## **LOUISIANA CENTRAL CREDIT UNION**

824 ELMWOOD PARK BLVD., STE 100, HARAHAN, LA 70123 (504) 733-0789 (800) 557-0056

## **2018 HOLIDAY LOAN SPECIAL APPLICATION**

## **\$750 12 MONTHS**

AME MEMBER #			
ADDRESS, CITY, STATE, ZIP			
	PHONE		
		ANNUAL PAY START DATE	
RELATIVE NOT LIVING WITH YOU:			
NAME	NAME		
ADDRESS ADDRESS			
CITY/ST/ZIP	CITY/ST/ZIP_	CITY/ST/ZIP	
PHONE	PHONE	PHONE	
SIGNATURE		DATE	
Your signature authorizes the Credit Union to obtain a control Your signature represents that you are of sufficient age		dit. Loans are approved on the basis of creditworthiness.	
Terms and Conditions			
INCOMPLETE APPLICATIONS WILL NOT	BE PROCESSED.		
<b>APPLICATIONS ARE PROCESSED ON A</b> December 20, 2018. Application Fee = \$10.	•	<b>D BASIS.</b> Applications will be accepted until (Paid at Closing).	
Member must have \$35.00 in the Share/Sa	avings Account at the time o	f Application.	
Payroll Deduction and Credit Life and Dis Member must provide two (2) paystubs th Loan Payment Schedule		• •	
Weekly = \$16.00 Bi-Weekly = \$32.00 Se	mi-Monthly = \$35.00 Monthl	y = \$68.00	
Due to the high volume of response, <b>INQUIF</b>	RIES ABOUT THE STATUS O	F THE LOAN CANNOT BE RETURNED.	
You will be notified by phone or email wh	en approved or declined. R	eason(s) for denial will be mailed.	
For Office Use only			
Date Received Time Recei	ved Pay Stubs	Received	

App Fee Paid\_\_\_\_\_\_ ID Verified\_\_\_\_\_ Employee Initials \_\_\_\_\_