

Crou\$e Federal Credit Union

730 South Crouse Ave
Syracuse, NY 13210
315-470-7928 www.crousefcu.com

SUPPLEMENT TO SECURED LOAN APPLICATION

Member Name: _____ Date: _____
Account Number: _____

DESCRIPTION OF COLLATERAL

Year _____ Make _____ Model _____ Body Style _____
Mileage _____ VIN# _____
Options (ex: sunroof, leather seats etc.) _____

PLEASE CHECK ONE

- _____ Purchase from a dealer. (Complete parts 1 and 4)
_____ Purchase from a private party. (Complete parts 2, 3, 4 and 5)
_____ Transfer loan to the credit union. (Complete parts 3 and 4)
_____ Title as security (other than purchase) (Complete parts 4 and 5)

Part 1 - DEALER PURCHASE

- New - Attach listing showing the type of vehicle with optional equipment (window sticker).
Used - Attach purchase order showing the type of vehicle with VIN number.

Part 2 - PRIVATE PARTY PURCHASE: ATTACH BILL OF SALE

Seller's Name _____ Address _____
City _____ State _____ Zip _____ Phone #() _____

Part 3 - AUTO IS FINANCED AT:

Financial Institution _____ Address _____
City _____ State _____ Zip _____ Phone #() _____
Account # _____ Call your Bank/Credit Union for 10 day pay off _____

Part 4 - TITLE WILL BE IN THE NAME (OR NAMES) OF:

(Signature required on final paperwork of joint owner)

Part 5 - COPY OF TITLE (Original title is required for if transferring loan to the credit union)

Registration name : _____

Plate # : _____

Miles driven per year: _____

Copy of signed purchase agreement

Copy of contract from current lender