

Guarantor Application

Required Documents for Guarantor:

Most recent 1040 (first two pages) or tax transcript. W-2 NOT accepted

Proof of all income you would like to claim – most recent paystubs (2), award letter, child support, etc.

Guarantor acknowledgment of responsibility

HFLA is considering an application for ______ (Applicant) for an interest free loan for which you will sign a guaranty. If the loan is approved, it will be conditioned on your responsibility to repay any part of the debt if it is not paid by the borrower.

Please complete all the forms below and sign and return a copy of this letter as evidence of your understanding of your responsibility for this obligation.

Printed Name:

Signature: _____

Date: _____

Completed applications may be submitted through email, fax, or mail. If necessary, in **person by appointment only** at our office. See our contact information below.

23300 Chagrin Blvd. Suite 204, Beachwood, OH 44122 Call: 216-378-9042 | Fax: 216-378-9007 team@interestfree.org



Guarantor Loan Application

Standard Loan Applicant Name:

Guarantor's Last Name		First Name			
Previous Name(s) if Applicable		Gender: [] Female [] Male [] Nonbinary/Gender nonconforming Pronouns:			
Date of Birth(MM/DD/YYYY)		Social Security #			
Phone #(s)	En		Best way and time to reach you		
Address	City	Postal (Zip) Code	# Years at address # Years in Ohio		
Previous Address	City	Postal (Zip) Code	# Years at address		
Current Employer		Occupation/Title	# Years at job		
Employer Address		Employer Phone	#		
Marital Status: [] Single [] Married	[] Divorced	[] Separated	[] Widow/Widower [] Spouse/partner		
Household Type: [] 2 Parent Household [] Single Parent Household [] Single Adult [] 2 or more adults (no dependents in					
home) Number of dependents					
Do you rent or own (please pick one): [] Rent [] Own [] Lives with Relatives					
Relationship to Applicant:					

Spouse Section	
Spouse's Last name	First Name
Gender [] Female [] Male [] Nonbinary/Gender nonconfo	ming
Phone #(s)	Email Best way and time to reach you
Address (if different from other applicant) City	Postal (Zip) Code
Current Employer	Occupation/Title # Years at job
Employer Address	Employer #

NET MONTHLY INCOME (AFTER TAXES)	GUARANTOR	SPOUSE/PARTNER
Salary / Commission	\$	\$
Soc Sec / Disability / Workers Comp	\$	\$
Retirement / Pension Benefits	\$	\$
Child Support / Alimony	\$	\$
Other Income: Type?	\$	\$
	₽ \$	Ψ
TOTAL MONTHLY INCOME		
Monthly Bills		
Rent/Mortgage		
2nd Mortgage/Home Equity Loan		
Property Taxes (if not included in mortgage)		
Homeowner's Association Fees		
Utilities (electric, gas, water, sewer)		
Cell Phone/Home Phone		
Internet/Cable		+
Subscription Services		
Car Payment		
Public Transportation		
Gasoline Healthcare Premium (if not taken out of pay)		
Medical/Dental Bill Pymt. Plan		
Daycare/Babysitter (monthly)		
Before/Aftercare (monthly)		
Auto Insurance		
Homeowner's Insurance (if not included in mtg.)		
Life Insurance		
Other:		
Monthly Necessities		
Food (Groceries)		
Food (restaurants, takeout, food delivery)		
General Shopping (clothing, household items, toiletries, etc) Personal Care (grooming, hair salon, etc)		
Personal Care (grooming, nair salon, etc) Pet Care		
Prescriptions	_	
Other: Debts		
	1	
Total minimum monthly credit card payments Fotal minimum monthly student loan payments		
Total minimum monthly personal loan payments		
Taxes		1
Income Taxes		
Business Taxes/Addt'l Real Estate Taxes (ex: rental prop.)		
Other		-
Extra curricular lessons (swim, dance, sports)		
School Supplies		
Tuition		-
Recurring donations/tithes		-
Entertainment/Recreation Other:		
Long-term Saving Goals		
Total Monthly Net Income (for the household)		-1
Monthly Expenses		_
Remainder		1

Do your budget categories match your account spending? [] Yes [] No Does your budget show that you can afford repayments to HFLA? [] Yes [] No

HFLA FINANCIAL QUESTIONNAIRE

Please answer ALL questions on this page

TAX ISSUES		3~				
Do you or your spouse/partner have any un-filed t	ax returns? [] Yes [] No If yes, p	blease explain below				
Do you or your spouse/partner owe any amounts	for taxes? [] Yes [] No If Yes, for w	hich year(s)?				
Amount(s) owed: \$ Have you established a payment plan? [] Yes [] No						
Please explain:						
LEGAL ISSUES						
Are you or your spouse/partner being sued by any	/one? [] Yes [] No If Yes, please	explain below				
Amount: \$ Reason:						
Are you in the process of or planning to file for div	orce? [] Yes [] No					
Please explain:						
BANKRUPTCY FILING						
Have you or your spouse filed for bankruptcy in th	e past? [] Yes [] No If Yes, Type of E	Bankruptcy Filed:				
Year Filed:						
Are you or your spouse/partner in the process of c	or planning to file for bankruptcy? [] Y	/es [] No				
If yes, please explain:						
HOUSING						
If Mortgage: Mortgage Servicer	Year Purchased					
Home Purchase Price \$	Current Value \$					
Unpaid Mortgage Balance \$	Monthly Mortgage Payment \$					
axes/Insurance Included [] Yes [] No If not included: Tax Payment \$		Insurance Payment \$				
If Renting: Name of Landlord	Monthly rent \$	Term of lease				
DEBTS & ASSESTS						
Vehicle Year	Make	Model				
Balance of loan \$	Monthly payments \$	Loan Servicer				
Do you have any payday loans outstanding? [] Y	es [] No If yes, amount owed: \$					
Available Assets						
Cash & Investment Assets (e.g. stocks, cash, inve	estments)					
Other Assets (e.g. vacation property)						
Assets in Other countries (include all details)						
Additional Information						
Did you apply to a bank or other sources for a loa	n? [] Yes [] No If not, why not?					
If you were denied for a loan, please provide a copy of the denial letter and state the reason for the decline:						

Guarantor Signature

Date ____



Privacy and Disclosures

The information in this application is for the purpose of obtaining credit and you are warranting and representing that it is true and correct. In signing this document, any borrower, cosigner, or guarantor agrees to pay all bills upon receipt or statement or as otherwise expressly agreed.

By submitting this application, <u>you authorize HFLA of Northeast Ohio (HFLA) to obtain credit reports in connection</u> <u>with this application</u>, modification of any loan received, or as needed, by HFLA. Upon request, we will advise you of the name and address of any agency furnishing the report. You, the borrower and any co-borrower, also authorize anyone named in this application or referenced on any credit report (including any co-signers, guarantors, employers or references) to verify any information given in this application or on the credit report.

HFLA collects nonpublic personal information about you, the borrower and any co-borrower, co-signer(s), or guarantor(s). We restrict access to your personal information to process the loan application and collect loan payments. We maintain procedural, physical and electronic safeguards to guard your nonpublic personal information. We do not disclose any nonpublic personal information about you to anyone, except as permitted or required by law. We will continue to adhere to the privacy policies and practices as described in this notice even after you satisfy your loan obligation to us. Your confidence in us is important and we want you to know that your personal information is protected. If you have any questions or concerns, please contact us.

Through Credit Builder's Alliance, HFLA is able assist its borrowers build a positive credit history, by offering you the option of having your loan payments reported to the credit bureaus. We can also provide referrals to various nonprofits that offer free credit counseling. It is important to note that if you default on your loan, it will be reported as a delinquent account on your, your co-borrower's, and guarantor(s)/cosigner(s)' credit reports, regardless of your participation in the credit building program.

By signing this form, you certify that the information you provide in the application is true, and that you agree with HFLA's aforementioned policies.

Guarantor Signature

Date _____