



TWCU Credit Union Co-operative Society Limited

APPLICATION FOR LOAN

Form No: 01

PLEASE PRINT OR TYPE

MOTHER'S MAIDEN NAME

Documents Required from Applicant:

- ID/DP/PP
- Proof of Address
- Recent Salary Slip

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FIRST NAME

SURNAME

DATE OF BIRTH

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--	--	--	--

YR. MTH. DAY

ADDRESS

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NAME OF FIRM

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DEPARTMENT

LOCATION

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PHONE NO. (HOME)

PHONE NO. (WORK)

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MOBILE NO.

EMAIL ADDRESS:

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I..... hereby apply
 for a loan of
 Dollars (\$)) for the following
 (explain fully).

.....

SECURITY

I will repay this loan through monthly contributions of \$..... each with interest at 1% per month of the unpaid balance, commencing

The statements above are made for the purpose of obtaining a loan and are true and correct to the best of my knowledge and belief.

DATE:

FOR OFFICIAL USE ONLY
LOAN NO.:

EMP. NO./ACC.NO.:

APPLICANT'S SIGNATURE:

CO MAKER'S SIGNATURE:

SHARES PURCHASED

DEPOSIT MADE

DATE:

RECEIPT NO.:

ACCT/PR NO.:

AMOUNT: \$.....

TICK WHERE APPLICABLE:

TO TRANSACT:

NEW REFINANCE LOAN

ONE TO ONE LOAN

SIGNATURE : _____

TWCU

FOR OFFICIAL USE ONLY

No. of loan(s) for previous year:

No. of loan(s) for current year:

Balance as at	SHARES	DEPOSITS	ORDINARY LOAN	H.P. LOAN	H.P. CAR LOAN	MORTGAGE LOAN	LINK	FIXED DEPOSITS
.....								
.....								
Mthly Remittances/ S/Order \$.....								

Date of last loan:

Date of last payment:

Has the applicant been repaying loan according to agreement? YES NO

If no, give details DATE JOINED:

DATE UPDATED BY

AMOUNT APPROVED: \$.....

1. Code of Loan:..... Outstanding Loan Balance: \$.....

New Monthly Contribution: \$..... First Payment due:.....

Payment disbursed as follows:

To Shares \$..... Journal Date

To Deposits \$..... Journal Date

To JR# DR..... CR..... AMT. \$..... Date

To Applicant \$..... Cheque # CV Date

To Applicant \$..... Cheque # CV Date

To Other \$..... Cheque # CV Date

APPROVAL BY TREASURER

I as Treasurer approve this loan which should be disbursed as indicated above.

Payments to be made on

DATE: TREASURER:.....
(Signature)

APPROVAL BY CREDIT COMMITTEE

This loan was approved/not approved by the Credit Committee at its meeting held on

Payments to be made

REMARKS:

.....

CREDIT COMMITTEE

.....
(Chairman)

.....
(Secretary)

.....
(Member)

.....
(Member)

.....
(Member)

BOARD OF DIRECTORS

.....
(President)

.....
(Vice President)

.....
(Treasurer)

.....
(Secretary)

.....
(Member)

.....
(Member)

.....
(Member)

.....
(Member)

.....
(Member)

.....
(Member)

.....
(Member)

.....
(Member)

SUPERVISORY COMMITTEE

.....
(Chairman)

.....
(Secretary)

.....
(Member)

LOAN NOTE

For value received, I promise to pay TWCU CREDIT UNION CO-OPERATIVE SOCIETY LIMITED.

the sum of Dollars (\$).

The first of such instalment to be paid on
and like amount every month until the full amount has been paid.

In case of any default in payments as herein agreed the entire balance of this note shall immediately become due and payable, unless excused by the Board of Directors. The member shall be liable for all reasonable COLLECTION and/or LEGAL CHARGES incurred by TWCU Credit Union Co-operative Society Limited in the recovery of any unpaid loan balance or any sums payable by virtue of a dishonoured cheque.

I hereby pledge all paid shares, payment on shares or deposits which I now and hereafter may have, to this Credit Union for repayment of this loan together with interest, fines, cost and expenses. I also hereby authorize the treasurer to apply all or any of such paid shares, payment on shares or deposits to the payment of the said loan, interest, fines, cost and expenses.

I/We hereby authorize and give consent to TWCU Credit Union Co-operative Society Limited, in receiving and exchanging any financial and other information which it may have in its possession about Me/Us with any of its subsidiaries, agents, third party assignees, other financial institutions, Credit Bureaus or other person or Corporation or with whom I/We may have or propose to have financial dealings from time to time.

In addition, I/We also give TWCU Credit Union Co-operative Society Limited, permission to obtain any credit report on My/Our financial position from time to time throughout the duration of any loans being held with the organization. I/We indemnify TWCU Credit Union Co-operative Society Limited against any loss, claims, damages, liabilities, actions and proceedings, legal and or other expense which may be directly and reasonably incurred as a consequence of the disclosure of the financial information.

In the event of the termination of my employment with
..... I, hereby expressly authorize the Payroll Department to deduct and submit any outstanding loan balance owing to TWCU Credit Union Co-operative Society Limited from monies due and payable to me based on said termination.

BORROWER'S SIGNATURE:

DATE:

CO-MAKER'S SIGNATURE:

DATE:

WITNESS:

DATE:

TWCU CREDIT UNION CO-OPERATIVE SOCIETY LIMITED

COLLECTION OF CREDIT UNION DUES

I..... hereby authorize the
 “.....”
 (Name of Firm)

To deduct from my wages **weekly/fortnightly/monthly**, commencing
 and until further notice the sum of
 dollars (\$) and to pay same to “TWCU Credit Union Co-operative Society Limited”.

This authorization replaces any previous authorization I have signed. The above monies represent my **weekly/fortnightly/monthly**, contribution to the above stated Credit Union to be allocated as follows:

ACCOUNT	<u>AMOUNT</u>
SHARES	\$
DEPOSITS	\$
LOANS	\$
HIRE PURCHASE LOANS	\$
HIRE PURCHASE LOANS - CAR	\$
MORTGAGE LOANS	\$
SPOUSE	\$
JUVENILE	\$
BRIDGING FINANCE LOANS	\$
OTHER:	<u>\$</u>
TOTAL	<u>\$</u>

“The information on this form is irrevocable and shall not be changed without the authorization of the Credit Union”.

.....
Member’s Signature

.....
Prno/Accno

.....
Official of TWCU

.....
Date

REFERENCES

Please provide name and contact information two (2) references:

NAME	
ADDRESS	
CONTACT NOS	(a) Mobile (b) Other
RELATIONSHIP	

NAME	
ADDRESS	
CONTACT NOS	(a) Mobile (b) Other
RELATIONSHIP	

FINANCIAL COMMITMENTS:

PARTICULARS	MONTHLY INSTALLMENT	BALANCES
Mortgage		
Other Credit Unions		
Bank(s)		
Hire Purchase		
Other		
TOTAL		

Debt Service Ratio (D.S.R) = %

I authorize and consent to **TWCU CREDIT UNION** obtaining further information on my credit and employment history from any financial institution, credit bureau or any other person/corporation with whom I may have had dealings with from time to time.

I Agree I don't agree

Member Signature

Date

Account Number: _____

Employee No. _____