



Assistive Technology Loan Application

Loan Application Instructions

Please review the guidelines below before completing your application.

1. If you are married, include your combined household information on the financial information form. If you are married and a resident of Washington or Idaho, your spouse **must** be listed as a co-applicant.
2. If you have a co-signer or guarantor, both you and the co-signer should complete a financial information form.
3. Please make sure that your application is filled out completely, signed, and dated.
4. Please include the requested attachments:
 - a. An invoice, bid or other information showing cost of item together with description of the equipment or services to be provided, if available.
 - b. Verification of Income - most recent pay stub or a current award letter.
 - c. Most recent 3 months bank statements. They must have your full name, be dated, and not have any transactions crossed out or lined through.
 - d. Identity documentation such as a copy of your driver's license, passport, or other identification card.

If you have any questions, please contact us at (206) 328-5116. Our office can also be reached at: (877) 428-5116 (Toll-Free) or (888) 808-8942 (TTY).

Northwest Access Fund will conduct a credit check on each applicant.

RETURN COMPLETED APPLICATION TO:

**NORTHWEST ACCESS FUND
PO Box 55759
Shoreline, WA 98155**

Email: info@nwaccessfund.org

FAX: (206) 328-5126

FACTS

WHAT DOES NORTHWEST ACCESS FUND DO WITH YOUR PERSONAL INFORMATION?

Why?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number and income
- Account balances and payment history
- Credit history and credit scores

When you are *no longer* our customer, we continue to share your information as described in this notice.

How?

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Northwest Access Fund (NWAf) chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does NWAf share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes— to offer our products and services to you	Yes	Yes
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes— information about your transactions and experiences	No	We don't share
For our affiliates' everyday business purposes— information about your creditworthiness	No	We don't share
For nonaffiliates to market to you	No	We don't share

Questions?

Call 206.328.5116 or go to: info@nwaccessfund.org

What we do

How does NWAFF protect my personal information?

To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.

How does NWAFF collect my personal information?

We collect your personal information, for example, when you

- apply for a loan
- provide persons or organization names on your application
- conduct transactions with us or our affiliates

We also collect your personal information from others, such as credit bureaus and other companies.

Why can't I limit all sharing?

Federal law gives you the right to limit only

- sharing for affiliates' everyday business purposes—information about your creditworthiness
- affiliates from using your information to market to you
- sharing for nonaffiliates to market to you

State laws and individual companies may give you additional rights to limit sharing.

Definitions

Affiliates

Companies related by common ownership or control. They can be financial and nonfinancial companies.

- *NWAFF does not share with affiliates so they can market to you*

Nonaffiliates

Companies not related by common ownership or control. They can be financial and nonfinancial companies.

- *NWAFF does not share with nonaffiliates so they can market to you*

Joint marketing

A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

- *NWAFF does not share with nonaffiliated financial companies so they can market to you*

Other important information

Do Not Track Disclosures. Certain web browsers offer a "Do Not Track" (DNT) option that permits users to select a preference not to have information about web browsing activities monitored and collected. Our website will not honor DNT signals from you and we will not monitor or collect information of your browsing activity.

Telling Your Story

We may use "your story" (for example, why you needed a loan, what equipment or technology you purchased and how it impacted your life) to explain and market our program to other borrowers and contributors. However, we will not identify you by name unless you give us permission to do so. **If you do not wish to have your story told, please let us know at the time of your application.** It will not affect loan eligibility.

PART I

NORTHWEST ACCESS FUND ASSISTIVE TECHNOLOGY APPLICATION

Applicant Information

Applicant 1

Name: _____
Birthdate: _____
SSN: _____
Address 1: _____
Address 2: _____
City: _____
State: _____
Zip: _____
Phone: _____
Alternate Phone: _____
Email: _____
Preferred contact method: _____

Applicant 2

Name: _____
Birthdate: _____
SSN: _____
Address 1: _____
Address 2: _____
City: _____
State: _____
Zip: _____
Phone: _____
Alternate Phone: _____
Email: _____
Preferred contact method: _____
Relationship to Applicant 1: _____

What Assistive Technology (AT) item(s) do you want to purchase with this loan?

Please list the total cost of each item, including accessories, extended warranties, shipping, and taxes.

Item 1: _____	Total Cost: \$ _____
Item 2: _____	Total Cost: \$ _____
Item 3: _____	Total Cost: \$ _____

How much would you like to borrow from Northwest Access Fund? \$ _____

What vendor/company do you wish to purchase from? _____

Please include a quote for the item(s), if available.

Who will be using the AT? ☐ Applicant 1 ☐ Applicant 2
☐ Other – please list:

Name: _____ Birthday (MM/DD/YYYY): ____/____/____
Relationship to borrower(s): _____

What disability or health condition will the AT help with? _____

How did you hear about Northwest Access Fund? _____

PART II

FINANCIAL INFORMATION FORM

Type of Credit Requested:

☐ Individual Account ☐ Joint Account with Spouse ☐ Joint Account with another person

Are you married?

☐ Yes ☐ No

Please note: if you are married and are a Washington or Idaho resident, you must apply for a Joint Account with Spouse.

If you are married, please include combined household information for both you and your spouse on this form, even if you are not relying on the spouse's income to repay this loan.

Sources of Income

- ☐ Net / "Take Home" Employment Wages:
- ☐ Net / "Take Home" Self-Employment:
- ☐ Social Security:
- ☐ SSI:
- ☐ SSDI:
- ☐ Other Public Assistance (GAU, TANF, etc.):
- ☐ Pension/401K/Retirement:
- ☐ Savings/Investments:
- ☐ Trust:
- ☐ Food Stamps:
- ☐ Other Income* (Describe): _____

Applicant 1

Applicant 2

\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____

* Income from alimony, child support, or separate maintenance payments need not be revealed if you do not wish us to consider it.

Net / "Take Home" Monthly Household Income

\$ _____ (A)

Do you have any dependents?

☐ Yes – If so: How many? _____

What are their ages? _____

☐ No

Applicant 1 Employment (if applicable):

Position: _____

Company Name: _____

Supervisor's Name: _____

Phone: _____

Email: _____

Address: _____

How long have you been at this job? _____

Applicant 2 Employment (if applicable):

Position: _____

Company Name: _____

Supervisor's Name: _____

Phone: _____

Email: _____

Address: _____

How long have you been at this job? _____

Assets

Checking Account / Cash on Hand: \$ _____

Savings Account: \$ _____

IRA/Retirement Accounts: \$ _____

Stocks, Investments: \$ _____

Real Estate:

Home: _____ \$ _____
Address Appraised Value

Other: _____ \$ _____
Address Appraised Value

Personal Property (e.g., cars, boats, RV's)

Year, Make, Model: _____ \$ _____ (Current Value)

Year, Make, Model: _____ \$ _____ (Current Value)

Year, Make, Model: _____ \$ _____ (Current Value)

Year, Make, Model: _____ \$ _____ (Current Value)

Year, Make, Model: _____ \$ _____ (Current Value)

Other Assets (Please Describe): \$ _____

Debts

Mortgage(s) : _____ \$ _____ \$ _____
Creditor Balance Monthly

Mortgage(s) : _____ \$ _____ \$ _____
Creditor Balance Monthly

Car(1) : _____ \$ _____ \$ _____
Creditor Balance Monthly

Car(2) : _____ \$ _____ \$ _____
Creditor Balance Monthly

Student _____ \$ _____ \$ _____
Loans: Creditor Balance Monthly

Credit Cards Total Owed: \$ _____
Total Monthly Payment: \$ _____

Personal Loans / Other Debts (describe):

Balance: \$ _____
Monthly Payment: \$ _____

PART III
BUDGET WORKSHEET
Basic *MONTHLY* Expenses

Residential Expenses

Rent	\$ _____
Mortgage Payment	\$ _____
Homeowners/Renters Insurance	\$ _____
Homeowner Association Dues	\$ _____
Utilities	\$ _____
Property Taxes	\$ _____
Other Residential Expenses: _____	\$ _____

Transportation Expenses

Car Payment	\$ _____
Gas, Car Maintenance & Repair	\$ _____
Car Insurance	\$ _____
Public Transportation	\$ _____
Other Transportation Costs: _____	\$ _____

Insurance/Medical Expenses

Health/ Life Insurance	\$ _____
Unsubsidized Medical Expenses	\$ _____
Dental Expenses/ Insurance	\$ _____
Glasses/Contacts	\$ _____
Prescriptions	\$ _____
Other Medical Expenses: _____	\$ _____

Essential Expenses

Food	\$ _____
Household Products (toiletries, cleaning supplies, etc.)	\$ _____
Clothing	\$ _____
Haircuts	\$ _____
Child Care	\$ _____
Pet/ Service Animal Care	\$ _____

Entertainment Expenses

Dining Out	\$ _____
Cigarettes & Alcohol	\$ _____
Hobbies	\$ _____
Video Rentals, Movies & Streaming Services	\$ _____
Birthday & Holiday Presents	\$ _____

Communication Expenses

Cable / Internet / Home Phone \$ _____
Cell Phone \$ _____

Other Monthly Expenses

Charitable Contributions/Memberships \$ _____
Travel \$ _____
Monthly Credit Card Payment \$ _____
Student Loans \$ _____
Other Expenses: _____ \$ _____

(B) Total Expenses \$ _____

(A) Total Net Income (From Page 5) \$ _____

Dollars Available for Loan Repayment (Net Income [A] – Total Expenses [B])
\$ _____

What dollar amount would you like your monthly loan payment to be? \$ _____

PART IV OTHER INFORMATION:

Have you ever declared bankruptcy?

- ☐ No
☐ Yes. If yes, please describe circumstances below or on a separate sheet of paper.

Are you a co-signer, co-maker or endorser on a note?

- ☐ No
☐ Yes. If yes, please describe circumstances below or on a separate sheet of paper.

Are you the defendant in a legal action or are there any outstanding judgments against you?

- ☐ No
☐ Yes. If yes, please describe circumstances below or on a separate sheet of paper.

DEMOGRAPHIC INFORMATION

This background information helps us to determine who we are serving. We are requesting this information in accordance with the Equal Credit Opportunity Act and the requirements of the regulatory agencies. Providing the information is voluntary and it will **not** in any way be a factor in the application approval process.

Applicant 1

Gender:

- ☐ Male
- ☐ Female
- ☐ Another Gender

Are you of Hispanic or Latino origin?

- ☐ Yes
- ☐ No

Racial Background (please check all that apply):

- ☐ White / Caucasian
- ☐ Asian / Asian American
- ☐ Black / African American / Caribbean
- ☐ Native American
- ☐ Native Hawaiian
- ☐ Native Alaskan
- ☐ Pacific Islander
- ☐ Other: _____

Housing Status:

- ☐ Rent
- ☐ Subsidized Rental Unit / Section 8
- ☐ Own Home or Condo
- ☐ Other (Please describe):

Are you a Veteran of the U.S. Armed Forces?

- ☐ Yes
- ☐ No

Dependent Status:

- ☐ Single with no dependent children
- ☐ Single with dependent children
- ☐ Married with no dependent children
- ☐ Married with dependent children

Applicant 2

Gender:

- ☐ Male
- ☐ Female
- ☐ Another Gender

Are you of Hispanic or Latino origin?

- ☐ Yes
- ☐ No

Racial Background (please check all that apply):

- ☐ White / Caucasian
- ☐ Asian / Asian American
- ☐ Black / African American / Caribbean
- ☐ Native American
- ☐ Native Hawaiian
- ☐ Native Alaskan
- ☐ Pacific Islander
- ☐ Other: _____

Housing Status:

- ☐ Rent
- ☐ Subsidized Rental Unit / Section 8
- ☐ Own Home or Condo
- ☐ Other (Please describe):

Are you a Veteran of the U.S. Armed Forces?

- ☐ Yes
- ☐ No

Dependent Status:

- ☐ Single with no dependent children
- ☐ Single with dependent children
- ☐ Married with no dependent children
- ☐ Married with dependent children

AUTHORIZATION/CERTIFICATION

I certify that the information provided in this application is true and correct to the best of my knowledge. Authorization is hereby given for the release of any and all information concerning bank accounts, employment, credit or mortgage verification as requested by Northwest Access Fund. I understand that Northwest Access Fund may need to contact other agencies and individuals to determine my eligibility and to verify my need for the support for which I am applying. I authorize the release of such confidential information.

Signature of Applicant #1

Date

Signature of Applicant #2

Date

If anyone assisted with your application, please give their contact information here:

Name: _____

Phone Number: _____

Email: _____

Application Checklist

To aid us in processing your application, please ensure that you have done the following:

- ☐ Filled out the application as fully as possible.
- ☐ Included a quote from the service provider / vendor if available.
- ☐ Included verification of your income.
- ☐ Included 3 most recent bank statements.
- ☐ Included a copy of your identification.
- ☐ Signed and dated the application.

Once we receive your application, we will check it for completeness and begin the loan underwriting process. Our loan officer will be in touch with you with any questions and will keep you updated as to the progress of your application. Loan requests above \$5,000 are determined by a Loan Review Committee, which meets twice a month.

Thank you for submitting your application to Northwest Access Fund.