

# Loan Application form

MEMBER DETAILS	N.I.		
Membership Number			
Full Name			
Address			
"			
"			
Post Code			
Time At Current Address (if less than 3 years, provide details)	Years	months	
Home Telephone Number			
Mobile Telephone Number			
Email Address			
Date Of Birth	__ / __ / __	Age	
Number Of Dependants			

PERSONAL STATUS			
Single		Married / Cohabiting	
Widowed		Divorced / Separated	

RESIDENTIAL STATUS			
Homeowner		Tenant	
Living With Parents		No Fixed Abode	

EMPLOYMENT			
Full-Time		Part-Time	
Self-Employed		Student	
Retired		Unemployed	
Job Title			
Employer Name			
Employer Address			
Telephone Number			
Employment status	Permanent / Fixed Term		
# Of Years Employed			

BANK DETAILS									
Bank name									
Branch									
Account number									
Sort-code			-			-			

FINANCIAL DETAILS		
Have you ever had Decrees outstanding?	Yes	No
Have you ever been subject to a valid Trust Deed?	Yes	No
Are you an un-discharged bankrupt?	Yes	No

INCOME	Weekly / Monthly
Wages / Salary	£
Partners contribution	£
Child support	£
Income Support	£
Child Benefit	£
Child Tax Credit	£
Working Tax Credit	£
Disability Living Allowance	£
Job Seekers Allowance	£
Incapacity Benefit	£
Pension	£
Interest on Savings / Investments	£
Other income: (Please Specify) _____	£
<b>TOTAL INCOME</b>	<b>£</b>

EXPENDITURE	Weekly / Monthly
Rent / Mortgage	£
Council Tax	£
Gas & Electricity	£
TV License	£
Telephone (Landline)	£
Telephone (Mobile)	£
Entertainment / TV	£
Car/Travel Expenses	£
Groceries	£
Credit & Store Cards	£
Catalogues	£
Hire Purchase	£
Bank loan repayments	£
Credit Union <i>Loan</i> repayment	£
Regular saving amount	
Insurance Car/Home/Building/Life	£
Childcare	£
Housekeeping/Maintenance	£
Pension	£
<b>TOTAL EXPENDITURE</b>	<b>£</b>

<b>Disposable income</b>	<b>£</b>
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LOAN DETAILS	Loan Code_____
Purpose Of Loan	
Date Loan Required	___ / ___ / ___
Share Balance	£
Current Loan Balance	£
<b><u>New Amount Requested</u></b>	£
Total Loan Balance	£
Proposed method of payment	Cash / Payroll / Bankers / PayPoint
Number of repayments:	
Repayment frequency	Weekly or Monthly
Repayment amount	£
Save with each loan repayment	£
<b>Total repayment value</b>	<b>£</b>

HEALTH DECLARATION	
Have you received, in the last 6 months, medical attention for a condition which is or could be considered life threatening?	
YES	NO

PARTNERS DECLARATION	
If you have declared your partners income details as part of your overall income in applying for this loan, your partner will need to sign below confirming agreement for their information to be used in considering the loan and its repayment.	
Partners Signature	Date
	___ / ___ / ___

FORMAL DECLARATION		
I declare that the information I have given on this form is, to the best of my knowledge and belief, accurate and full information. In understand that the provision of false or misleading information is fraud and that the Credit Union may take appropriate action if I am found to have deliberately provided false or misleading information. By signing this form I agree that East Ayrshire Credit Union <i>may</i> carry out a credit check with an external credit reference agency.		
<b>Important - Your Personal Information</b>		
We may use credit reference and fraud prevention agencies to help us make decisions. A short guide to what we do and how both we and credit reference and fraud prevention agencies will use your information is detailed in the leaflet called: <b>A condensed guide to the use of your personal information by ourselves and at Credit Reference and Fraud Prevention Agencies.</b> <b>If you would like to read the full details of how your data may be used please visit our website at <a href="http://www.ayrshirecreditunion.co.uk">www.ayrshirecreditunion.co.uk</a> or phone 01563 555858 or ask one of our staff.</b> By confirming your agreement to proceed you are accepting that we may each use your information in this way.		
Applicant Name	Applicant Signature	Date
		___ / ___ / ___

\* \* \*      O F F I C E   U S E   O N L Y      \* \* \*

Date received	____ / ____ / ____		
Net exposure on Loan	£		
Proof of address on file	Yes	No	
Has Member been interviewed?	Yes	No	
Name of interviewer			
Method of interview	Office	Telephone	
Income evidenced	Yes	No	
Disposable income ÷ Total income × 100	%		
Total debt ÷ Total expenditure × 100	%		

How long a member	Years	months			
Evidence of share loading	Yes	No			
Previous borrowing	#	£			
Loan ÷ Shares					
Number of C.C. S.L.T.'s	Last loan		2 <sup>nd</sup> last loan		
Arrears letters: Last 6 months	1	2	3	4	5
Arrears letters: Last 6 - 12 months	1	2	3	4	5

Insert ✓ where entry meets matrix criteria

Insert ✗ where entry does not meet matrix criteria

Insert — where entry is not required or doesn't apply

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19

<b>Loan Number:</b>	Approved	<u>Reason:</u>		: _____	__ / __ / __
				: _____	__ / __ / __
	Rejected			: _____	__ / __ / __
				: _____	__ / __ / __