

LOAN APPLICATION FORM



Angus Credit Union Ltd.

MEMBERSHIP NUMBER	
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TITLE		SURNAME	
FIRST NAME		MAIDEN/PREVIOUS NAME	
ADDRESS		DATE OF BIRTH	
		TELEPHONE	
		MOBILE NUMBER	
POSTCODE		TIME AT PRESENT ADDRESS	<input type="text"/> Yrs <input type="text"/> Months

PLEASE SUPPLY YOUR PREVIOUS ADDRESS IF YOU HAVE MOVED HOME IN THE PAST THREE YEARS			
POSTCODE		TIME AT PRESENT ADDRESS	<input type="text"/> Yrs <input type="text"/> Months

HOMEOWNER	<input type="checkbox"/>	LIVING WITH PARENTS	<input type="checkbox"/>	TENANT	<input type="checkbox"/>	OTHER	<input type="checkbox"/>
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MARRIED	<input type="checkbox"/>	LIVING WITH PARTNER	<input type="checkbox"/>	SINGLE	<input type="checkbox"/>	NUMBER OF DEPENDANTS	<input type="text"/>
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EMPLOYED	<input type="checkbox"/>	SELF-EMPLOYED	<input type="checkbox"/>	UNEMPLOYED	<input type="checkbox"/>	RETIRED	<input type="checkbox"/>
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IF EMPLOYED OR SELF-EMPLOYED PLEASE COMPLETE THE FOLLOWING								
OCCUPATION								
NAME OF EMPLOYER								
FULL-TIME	<input type="checkbox"/>	PART-TIME	<input type="checkbox"/>	TIME WITH EMPLOYER	<input type="text"/>	Yrs	<input type="text"/> Months	
IS THIS A FIXED TERM CONTRACT?								
WILL YOU BE LEAVING THIS EMPLOYMENT WITHIN THE NEXT 3 MONTHS?								
					<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

DO YOU HAVE ANY SERIOUS MEDICAL CONDITIONS?								
					<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
IF YES PLEASE GIVE DETAILS								
ARE YOU CURRENTLY ON SICK LEAVE?								
					<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
IF YES DOES THIS AFFECT THE LEVEL OF INCOME QUOTED?								
					<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

LOAN REQUEST	£	<input type="text"/>
REASON FOR LOAN	<input type="text"/>	
REPAYMENT AMOUNT	£	<input type="text"/>

PLEASE CHOOSE ONE OF THE FOLLOWING REPAYMENT SCHEDULES AND METHODS OF REPAYMENT

WEEKLY <input type="checkbox"/>	FORTNIGHTLY <input type="checkbox"/>	FOUR WEEKLY <input type="checkbox"/>	MONTHLY <input type="checkbox"/>
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PAYROLL DEDUCTION <input type="checkbox"/>	LOCAL ACCESS OFFICE <input type="checkbox"/>	STANDING ORDER <input type="checkbox"/>
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ARE YOU CURRENTLY REPAYING A CREDIT UNION LOAN?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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IF YES HAVE YOU REPAID HALF THE PRESENT LOAN?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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IF THIS IS A TOP-UP LOAN PLEASE COMPLETE THE FOLLOWING

PRESENT LOAN BALANCE	£	<input type="text"/>
AMOUNT REQUESTED	£	<input type="text"/>
NEW TOTAL LOAN	£	<input type="text"/>

IF THE AMOUNT YOU ARE WISHING TO BORROW IS LESS THAN OR EQUAL TO YOUR SHARES THIS IS A SECURED LOAN, YOU THEREFORE DO NOT NEED TO COMPLETE THE INCOME AND EXPENDITURE DETAILS.

THE CREDIT COMMITTEE MUST SATISFY ITSELF THAT GRANTING THIS LOAN WILL NOT RESULT IN YOU BEING OVERCOMMITTED FINANCIALLY. TO ASSIST THIS PROCESS PLEASE LIST ALL PAYMENTS TO OTHER CREDITORS, FOR EXAMPLE, LOANS, CATALOGUES, CREDIT/STORE CARDS, ETC.

TYPE OF CREDIT	BALANCE AT LAST STATEMENT	REPAYMENT AMOUNT	W	F	4W	M
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

INCOME AND EXPENDITURE DETAILS: IN ORDER TO BE A RESPONSIBLE LENDER THE CREDIT COMMITTEE HAS TO CHECK YOU CAN AFFORD TO REPAY THE LOAN. PLEASE INCLUDE ALL HOUSEHOLD INCOME AND EXPENDITURE IN THE TABLES OPPOSITE.

IMPORTANT: THE CREDIT UNION ASKS THAT YOU PROVIDE PROOF OF YOUR INCOME BEFORE YOUR LOAN APPLICATION IS APPROVED. PLEASE PROVIDE THIS INFORMATION WHEN RETURNING THIS LOAN FORM. YOU MAY ALSO BE ASKED BY THE CREDIT COMMITTEE TO PROVIDE PROOF OF ITEMS OF EXPENDITURE. THIS PROOF CAN BE PROVIDED IN PERSON OR BY POST AND MUST BE THE ORIGINAL DOCUMENTS, PHOTOCOPIES ARE NOT ACCEPTABLE. ALL DOCUMENTATION WILL BE RETURNED.

INCOME						
ITEM	AMOUNT	W	F	4W	M	
NET SALARY						
PARTNER'S SALARY						
CHILD BENEFIT						
CHILD TAX CREDIT/WORKING TAX CREDIT						
INCOME SUPPORT JOBSEEKERS ALLOWANCE						
INCAPACITY BENEFIT						
DISABILITY LIVING ALLOWANCE/ATTENDANCE ALLOWANCE						
CHILD MAINTENANCE						
CARER'S ALLOWANCE						
RETIREMENT PENSION/PENSION CREDIT						
OCCUPATIONAL/PRIVATE PENSION						
OTHER BENEFITS						
OTHER INCOME						
TOTAL						

EXPENDITURE						
ITEM	AMOUNT	W	F	4W	M	
MORTGAGE/SECURED LOAN						
RENT						
COUNCIL TAX						
FUEL/UTILITIES						
FINES						
HIRE PURCHASE						
HOUSEKEEPING						
TELEPHONE						
MOBILE PHONE						
SKY/DIGITAL/BROADBAND						
TV LICENCE						
BUILDINGS/CONTENTS INSURANCE						
LIFE INSURANCE						
CHILD MAINTENANCE						
CHILDCARE						
CHILD EXPENSES (POCKET MONEY/LEISURE, ETC.)						
TRAVEL						
CREDIT UNION						
OTHER						
TOTAL						

I submit this application for a Credit Union personal loan and declare that any information that I have supplied is true and accurate. I also authorise you to make any enquiries you feel necessary for confirmation of the information contained in this application and for the purpose of credit assessment. Any agreement to provide the loan to which this application relates will be constituted as a credit agreement being signed by me and the credit union in accordance with the Consumer Credit Act 1974 and that you may disclose information about me for the purposes of this application to other credit unions and their employees and agents for debt recovery purposes. I also authorise the release of information to the CUNA Mutual Group for Credit Union Insurance purposes.

APPLICANT'S SIGNATURE

SIGNATURE	DATE
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DECLARATION OF CONSENT

To be completed by member's partner if his/her income is included in the budget calculation.

I CONFIRM THAT I HAVE GIVEN MY CONSENT
FOR MEMBERSHIP NUMBER (IF APPLICABLE)
TO INCLUDE MY INCOME DETAILS FOR CONSIDERATION IN HIS/HER LOAN APPLICATION TO ANGUS CREDIT
UNION LTD.

SIGNATURE	DATE
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Data Protection Statement:

In accordance with the principles of the Data Protection Act 1998, Angus Credit Union Ltd. will use your personal details for the purposes of managing your membership activities with the Credit Union. Your personal details will be treated confidentially and will only be shared with other agencies for the purpose of credit referencing and debt recovery for which purpose the Credit Union holds a category 'F' Consumer Credit Licence.



Angus Credit Union Ltd.

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