

# Historic Columbus Loan Program Application for Credit

Email \_\_\_\_\_

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First Name	Middle Initial	Last Name	SSN
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Current Street Address	Home Phone	Cel Phone
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City	County	State	Zip	# of Years / Months
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Previous Street Address

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City	County	State	Zip	# of Years / Months
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## References

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Name of Nearest Relative	Relationship	Home Phone
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Address

## Employment

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Name of Current Employer	Name of Supervisor	Gross Monthly Income
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Position/Title	Years Employed with Company	Work Phone
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Employer Address	City	State	Zip
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Name of Previous Employer	Years Employed with Company
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*Other Monthly Income	Source
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## Joint Applicant

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First Name	Middle Initial	Last Name	SSN
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Current Street Address	City	State	Zip	Home Phone
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Name of Current Employer	Name of Supervisor	Gross Monthly Income
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Position/Title	Years Employed with Company	Work Phone
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Employer Address	City	State	Zip
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*Other Monthly Income	Source
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\*ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION.

## Credit Information

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Checking Account– Bank Name	Account Number
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Savings Account– Bank Name	Account Number
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Mortgage Holder	Monthly Payment	Amount Owed	House Value
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PLEASE LIST ALL OUSTANDING CHARGE ACCOUNTS, LOANS WITH BANKS AND INSURANCE COMPANIES, DEPARTMENT STORES, ETC. OF BOTH APPLICANT AND JOINT APPLICANT. USE SEPARATE SHEET IF NECESSARY.

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Visa/AMEX/MasterCard/Discover Bank Name	Amount Owed	Monthly Payment
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Visa/AMEX/MasterCard/Discover Bank Name	Amount Owed	Monthly Payment
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Automobile Finance Company	Amount Owed	Monthly Payment
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Other Credit Accounts	Amount Owed	Monthly Payment
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I/WE HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT AND ARE GIVEN FOR THE PURPOSE OF OBTAINING CREDIT. THE HISTORIC COLUMBUS FOUNDATION, INC., IS AUTHORIZED TO VERIFY THE STATEMENTS CONTAINED HEREIN. A CREDIT REPORT WILL BE APPLIED FOR BY HCF AND A CREDIT CHECK WILL APPEAR ON YOUR CREDIT REPORT AS AN INQUIRY.

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Applicant Signature	Date
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Applicant Signature	Date
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