

## **Loan Application Form**

Please complete in full, including Budget planner

## **SECTION 1 - ABOUT YOU**

First Name:	Surname:	
Member No.:	Reason for loan:	
Nat. Ins. No.:		
Address & Postcode		
Length of time at this address	Years Months	
If less than 3 years, please provide previous address and postcode:		
Length of time at this address	Years Months	
Home Tel. No.	Mobile	
Work Tel. No.		
Is your home  Owned  Privately rented  Council or Housing Association rented  Living with family or friends  Other*  *Please specify		
How many adults live in your household?		
Are you? Married  Single   *Please specify	Cohabiting  Other*	
How many children live in the household? What are their ages(s)?		
Are you? Employed  Self-employed  Self-employed	d 🗍 Retired 🗍 Student 🗍	
If employed, name, address and postcode of current employer		
Years with this employer Years with previous employer		

Da von von de (1 - 11 - 1 'C / )					
Do you work (leave blank if n/a)					
Full time 🗍 Part time 🗍 Under 16 hou	ull time 🗍 Part time 🗍 Under 16 hours 🗍 Over 16 hours 🗍				
Type of contract  Permanent  Temporary Fixed term*	7	C	V		
Zero hours contract 🗍 *If fixed term, please confi	m length o	T term			
Have you been notified of any changes to your em	oloyment/in	come? If so	what?		
			, tre 1, i		
Please answer all questions below: -					
Are you in good health?			YES	NO*	
Do you have a disability or suffer from a long-term illne	ss?	19-6-4-	YES*	NO	
Are you aware of any impending changes to your incom			YES*	NO	
Have you ever been declared bankrupt or been the subject of an IVA?			YES*	NO	
Have you ever applied for or entered into a Debt Relief Order or debt management plan?			YES*	NO	
Have you ever had any County Court Judgements aga	inst you?		YES*	NO	
SECTION 2 - ABOUT YOUR FINANCES  Budget Planner  Please complete accurately and in full. This is an important part of your application.					
Weekly/4 weekly/Monthly Income (please specify in the	e 'per' columi	n below)		The state of the s	
TABLE 1	You £ Partner £ Per		Per		
Average take home pay (wages/salary)					
Additional pay (wages/salary)			SeriBIT.	fin gana	
Pension(s)			(Total)	ga remair!	
Child Benefit					
Child Tax Credit/Working Tax Credit					
Maintenance/CSA					
Income Support	1810 1148	1 119	plu -		
Housing Benefit			E) = = =		
Job Seeker's Allowance/Employment & Support Allowance			8 ,		
Carer's Allowance/Disability Living Allowance/ Personal Independence Payment					
Universal Credit					
Other income	-		2	× ,	
TOTAL					

Weekly/4 weekly/Monthly Household Expenditure  TABLE 2	You £	Partner £	Per
Rent/mortgage/board			
Council Tax			
Gas/electricity/oil			
Water		3.4	
Landline telephone/internet			
Mobile phone	7 1 2 1 X	-3	, 1
TV licence	-10 A = 20	P. T. Y	3
TV rental/Sky/cable		1	
Travel expenses (bus/train/taxi fares)			
Car maintenance/MOT/services			
Car Insurance		1 2 2 2 2	
Petrol/Diesel	,5,27 File 218		
Housekeeping/groceries		was makamara	5 com 190
Clothing/footwear/hair	,		100
Entertainment/tobacco/alcohol/socialising			
Childcare/nursery fees/pocket & dinner money/nappies	way or hope of the control of the co		
Maintenance/CSA paid	e jarner	for agreement of the	Strand carees
Pets			14 g . 6 m
Other spending (please specify)	9		
Total of weekly payments from Table 3			
TOTAL			Haste St

## Details of other loans/credit cards/home credit

TABLE 3

Name of creditor	Current outstanding balance £	Weekly payment amount £	Any arrears amount £
Loans	Dalance 2	amount	amount 2
Credit cards			
Catalogues/Mail Order			raenadale e
Overdraft	A	Cition	
Hire Purchase (e.g. BrightHouse etc)			
Home Credit	92.42.40.0		
Doorstep Lender (e.g. Provident)	- 484	trata in title - Mrs.	
Payday Loan (e.g. Wonga)		1 18 18 20	
Community Fund Loan			
Debt management plan			1, 4
Other (please specify)			12.
TOTAL			

TO BE COMPLETED BY LOAN OFFICER:		
	n details:	
charged at a rate of 1.5% a month	d on your current savings and loan balance. Interest is based on the reducing loan balance.	
I would like to borrow £ over	weeks / months, to be paid in instalments	
of £ . I also agree to save £	per month in addition to this.	
I would like my loan to be paid to me:		
By cheque By bank transfer to acc	ount:	
Bank name:		
Name on account:		
Sort Code:		
Account number:		
Payment will be made either:		
- Monthly on or before: 1st   10th	<b>20th</b> ☐ <b>28th</b> ☐ of each month.	
- Weekly, every	(write day of the week)	
I declare that all the information I have given on this form is	to the best of my knowledge and belief accounts and it follows	
I declare that all the information I have given on this form is, to the best of my knowledge and belief, accurate and in full. I understand that the provision of any false information is fraud and that Leicester Caribbean Credit Union may take appropriate action against me if I am found to have deliberately provided false or misleading information.		
Member's signature:	Loan officer signature:	
Print Name:		
	Print Name:	
Date:	totalina in 2 din - compune appoint you se seguine	
	Date:	
Partner's signature:	200 To 100 To	
(If income included)		
Print Name:	For office use only:	
Date:	Loan No.:	
	Loan type:	
For office use only:	Due of wassided	
Proof of ID	Proof provided	
Proof of address		
Proof of income		
( <u>last</u> 3 payslips, last self-employed return or evidence of benefits – must show National Insurance number)		
Last 3 months bank statements	The state of the s	
Guarantor required?	YES O NO O	
	ILS L. NO L.	
Data Protection and up		



## Data Protection and use of your information

All the information you have provided will be treated as confidential. Leicester Caribbean Credit Union Ltd is registered under the Data Protection Act 1998. We use information to manage your account and have a Category F Consumer Credit Licence.

The Credit Union may contact any third party it deems necessary without further notice, including but not limited to Employers or Credit Reference Agencies, for reports or information.