

COVID-19 EMERGENCY FAST FIVE LOAN REQUEST



COVID-19 EMERGENCY FAST FIVE LOAN LOAN PROMOTION TERMS

Amount: **\$500.00**

Interest Rate: **10.99%**

Payment: **\$26.00** (bi-weekly) or **\$55.00** (monthly)

COMPLETE, PRINT, MAIL OR FAX

Mail to:
Nova Credit Union
3601 Mulberry Church Road
Charlotte, NC 28208

Fax to:
(704) 392-4489

MEMBER INFORMATION Please print or type, completing all information.

Last Name	First Name	Middle Initial	Account Number
Social Security Number	Home Phone Number	Mobile Phone Number	Email Address

DEBT PROTECTION

YOU ELECT THE FOLLOWING OPTION Check only one box.

<input type="checkbox"/> LIFE PLUS DISABILITY AND UNEMPLOYMENT · Life Plus · Involuntary · Disability · Unemployment Program Fee (rate per \$100 of the monthly outstanding loan Balance): Single – \$0.350	<input type="checkbox"/> LIFE PLUS DISABILITY · Life Plus · Disability Program Fee (rate per \$100 of the monthly outstanding loan Balance): Single – \$0.305	<input type="checkbox"/> LIFE PLUS · Life Plus Program Fee (rate per \$100 of the monthly outstanding loan Balance): Single – \$0.085	<input type="checkbox"/> NO PROTECTION
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ELIGIBILITY QUESTION

Are you actively working, for wages or profit, for 25 hours or more per week on the date you sign this Contract? **YES** **NO**

You will be considered actively working if you are absent from work due to sabbatical, strike, or vacation, but will soon return to work. You will not be considered actively working if you are on an Annual, Regularly Scheduled or Seasonal Layoff, Medical or Disability leave.

If You answered "No" to the question, you are not eligible for options that include Involuntary Unemployment protection.

IMPORTANT NOTICES:

- Protection is voluntary and not required to obtain credit. We will not consider whether or not you elect protection in making a credit decision.
- We reserve the right to refuse your purchase of the protection
- In the Contract, the term "You" or "Your" mean the Borrower(s) and "We," "Us," or "Our" mean the Creditor.
- The Contract contains terms and conditions which may limit or exclude benefits.
- You may not qualify for all benefits.
- Protection is limited to a maximum of \$75,000. You will not be charged a Program Fee on any amount greater than this maximum.
- Protection for Life Plus protection will be reduced at the end of the month during which You reach Your 70th birthday.
- The Contract contains the conditions upon which We will cancel all or a portion of the Protected Balance and/or cancel the Protected Payment and the Program Fee. The terms and conditions which explain how We will cancel all or a part of Your Protected Balance are provided in the Contract.
- The Contract replaces all credit insurance policies and/or certificates, similar payment protection plans, and program contracts You previously entered into with respect to the Loan.
- Please read the Contract in its entirety. You are bound by the terms and conditions of the Contract.

Your signature or authentication below means: (a) that You meet the eligibility requirements shown above; (b) that Your election above will remain in effect, according to the terms of the Contract, unless subsequently modified; (c) that You agree that You have received and thoroughly read the Contract; (d) that You agree to pay for and, where applicable, let Us add the Program Fee to Your Loan balance each month, which would subject the Program Fee to finance charges like the rest of Your Outstanding Balance; (e) that the fee You are charged for this protection is subject to change; and (f) if the "No Protection" checkbox is marked or if no checkbox is marked in the Options section, You do not have protection.

SIGNATURE

By signing below, You agree to the above COVID-19 Emergency Fast Five Loan Promotion Terms and the terms of the LoanLiner® Loan and Security Agreements and Disclosure Statement.

Member's Signature	Date
X	

Upon approval, funds will be deposited into the member's Savings or Checking account. Receipts and copies of the note will be mailed upon completion of the loan.