

GOVERNMENT OF THE VIRGIN ISLANDS
APPLICATION FOR A CAR LOAN
(GENERAL ORDERS 5.4)

Revised 06/02

Applicant Information
(Must be accompanied by a Bill of Sale)

Name

Date

Social Security Number

Employee Number

Address

Telephone

Home

Work

Department/Ministry

Post

Scale

Permanent and Pensionable

Contract

Temporary

Designated Travelling Officer

Yes

No

Spouse's Name

(a) Applicant's Monthly Salary

(b) Other Income (Specify)

(c) Total Monthly Income

By signing below, I affirm that the information I have given above is true and complete and forms part of this application and that I have not withheld any information. I authorize the Ministry of Finance, Economics and Development Planning to obtain further information about me as it relates to this application and to verify the information I have given.

Applicant's Signature

Co-applicant's Signature

Witness's Signature

Date

Comments/Verification/Recommendation

Head of Department

Verification and Employment Status

Signature

Director of Human Resources

Signature

Ministry of Finance Use Only

Monthly Car Loan Principal and Interest payment cannot exceed 30% of (c).

Approved

Denied

Comments

Financial Secretary