



# AUTO LOANS



**HEALTHCARE ASSOCIATES**  
C R E D I T   U N I O N

## PICK YOUR PAYMENT

- Choose a loan payment to fit your budget
- Flexible terms up to 72 months
- 100% Financing
- 90-day payment deferral available

## 1040 AUTO LOAN (for homeowners)

- Tax-Deductible Interest\*
- Applies to New or Used Cars
- Finance or Refinance a Car

*\*Always consult your tax advisor regarding deductibility. Available to homeowners in IL, IN, and MO. Some fees may apply based on the state you reside in.*

## PRE-APPROVED AUTO LOAN CHECK OPTION

- We give you a check for the pre-approved amount, and then you can purchase a vehicle from any dealer up to that amount
- Puts the "POWER" in your hands to negotiate the best deal without the worry of financing
- Once the final price is negotiated, just hand the dealer the check and drive away with your new car



# To Apply:

**By phone**, call 630.276.5555  
or 800.942.0158 (*outside  
Chicagoland*)

**By Fax** to 630.276.5868 or  
800.554.2478

**Online** at [www.hacu.org](http://www.hacu.org)

**By mail**, print and send the  
application to the address  
below.

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## Call Center

**630.276.5555**

800.942.0158 (*Outside Chicagoland*)

Monday 8:30 am – 5:00 pm

Wednesday 8:30 am – 1:00 pm

Tues., Thurs. & Fri. 8:30 am – 4:00 pm

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## Naperville Office

1151 East Warrenville Road • P.O. Box 3053  
Naperville, IL 60566-7053

**[www.hacu.org](http://www.hacu.org)**

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The information you supply on this form will be used to evaluate your credit request. If this will be a joint account, the co-applicant must sign where indicated. **PLEASE PRINT IN BLACK OR BLUE INK.**

This account will be (check **one**):  **INDIVIDUAL APPLICATION**  **JOINT APPLICATION**

**ACCOUNT/MEMBER #** \_\_\_\_\_

|                                     |                                      |  |  |  |
|-------------------------------------|--------------------------------------|--|--|--|
| <input type="checkbox"/> <b>New</b> | <input type="checkbox"/> <b>Used</b> | <input type="checkbox"/> <b>Auto Refinance</b> | <input type="checkbox"/> <b>Like-A-Lease Auto Loan</b> | <input type="checkbox"/> <b>1040 Auto Loan</b> |
|-------------------------------------|--------------------------------------|--|--|--|

**Amount \$** \_\_\_\_\_  **Payroll Deduction**  **Coupon Book**

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Mileage \_\_\_\_\_ VIN # \_\_\_\_\_

Name of Seller/Lienholder \_\_\_\_\_ Phone \_\_\_\_\_ Loan Account # \_\_\_\_\_

Auto Insurance Co. \_\_\_\_\_ Agent Name \_\_\_\_\_ Agent Phone \_\_\_\_\_

**TRADE IN?** Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Financed With \_\_\_\_\_

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth  Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Since  E-mail \_\_\_\_\_

Former Address (if less than 2 years at current address) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Since

Employer \_\_\_\_\_ Start Date \_\_\_\_\_ Work Phone \_\_\_\_\_ Ext. \_\_\_\_\_

Position \_\_\_\_\_ Annual Income\* \_\_\_\_\_ Other Annual Income & Source\* \_\_\_\_\_

**Co-Applicant** First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth  Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Since

Former Address (if less than 2 years at current address) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Since

Employer \_\_\_\_\_ Start Date \_\_\_\_\_ Work Phone \_\_\_\_\_ Ext. \_\_\_\_\_

Position \_\_\_\_\_ Annual Income\* \_\_\_\_\_ Other Annual Income & Source\* \_\_\_\_\_

\*Alimony, child support or separate maintenance income need not be revealed if the Borrower or Co-Borrower does not choose to have it considered as a basis for repaying this loan.

| Credit Information           |              |                       |                   |                 |
|------------------------------|--------------|-----------------------|-------------------|-----------------|
| Obligation                   | Lenders Name | Interest Rate         | Balance Owed      | Monthly Payment |
| Mortgage or Rent             |              |                       |                   |                 |
| 2nd Mortgage                 |              |                       |                   |                 |
| Auto Loan                    |              |                       |                   |                 |
| Child Support or Alimony     |              |                       |                   |                 |
| Other                        |              |                       |                   |                 |
| Home Owners Association Name |              | Monthly Assn. Dues \$ | <b>TOTALS: \$</b> | <b>\$</b>       |

*You agree everything stated in this application is correct to the best of your knowledge. The Credit Union is authorized to investigate your credit worthiness, employment history, obtain a credit report and contact creditors as needed. You understand that any false, misleading statements in your application may cause any loan or extension of credit to be in default.*

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Co-Applicant \_\_\_\_\_ Date \_\_\_\_\_