

# Colville Tribal Credit Loan Application

Post Office Box 618  
Nespelem, WA 99155  
Amount Requested: \_\_\_\_\_

Work # (509) 634-2664  
FAX # (509) 634-4707

# of Months: \_\_\_\_\_ Collateral: \_\_\_\_\_

Purpose of the Loan: \_\_\_\_\_

Note: "personal" is not a purpose

APPLICANT					SPOUSE				
First Name	Initial	Last Name			First Name	Initial	Last Name		
Mailing Address		Time at Address			Mailing Address		Time at Address		
City		State	Zip Code		City		State	Zip Code	
Residence Address					Residence Address				
Former Address		Time at Address			Former Address		Time at Address		
City		State	Zip Code		City		State	Zip Code	
Social Security Number	Driver's License # and State	Current Tribal ID #			Social Security Number	Driver's License # and State	Current Tribal ID #		
Date of Birth	Home Telephone Number		# Dependents		Date of Birth	Home Telephone Number		# Dependents	
Applicant (circle one): Married Separated					Unmarried (includes Single, Divorced, Widowed)				
Other Names Used					Other Names Used				
Name of Nearest Relative Not Living With You		Relationship			Name of Nearest Relative Not Living With You		Relationship		
Mailing Address		Home Phone Number			Mailing Address		Home Phone Number		
Personal Reference		Relationship			Personal Reference		Relationship		
Mailing Address		Home Phone Number			Mailing Address		Home Phone Number		
<b>Attach pay stubs, if self-employed or seasonally employed, please attach income tax returns</b>									
Current Employer (If Military, Branch of Service)					Current Employer (If Military, Branch of Service)				
Address/Unit		Telephone Number			Address/Unit		Telephone Number		
City		State	Zip Code		City		State	Zip Code	
How Long	Position/Grade	Monthly Gross Salary			How Long	Position/Grade	Monthly Gross Salary		
Former Employer & Position		How Long			Former Employer & Position		How Long		
<b>Sources of additional income (rent, stock, retirement, etc...). Income received from child support, alimony or maintenance is optional information to be furnished only if you desire this income to be considered in evaluating your application.</b>									
Type	How Long	Monthly Amount			Type	How Long	Monthly Amount		
Type	How Long	Monthly Amount			Type	How Long	Monthly Amount		

**IMPORTANT:** Please complete this Personal Financial Statement. Use a separate sheet for a Co-Applicant. Please indicate all property owned and debts owed.

Attach additional sheets if necessary.

ASSETS	Present Value	LIABILITIES	Payments	Present Balance
Home		Rent or Mortgage and to Whom?		
Cash in Bank		Home Insurance and how often paid?		
Auto - Year, Make and Model		Auto		
Auto - Year, Make and Model		Auto		
Other Real Estate		Auto Insurance and how often paid?		
Personal Property		Other Real Estate		
Other Assests		Colville Tribal Credit Unsecured Loan		
		Credit Cards and Other debt		
		Alimony/Child Support		
<b>TOTAL:</b>		<b>TOTAL:</b>		

**Have you filed bankruptcy? If so, when?**

**CUSTOMER COMMENTS**

I/We hereby authorize anyone to release income/credit information concerning myself/ourselves to Colville Tribal Credit. This authorization is given to enable CTC to evaluate my/our request for credit. I/We certify that all statements are true and complete and are submitted for the purpose of obtaining credit. Verification may be obtained from any source named in the application and from any credit reporting agency. I agree that the application shall remain CTC property whether it is approved or not approved.

X \_\_\_\_\_ X \_\_\_\_\_  
 Applicant Date Co-Applicant Date