



Account No.	Date	Loan No.
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Name: Home Telephone:
 Address: Mobile Phone:
 How long have you lived at this address?:years
 If less than 3 years, give previous address:
 Post Code:
 Email:

Occupation: Name and address of current employer: How long have you worked here? Work Phone: National Insurance Number __ __ __ __ __	Date of Birth:/...../..... No. of Dependents:..... Are you over 18 years of age? <input type="checkbox"/> Are you married? <input type="checkbox"/> single <input type="checkbox"/> living together <input type="checkbox"/> <i>(please tick all boxes that apply)</i>
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Own, or buying your home Are you a tenant? Are you living with parents? Are you a Lodger?

Loan applied for: £ . Existing loan balance: £ . Total loan: £ .
 Date loan required:/...../..... Is this a refinanced loan? yes no
 I agree to save: £ . with each loan payment of £ . per week fortnightly per month
 Principal to be repaid plus interest at 12.68 APR.

I REQUIRE THIS LOAN FOR THE FOLLOWING PROVIDENT OR PRODUCTIVE PURPOSE

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Applicant's Financial Statement		EXPENDITURE		INCOME	
	Weekly	Monthly		Weekly	Monthly
Mortgage/Rent			Wages Self		
Council Tax			Wages Spouse		
Electricity			Child Benefit		
Gas			Pension		
TV Licence			Work Pension		
Telephone			Other Benefits		
Life/Home/Car Insurance			Other Income		
Hire Purchase			Tax Credits		
Car Finance			Pension Credits		
Bank/Other Loans			DLA Award		
Rental/Catalogue			Total	£ .	£ .
Housekeeping			<i>(for official use only)</i>		
Other					
Total			Total Income		
Share/Loan Repayments			Less Expenses		
Total	£ .	£ .	Balance	£ .	£ .

AUTHORISATION TO RECEIVE CHEQUE
 I (print name)
 authorise (print name)
 To collect monies due to me from
GLENIFFER CREDIT UNION LIMITED
 Please make my cheque payable to:

 Signed

Cheque No.
 Amount £ .
 Received by
 Date/...../.....