

1.	Refinance Auto:
	a. Current Statement
	b. Copy of Auto Registration
	c. Current Auto Insurance
	d. Copy of Enrollment Card and Driver's license -make sure not expired
2.	Debt Consolidation: Statements must include the following information.
	a. List of creditors, include account number, balance and address.
3.	Loan Application. Sign and Date –Fully filled out with Loan amount and Purpose of Loan
	a. Section D Assets & Debt information
	b. Section E Secured Credit
	c. Per cap Deduction form
	d. Information Release Authorization
4.	Verification of income
	a. Current paystub (most recent two) or
	b. DSHS, General Assistance or SSI award letter if applicable
	ITEMS 5-13 TO BE COMPLETED BY MHA STAFF
<u> </u>	Date Stamp Application
6.	Check Date Application was Signed
7.	Outstanding Debt Request Housing, Credit & Wildlife.
8.	Verify Default (Columbia Bank back to MHA or Current Tribal Credit)
9.	Previous Tribal Credit loans –Debt or Auto- cannot repay credit cards or any other previous loan that has been paid through the program within the last 3 years
10.	Verification of monthly Rent/ Mortgage payments
11 .	. Verification of Money Skills
	Verification of Employment/Income (at least One yr.)
13.	Live within 30-mile radius

Drop off at 38037 158TH Ave SE Auburn - Monday through Friday 8AM-5PM.



MUCKLESHOOT TRIBAL CREDIT PROGRAM

38037 158th Avenue Southeast • Auburn, Washington 98092 Phone: (253) 833-7616 • Fax: (253) 876-2804



Loan Application

Loan ID Number							
Type of Loan Requested:			Type of Credi	it Requested:			
Specify Secured or Unsecured:			Γ	Individual Credit-R	elying solely on my	income or assets.	
				Cosigner			
			Г	Joint			
Amount Requested:							
For How Long:			We inte	and to apply for joi	int credit (initial):		
		Davena	-4 F			Applicant	Co-Applicant
Payment Desired:		Payme	nt Frequency:	Specify Monthly	or other frequency		
Purpose of Loan:							
All or a portion of this loan is being							
	Section	on A - Applicant	nformation				
Name (Last, First, Middle):		Birthdate:			SSN:		
Address(Street/City/State/Zip):					_ County:		
Mailing Address(Street/City/State/Zip):							
Driver's License Number:	Issue Date:		Exp Date:		_ MMN:		
Do you own or rent?	How long?		Number of Depo	endents:		Ages	
Previous Address/If less than 3 years at current address(Street)	City/State/Zip):					How long?	?
Home Phone:	Cell:		E-mail	1			
Employer (Company Name & Address):	17-					How long?	?
Position/Title:	Work Phone:			Mo. :	Salary (Gross/Net):		
Previous Employer Name & Address:						How long	7
Name & Address of nearest relative not living with you:							
Relationship:Teleph	one:						
Sources of Other Income:					Total/Month:		
Alimony, child support, or separate maintenance income need no	· _		considered as a		is obligation.		
If listed, alirmony, child support, separate maintenance received u	inder:	Court Order	ŗ	Written Agrmt.	Г	Oral Agrmt	
Is any income listed in this section likely to be reduced before the If so, explain:	e request is paid off?		٢	Yes T	No		_
Have you previously received credit from us?	Γ _{Yes} Γ	No	If so, when?			- €l	



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Loan Application

Complete only if applying for: (1) joint credit, (2) individ	dual credit when	e applicant is m			operty state,	or (3) individual c	redit rely	ing on income or assets from other
Name (Last, First, Middle):			Birthdate:				SSN:	
Address(Street/City/State/Zip):							County:	
Mailing Address(Street/City/State/Zip):								
Driver's License Number:		Issue Date:		Exp Date:			MMN:	
Do you own or rent?		How long?		Number of Depen	idents:			Ages:
Previous Address/If less than 3 years at current address	(Street/City/Sta	ite/Zip):						How long?
Home Phone:	Cell:			_ E-mail:				
Employer (Company Name & Address):								How long?
Position/Title:		Work Phone:				Mo. Salary (Gro	ss/Net):	
Previous Employer Name & Address:								How long?
Name & Address of nearest relative not living with you:								
Relationship:	Telephone:							
Sources of Other Income:		511				Total/Mon	nth:	
Alimony, child support, or separate maintenance income							· _ ˈ	Q-11
If listed, alimony, child support, separate maintenance rec			Court Order	ا ا	Written Agr		,	Oral Agrmt.
Is any income listed in this section likely to be reduced by If so, explain:	enore the reques	t is paid off?		'	Yes	No		
Have you previously received credit from us?	Г	Yes L.	No	If so, when?				-
Complete only if applicant resides in	a community pa		ction C - Marit s relying on prope		a state as a	basis for repayme	ent of the	credit requested.
Applicant: Company Com	Married Married	۲ ۲	Separated Separated			(including single, (including single,		· ·



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Loan Application

Section D - Asset & Debt Information

This section should include information for the applicant and any joint applicant sharing the same assets and liabilities. Please complete a *separate* "Section D - Asset & Debt Information" form for any *separately* owned assets and liabilities.

	Assets Owned (attach	a separate sheet if necessary)		
Asset Type	Account Name(s)	Description	Total Value	Subject to Debt?(Y/N)
Checking (show where held and account numbers)				
Savings (show where held and account numbers)				
CDs (show where held and account numbers)				
Securities (show issuer/type/# shares)				
Real Estate (show location/date acquired)				
Life Insurance (show issuer/face value)				
Automobiles (show make/model/year)				
Other (list)		D-2-10		
Other (list)		- Next - Community		
Other (list)				
		Total Assets	\$0	



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Loan Application

continued, Section D - Asset & Debt Information

This section should include information for the applicant and any joint applicant sharing the same assets and liabilities. Please complete a separate "Section D - Asset & Debt Information" form for any separately owned assets and liabilities.

Please complete a separate "Section	n D - Asset & Debt Informat	tion" form for any separ	ately owned	assets and li	abilities.
Outstanding Debts (Include charge accounts, in	stallment contracts, credit cards,	rent, mortgages and other ob	ligations. Use	separate shee	t if necessary.)
Name of Creditor	Account Number	Account Name	Original Amount (Omit Rent)	Present Balance (Omit Rent)	Monthly Payment
Landlord /Mortgage Holder	Rent				
<u> </u>					
					=====
		-			
		Total Debts	\$0	\$0	\$0
Complete the following inf	formation about both the Applica	ant and Joint Applicant or Oth	er Person (if a	pplicable):	
			_	_	
Are you a United States Citizen? Appli	cant T Yes T No	Joint Applicant	Yes	No	
Are you a permanent resident alien? Appli	cant T Yes T No	Joint Applicant	r Yes	┌ No	
Are you obligated to make Alimony, Support or		Joint	_ ,	F	
Maintenance payments?	Applicant \(\begin{array}{cccc} Yes \\ & & \end{array} \)	No Applicant	Yes	No	
If yes, to (name and address):			Amou	int per month:	
Are you a co-maker, endorser, or guarantor on any loan or contract?	Applicant	Γ No	Joint Applicant	┌ Yes	Γ No
	принаме у		присан	, ,,,,	,
If yes, for whom?		To whom?			
Are there any unsatisfied judgements against you?	Applicant	┌ No	Joint Applicant	r Yes	r No
	cippinant. 103				
If yes, to whom owed?			_ Amount:		III
Have you been declared bankrupt in the last 10 years?	Applicant Yes	┌ No	Joint Applicant	Yes	r No
	- FF.				
If yes, where?			Year:		



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Loan Application

Section E - Secured Cred	dit
Complete this section only if credit is to be secured. Briefly describe the p	property to be given as security. Provide information
on insurance for that prop	perty.
Property Description:	
Names & Addresses of all co-owners of the property:	
If the security is real estate, give the full name of your spouse (if	
married):	
Insurance Information	n
Insurance Company:	
Agent Name:	Phone:
Policy #:	Effective Dates:
For MTCP Official Use Only Date Verified:	Verified By:
-	



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Applicant's Signature(s)

I/We hereby apply for the loan or credit described in this application. I/We certify that I/we made no misrepresentations in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose.

Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account.

I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations and authorizations extend not only to Lender, but also to any insurer of the loan and to any investor to whom Lender may sell all or any part of the loan.

I/We further authorize Lender to provide to any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

Loan Applicant Signature	Printed Name	Date
Co-Applicant Signature	Printed Name	Date
Aut	comatic Payment Authorization	
I/We understand and agree that Loan payments through my/our Payroll within one month of Loa	for Applicants employed by Tribal Entities will be automat in approval.	ically processed
Loan Applicant Signature	Printed Name	Date
Co-Applicant Signature	Printed Name	Date



Secured Loan Number

MUCKLESHOOT HOUSING AUTHORITY

MUCKLESHOOT TRIBAL CREDIT PROGRAM

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Per Capita Deduction Authorization

In order to pay off my Tribal Credit Loan, I hereby authorize and request the Muckleshoot Tribe's Finance Department to withhold the below specified percentage from my Per Capita until paid in full and a written notice has been received from the Muckleshoot Tribal Credit Program's Officials.

❖ 50 % of my Per Capita will be deducted in March, June, September, and December until further written notice

I understand that the Finance Department will deduct said funds and forward a deposit to The Muckleshoot Housing Authority, who will apply this deposit toward my unpaid balance to the Muckleshoot Tribal Credit Program.

Loan Balance

Loan Applicant Signature	Printed Name Date
Effective Date:	
Address: Street	Address: City, State, Zip
SSN	Muckleshoot Enrollment Number
Unsecured Loan Number	Loan Balance



MUCKLESHOOT TRIBAL CREDIT PROGRAM

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Information Release Authorization

Co-Applicant Signature	
Loan Applicant Signature	Date
Loop Ameliant Signature	
I have read, understand, and agree to the above condi	tions.
Information regarding my loan status and payment his	story will be shared with other Programs within the Tribe.
Records and information received will be used when d These records will be maintained as permanent record	etermining my eligibility for the Muckleshoot Tribal Credit Program is at the Muckleshoot Tribal Credit Office.
	w Committee may receive information from others about me/us.
Any information obtained will be used by MTCP and Lo	oan Review Committee for purposes related to the loan program.
 Perform credit checks on my credit history Collect and verify information regarding my enprogram including but not limited to Scholarsh 	nployment, residential history or participation in any other Tribal nip, Education, Resource Center, Housing, Home Loan, etc. o the processing of my loan application to ensure compliance with t
I hereby authorize the Muckleshoot Tribal Credit Progr 1. Collect and verify loan application information	•
Work/Message Phone	Muckleshoot Enrollment Number
Home Phone	Social Security Number
	City, State, Lip
Street Address	City, State, Zip
Co-Applicant's Name	Date of Birth