

Guarantor Application

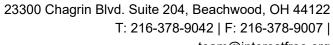
Required Documents for Guarantor:

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 (Appl for an interest free loan for which you will sign a guaranty. If the loan is approit will be conditioned on your responsibility to repay any part of the debt if it not paid by the borrower.	oved
Please complete all the forms below and sign and return a copy of this letter evidence of your understanding of your responsibility for this obligation.	as
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





team@interestfree.org

Guarantor Loan Application				
Standard Loan Applicant Name:				
Guarantor's Last Name		First Name		
Previous Name(s) if Applicable		Gender: [] Female Pronouns:	[] Male [] Nonbinary/Gender nonconforming	
Date of Birth(MM/DD/YYYY)		Social Security #		
Phone #(s)		Email	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	s with Relatives		
Relationship to Applicant:				
Spouse Section				
Spouse's Last name		First Name		
Gender [] Female [] Male [] No	nbinary/Gender nonco	nforming		
Phone #(s)		Email	Best way and time to reach you	
Address (if different from other application	nt) City	Postal (Zip) Code		
Current Employer		Occupation/Title	# Years at job	
Employer Address		Employer #		

HOUSEHOLD BUDGET		
NET MONTHLY INCOME (AFTER TAXES)	BORROWER	CO/SPOUSE/PARTNER
Salary / Commission	\$	\$
Soc Sec / Disability / Workers Comp	\$	\$
Retirement / Pension Benefits	\$	\$
Child Support / Alimony	\$	\$
Other Income: Type?	\$	\$
TOTAL MONTHLY	\$	7
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	T	
Food (Groceries)		1
Food (restaurants, takeout, food delivery) General Shopping (clothing, household items, toiletries, etc)		
Personal Care (grooming, hair salon, etc)		
Pet Care		
Prescriptions		
Other:		
Debts		
Total minimum monthly credit card payments		
Total 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	Т	T
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		1
Remainder		

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		
Do you or your spouse/partner l	have any un-filed tax returns? [] Yes [] No	If yes, please explain below
Do you or your spouse/partner	owe any amounts for taxes? [] Yes [] No	If yes, for which year(s)?
Amount(s) owed: \$	Have you established a payment plan? [] Y	res[]No
Please explain::		
LEGAL ISSUES		
Are you or your spouse/partner	being sued by anyone? [] Yes [] No If ye	es, please explain below
Amount: \$	Reason:	
Are you in the process of or plan	nning to file for divorcee? [] Yes [] No	
Please explain::		
BANKRUPTCY FILING:		
Have you or your spouse filed fo	or bankruptcy in the past?[]Yes[]No If yes,	Type of bankruptcy filed::
Year Filed:		
Are you or your spouse/partner	in the process of or planning to file for bankrup	ptcy? [] Yes [] No
If yes, please explain::		
HOUSING		
If Mortgage: Mortgage Servicer	f Mortgage: Mortgage Servicer Year Purchased	
Home Purchase Price \$		
Unpaid Mortgage Balance \$	aid Mortgage Balance \$ Monthly Mortgage Payment \$	
Taxes/Insurance Included [] Ye	es [] No If not included:: Tax Payment \$	Insurance Payment \$
If Renting: Name of Landlord	Monthly rent	\$ Term of lease
DEBTS & ASSETS		
Vehicle Year	Make	Model
Balance of loan \$	Monthly paym	nents \$ Loan Servicer
Do you have any payday loans	outstanding? [] Yes [] No If yes, amount ow	wed:: \$
Available Assets		
Cash & Investment Assets (e.g.	. stocks, cash, investments)	
Other Assets (e.g. vacation prop	perty)	
Assets in Other countries (include	de all details)	
Additional Information		
Did you apply to a bank or other	r sources for a loan [] Yes [] No If not, why no	ot?
If you were denied for a loan, pl	lease provide a copy of the denial letter and sta	ate the reason for the decline::



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 with this application</u>, modification of any loan received, or as deemed necessary, 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.

Borrower Signature:	Date:	
Co-Borrower Signature:	Date:	