrowed)

## **Information for Government Monitoring Purposes**

The following information is requested by the federal government for certain types of loans related to a dwelling in order to monitor the lender's compliance with the equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. You may select one or more designations for "Race." The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, under federal regulations the lender is required to note ethnicity, race, and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

information, please check below.				
Applicant:				
☐ I do not wish to	furnish this information.			
<b>Ethnicity</b>	Hispanic or Latino O Not Hispanic or Latino			
C	<ul> <li>American Indian or Alaskan Native</li> <li>Asian</li> <li>Black or African American</li> <li>Native Hawaiian or Other Pacific Islander</li> <li>White</li> </ul>			
Sex	) Female O Male			
Co-Applicant:				
☐ I do not wish to	furnish this information.			
<b>Ethnicity</b>	Hispanic or Latino O Not Hispanic or Latino			
C	<ul> <li>American Indian or Alaskan Native</li> <li>Asian</li> <li>Black or African American</li> <li>Native Hawaiian or Other Pacific Islander</li> <li>White</li> </ul>			
Sex	) Female O Male			
This gradit union is fo	derally incured by the National Credit Union Administration			



## Applicant(s) - PLEASE READ BEFORE COMPLETING

You promise all the information given on this application is true, correct, and complete to the best of your knowledge. You understand the lender will retain this application whether approved or declined. The lender is authorized to check your credit and employment history and to answer questions from others about its credit experience with you. ESL may request a credit report in connection with this application for credit and any credit update, renewal, or extension of credit. Upon request, ESL will tell you whether or not a consumer report was obtained, and if such a report was obtained ESL will furnish you with the name and address of the consumer reporting agency furnishing the report.

I have read the above as well as the Terms and Conditions Listed below:

Important Terms of an ESL Federal Credit Union (ESL) Home Equity Line of Credit

The Consumer Guide to Home Equity Lines of Credit

O Yes O No

### **How to Submit Your Application**

Thank you for choosing ESL for your home equity lending needs. Once we have received your application, we'll be quickly back in touch with you to complete your loan application.

Mail:	ESL Federal Credit Union Corporate Headquarters Attn: Home Equity Department P.O. Box 92714 Rochester, NY 14692-9837
Apply online:	<ul> <li>Sign in to online banking (from the esl.org home page)</li> <li>Click I'd Like To</li> <li>Choose Apply for a Loan</li> <li>Click APPLY NOW – HOME EQUITY</li> <li>Fill out the application online and submit securely</li> </ul>
Call us:	585.336.1165 or 800.848.2265
Chat:	Live Chat Banking at esl.org
Visit your local branch:	Visit esl.org for locations

