



CHARTER OAK
CREDIT UNION

Personal Financial Statement

Business Name of Applicant/Borrower: _____

APPLICANT INFORMATION					
Applicant's Name			D.O.B.		
Present Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other			No. Yrs.		
SSN		Home Phone		Cell Phone	
Driver's License # / State / Expiration Date / Issue Date					
Email Address					
Joint Applicant's Name			D.O.B.		
Present Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other			No. Yrs.		
SSN		Home Phone		Cell Phone	
Driver's License # / State / Expiration Date / Issue Date					
Email Address					

EMPLOYMENT INFORMATION					
Name & Address of Employer			No. Yrs.		
Position/Title		Business Phone		Annual Salary (Verifiable)	
Name & Address of Employer			No. Yrs.		
Position/Title		Business Phone		Annual Salary (Verifiable)	

ASSETS AND LIABILITIES INFORMATION					
Assets			Liabilities		
Cash on Hand and in Banks	Sch. A	\$	Real Estate Mortgages (Primary Residence)	Sch. D	\$
Marketable Securities	Sch. B		Home Equity Loans	Sch. F	
Accounts and Notes Receivable	Sch. C		Auto Loans	Sch. F	
Real Estate Owned (Primary Residence)	Sch. D		Student Loans	Sch. F	
Life Insurance (Cash Surrender Value)	Sch. E		Credit Card Debt	Sch. F	
Real Estate Owned (Other)	Sch. G		Real Estate Mortgages (Other)	Sch. G	
Individual Retirement Accounts (401K)			Accounts and Notes Payable	Sch. F	
Closely-Held Businesses			Other Debt (Please List)	Sch. F	
Automobiles					
Personal Property					
Other Assets					
Total Assets		\$	Total Liabilities		\$

Net Worth (Total Assets – Total Liabilities): \$ _____

CONTINGENT LIABILITIES AND TAX RETURN INFORMATION

Contingent liabilities are those which you legally could be called upon to pay in the future. Should a significant contingent liability ever become a current liability, it could materially change your financial situation. Typically contingent liabilities arise from loans that you have endorsed, co-signed or guaranteed. Unexpired letters of credit could also become actual debts if they are drawn. If damage claims or legal actions have been filed against you, or any partnership of whom you are a general partner, or if you are currently disputing income or other tax payments, adverse court decisions or rulings could have an impact on your ability to repay loans or other obligations.

If you answer "yes" to any questions, please provide details on a separate sheet.

	Applicant		Joint Applicant	
Have (either of) you or any firm in which you were a major owner, ever declared bankruptcy or settled any debts for less than the amounts owed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are (either of) you a defendant in any suit or legal action?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are the tax returns provided to COFCU filed and accepted by the IRS?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are (either of) you a guarantor, co-maker or endorser for any debt of an individual, corporation or partnership?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are (either of) you presently subject to any unsatisfied judgments or tax liens?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are (either of) you liable for any unpaid federal or state taxes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do (either of) you receive alimony?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do (either of) you pay alimony?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Sch A – BANKING INFORMATION

Please attach copy of latest statement(s)

Bank	Account Holder	Account Type	Current Balance
			\$
			\$
			\$
TOTAL:			

Sch B – MARKETABLE SECURITIES/MUTUAL FUNDS

Please attach copy of latest statement(s)

Description	Legal Owner	# of Shares	Cost	Market Value	Pledged?
			\$	\$	
			\$	\$	
TOTAL:				\$	

Sch C – ACCOUNTS AND NOTES RECEIVABLE

Please attach appropriate documentation (if applicable)

Borrower	Secured/Unsecured	Original Amount	Current Balance	Mo. Pmt.
		\$	\$	\$
		\$	\$	\$
TOTAL:		\$	\$	\$

Sch. D – REAL ESTATE OWNED (PRIMARY RESIDENCE)

Legal Owner	Property Address	Mortgage Holder	Mortgage Balance	Monthly Payment	Taxes Escrowed	Insurance Escrowed
					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
			\$	\$	\$	\$

Sch. E – LIFE INSURANCE

Insurance Company	Beneficiary	Term (T) Whole Life (W)	Face Value	Loans Against	Cash Value
			\$	\$	\$
			\$	\$	\$
TOTAL:			\$	\$	\$

Sch. F – ACCOUNTS AND NOTES PAYABLE TO BANKS, CREDIT UNIONS, FINANCIAL INSTITUTIONS, AND OTHERS

Include Investor Notes Payable/Business Debt – list on a separate sheet if necessary

Payee	Secured By	Maturity Date	Original Amount	Current Balance	Monthly Payment
			\$	\$	\$
			\$	\$	\$
TOTAL:			\$	\$	\$

Sch. G – OTHER REAL ESTATE OWNED

	Property 1	Property 2	Property 3	Property 4
Real Estate Entity Name				
% of interest				
Address				
City State Zip				
Property Type (if other specify)	<input type="checkbox"/> Single Fam. <input type="checkbox"/> Multi Fam. <input type="checkbox"/> Land <input type="checkbox"/> Office <input type="checkbox"/> Other _____	<input type="checkbox"/> Single Fam. <input type="checkbox"/> Multi Fam. <input type="checkbox"/> Land <input type="checkbox"/> Office <input type="checkbox"/> Other _____	<input type="checkbox"/> Single Fam. <input type="checkbox"/> Multi Fam. <input type="checkbox"/> Land <input type="checkbox"/> Office <input type="checkbox"/> Other _____	<input type="checkbox"/> Single Fam. <input type="checkbox"/> Multi Fam. <input type="checkbox"/> Land <input type="checkbox"/> Office <input type="checkbox"/> Other _____
Cost	\$ _____	\$ _____	\$ _____	\$ _____
Market Value	\$ _____	\$ _____	\$ _____	\$ _____
Mortgage	\$ _____	\$ _____	\$ _____	\$ _____
Monthly Payment	Amount: \$ _____ Taxes Included? <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No Insurance Included? <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Amount: \$ _____ Taxes Included? <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No Insurance Included? <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Amount: \$ _____ Taxes Included? <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No Insurance Included? <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No	Amount: \$ _____ Taxes Included? <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No Insurance Included? <input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No

The undersigned certifies that both sides hereof and the information inserted therein has been carefully read and is true and complete. The undersigned further represents that there are no encumbrances against any of the foregoing property except those specifically disclosed above. Charter Oak Federal Credit Union is authorized to verify the information disclosed and to perform a credit investigation. The undersigned authorizes Charter Oak Federal Credit Union to give credit information to any credit reporting service and to advise others about its credit experience with the applicant. It is also agreed that the financial statement shall remain the property of Charter Oak Federal Credit Union whether or not credit is granted.

Applicant's Signature	Date	Joint Applicant's Signature	Date

Please Attach All That Apply:

- Current Bank Statement(s)
- Current Brokerage Statement(s)
- Current 401K/IRA Statement(s)
- Business Debt Schedule
- Current Rent Roll(s)
- Other _____