

PERSONAL LOAN APPLICATION FORM

LOAN CONTRACT#: _____

I hereby apply for a loan of \$ _____ for the purpose of _____

APPLICANT'S PERSONAL INFORMATION (WRITE IN BLOCK CAPS)

APPLICANT'S NAME	AGE	DOB (D/M/YR)	TRN
PRESENT HOME ADDRESS:	OWN. RENT. OTHER <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		YEARS
	TEL (HOME)		CELL
EMAIL ADDRESS	NO. OF DEPENDENTS		MARITAL STATUS
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP		TELEPHONE
SPOUSE NAME	TEL (HOME)		CELL
(IF RENTING) LANLORD NAME	TEL (HOME)		CELL

APPLICANT'S EMPLOYMENT INFORMATION

EMPLOYER NAME -	YEARS THERE	OCCUPATION
EMPLOYER ADDRESS -	TEL (Landline Only)	
IMMEDIATE SUPERVISOR	EXTENSION	
PREVIOUS EMPLOYER NAME	YEARS THERE	OCCUPATION
PREVIOUS EMPLOYER ADDRESS	TELEPHONE	

REFERENCES INFORMATION

FIRST REFERENCE NAME -	YEARS KNOWN	TEL	OCCUPATION
REFERENCE ADDRESS	EMAIL		
SECOND REFERENCE NAME -	YEARS KNOWN	TEL	OCCUPATION
REFERENCE ADDRESS	EMAIL		

GUARANTOR PERSONAL INFORMATION

GUARANTOR'S NAME	AGE	DATE OF BIRTH (D/M/YR)	TRN
PRESENT HOME ADDRESS	OWN. RENT. OTHER <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		YEARS THERE
	TELE # (HOME)		TEL
PREVIOUS HOME ADDRESS	E-MAIL ADDRESS		
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP		TEL (CELL)
NO. OF DEPENDENTS	MARITAL STATUS	ID TYPE	ID NUMBER

GUARANTOR EMPLOYMENT INFORMATION

EMPLOYER NAME	YEARS THERE	OCCUPATION
EMPLOYER ADDRESS	TEL (Landline)	

SECOND GUARANTOR PERSONAL INFORMATION

GUARANTOR'S NAME	AGE	DATE OF BIRTH (D/M/YR)	TRN
PRESENT HOME ADDRESS	OWN. RENT. OTHER <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		YEARS THERE
	TEL (HOME)		TEL
PREVIOUS HOME ADDRESS	E-MAIL ADDRESS		
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP		TEL
NO. OF DEPENDENTS	MARITAL STATUS	ID TYPE	ID NUMBER

SECOND GUARANTOR EMPLOYMENT INFORMATION

EMPLOYER NAME	YEARS THERE	OCCUPATION
EMPLOYER ADDRESS	TEL (Landline)	

INCOME AND EXPENDITURE STATEMENT		PERSONAL FINANCIAL STATEMENT			
Gross Monthly Income		<u>LIABILITIES</u>		<u>ASSETS</u>	
Less Deductions		Bank Loans		Bank Balances	
Net Income		Other Loans		Real Estate	
Other Income (Please state in noted)		Credit Card		Motor Vehicle	
Total Income		Hire Purchase		Furniture	
Loan Payments		Other amounts due (Please state in notes)		Other(s)	
Rent (maintenance)		Mortgage			
Mortgage		Other Loans			
Groceries					
Utilities					
Other Living Expenses					
Entertainment					
Other(s)					
		Total Liabilities			
		Net worth (Assets – Liabilities)			
		Total	\$	Total	\$
OFFICIAL USE ONLY					
Total Expenses		ID TYPE	ID #	APPROVED YES NO <input type="checkbox"/> <input type="checkbox"/>	
Surplus/Deficit (Total Income – Total Expenses)	\$	Loaned Amount \$	Debt Servicing Ratio	Sign:	
Notes: _____ _____ _____ _____					

TERMS OF APPLICATION

For the purpose of maintaining credit from time to time in any form whatsoever with you in the future, the undersigned hereby represents the following to be a true and accurate statement of the financial conditions of the undersigned on (date) _____, and agrees

- (1) That if said statement or any part thereof proves false or misleading in any particular, each and all of the obligations and/or liabilities of the undersigned of every kind to you, whether joint or several, primary or secondary, direct or contingent, shall at your option, become immediately due and payable, all without demand or notice of any kind.
- (2) That you will notify us promptly of any materially favourable/unfavourable change in the respective undersigned financial condition herewith set forth. In the absence of such notice or the submission from you, may be considered as a conditional breach and subject to further clarification it will be our sole discretion to issue a demand notice to your employer.
- (3) You &/or your Guarantor(s) will at all time be responsible for the credit facility provided, if at any point the applicant cannot repay loan, the guarantor will immediately be required to repay. This means at the point of Applicant’s default salary deduction instructions will be transferred to Guarantor(s).
- (4) **If any information given is found to be false, your application will be immediately terminated or revoked.**

..... Date Applicant’s Name Applicant’s Signature
..... Date Guarantor Name Guarantor Signature
..... Date Second Guarantor Name Second Guarantor Signature