



LINE OF CREDIT LOAN APPLICATION FORM

1. Personal Information

Account No:
Applicant:
Home Address:
..... Years at Address.....
Housing: ☐ Rent ☐ Own ☐ Relative ☐ Other
ID No: NIS#:.....
Date of Birth:
Marital Status: ☐ S ☐ M ☐ D
No. of Dependant(s): Age(s):
Tel No: (h) (c)
Email:

Date:
Co-Applicant:
Home Address:
..... Years at Address.....
Housing: ☐ Rent ☐ Own ☐ Relative ☐ Other
ID No: NIS#:.....
Date of Birth:
Marital Status: ☐ S ☐ M ☐ D
No. of Dependant(s): Age(s):
Tel No: (h) (c)
Email:

2. Employment Information

Name and Address of Employer (Member)
.....
.....
Occupation:
Length of Emp: Tel. No:
Employment Status:
☐ Permanent ☐ Temporary ☐ Casual ☐ Self
Name of Previous Employer if less than 2yrs (Member)
.....
Length of Emp:

Name and Address of Employer (Co-applicant)
.....
.....
Occupation:
Length of Emp: Tel. No:
Employment Status:
☐ Permanent ☐ Temporary ☐ Casual ☐ Self
Name of Previous Employer if less than 2yrs (Co-applicant)
.....
Length of Emp:

3. References

Relative's Name
Address:
.....
Employer:
Tele No: (h) (w) (c)
Friend's Name
Address:
.....
Employer:
Tel. No: (h) (w) (c)
Friend's Name
Address:
.....
Employer:
Tel. No: (h) (w) (c)

Relative's Name
Address:
.....
Employer:
Tele No: (h) (w) (c)
Friend's Name
Address:
.....
Employer:
Tel. No: (h) (w) (c)
Friend's Name
Address:
.....
Employer:
Tel. No: (h) (w) (c)

4. Amount Requested and Income

Current Request: \$..... Interest Rate: Repayment: \$.....
Term: Existing Loan: \$..... Refinance amount:\$.....
Gross Income: \$..... ☐ Monthly ☐ Weekly
Net Income: \$.....
Other Income: \$.....

Loan Purpose:.....

Gross Income: \$..... ☐ Monthly ☐ Weekly
Net Income: \$.....
Other Income: \$.....

5. Housing and living expenses

Rent	\$.....	Health Insurance	\$.....
Property taxes	\$.....	Pension	\$.....
Electricity	\$.....	Groceries	\$.....
Gas	\$.....	School & Tuition	\$.....
Water	\$.....	Clothing	\$.....
Telephone	\$.....	Travel & Fuel	\$.....
Bus / Taxi Fare	\$.....	Entertainment	\$.....
Auto insurance	\$.....	Charity	\$.....
Home Insurance	\$.....	Other	\$.....
Life Insurance	\$.....	Total Expenditure	\$.....

6. Debt

Name of Institution	Balance outstanding	Monthly Payment
Mortgage	\$.....	\$.....
Loan 1	\$.....	\$.....
Loan 2	\$.....	\$.....
Loan 3	\$.....	\$.....
Credit Card 1	\$.....	\$.....
Credit Card 2	\$.....	\$.....
Credit Card 3	\$.....	\$.....
Hire Purchase 1	\$.....	\$.....
Hire Purchase 2	\$.....	\$.....
Hire Purchase 3	\$.....	\$.....
Total Monthly Debt Payment		\$.....
Net Surplus/(Deficit)		\$.....

7. Assets

Description/Name of Institution	Balance/Value
Cash with Bank	\$.....
Cash with Bank	\$.....
Cash with Credit Union	\$.....
Life Insurance CSV\$	\$.....
Life Insurance CSV\$	\$.....
Vehicle (Make & Registration No.)	\$.....
Vehicle (Make & Registration No.)	\$.....
Property (Address)	\$.....
Property (Address)	\$.....
Other Assets (Furniture/Equipment/etc)	\$.....
Total Assets	\$.....

I am /We are not indebted to any other Credit Union, bank, person or loan agency as borrowers or guarantors except as stated in this application. The statements herein made are true to the best of my/our knowledge and belief. I / We promise to repay all credit extended to me / us pursuant to this application whether or not credit is granted.

Applicant Signature: Co-applicant Signature:.....

GENERAL INFORMATION

Documents Required Along With This Application

- 1. Letter from employer confirming salary/wages, length of employment and willingness to deduct repayment.
- 2. If self-employed, evidence of income generated over past year namely invoices, receipts or financial statements prepared by a registered accountant.
- 3. Last two (2) months or last eight (8) weeks' pay slips.

INTERNAL USE ONLY

Date Application received:	Staff member receiving:
Date received by Loans department:	Loans personnel receiving:
Date forwarded to Reviewer:	Staff member Referring loan:
Balances as at:	Date joined:
Shares: \$.....	Deposits: \$.....
	Term Deposits: \$.....
Total Loan(s) Balance(s): \$.....	Delinquency history: