



FAST Loan Application
Family Assistance Short Term I

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: <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other
Hire Date: _____ / _____ / _____		
PLEASE READ BEFORE SIGNING		
1) I understand that I will be charged a non-refundable application fee of \$20 for this request. 2) I understand that I will be charged an Annual Percentage Rate (APR) of 28%. 3) Repayment term 6 months. 4) 2 years verified employment history with same employer 5) 2 current pay-stubs not older than 30 days 6) I further understand that UPS EMPLOYEES FEDERAL CREDIT UNION may obtain a credit report for this advance. 7) I authorize the withdrawal for payment from my share account on my next payday. 8) No prepayment penalties. 9) This loan is due in its entirety no later than _____.		
Member Signature _____		Date _____