



FAST Loan Application
Family Assistance Short Term

Member Number		
Member Name	Amount Requested	
Street (Physical Address)		
City/State/Zip		
Home Phone	Date of Birth	
Social Security Number		
Driver's License Number/State ID Number		
Employer		
Work Phone	Date of Next Payday	Pay Frequency:
		___ Weekly ___ Bi-Weekly
		___ Monthly ___ Other
Hire Date: ____ / ____ / ____		
<p>PLEASE READ BEFORE SIGNING</p> <ol style="list-style-type: none"> 1) I understand that I will be charged a non-refundable application fee of \$35.00 for this request. 2) I understand that I will be charged an Annual Percentage Rate (APR) of 19.50%. 3) I further understand that UPS Employees Federal Credit Union may obtain a credit report for this advance. 4) I authorize the withdrawal for payment from my share account on my next payday. 5) No prepayment penalties. 6) This loan is due in its entirety no later than _____. 		
Member Signature _____		Date _____