



UWI (MONA) & COMMUNITY CO-OPERATIVE CREDIT UNION LIMITED

LOAN APPLICATION - PERSONAL CREDIT

FOR INTERNAL USE ONLY	
Branch/ Transit HEAD OFFICE <input type="checkbox"/> UTECH <input type="checkbox"/>	
Membership Number:	Date of Application:

1. PERSONAL INFORMATION

NAME OF APPLICANT (SURNAME, FIRST NAME, MIDDLE NAME)		DATE OF BIRTH (YYYY/MM/DD)	T.R.N	ACCOUNT #
CURRENT HOME ADDRESS			OWN. RENT. OTHER	YEARS THERE
MAILING ADDRESS IF DIFFERENT FROM HOME ADDRESS			HOME TELEPHONE #	FAX/CELLULAR #
PREVIOUS HOME ADDRESS		YEARS THERE	E-MAIL ADDRESS	
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	TELEPHONE #
# OF DEPENDENTS	AGE (S) OF EACH	STATUS	DATE OF MEMBERSHIP (YYYY/MM/DD)	

2. EMPLOYMENT INFORMATION

NAME OF EMPLOYER		YEARS THERE	OCCUPATION/TYPE OF BUSINESS	Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contract <input type="checkbox"/>
ADDRESS OF EMPLOYER		EMPLOYEE #	TELEPHONE #	Contract Expiry Date (YYYY/MM/DD) / /
NAME OF PREVIOUS EMPLOYER		YEARS THERE	OCCUPATION/TYPE OF BUSINESS	Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contract <input type="checkbox"/>
ADDRESS OF PREVIOUS EMPLOYER			TELEPHONE #	Contract Expiry Date (YYYY/MM/DD) / /

3. SPOUSE'S EMPLOYMENT INFORMATION

NAME OF SPOUSE (SURNAME, MAIDEN NAME (if applicable), FIRST NAME, MIDDLE NAME)		DATE OF BIRTH (YYYY/MM/DD) / /	T.R.N.
NAME OF EMPLOYER		YEARS THERE	OCCUPATION/TYPE OF BUSINESS
ADDRESS OF EMPLOYER		TELEPHONE #	
NAME OF PREVIOUS EMPLOYER		YEARS THERE	OCCUPATION/TYPE OF BUSINESS
ADDRESS OF PREVIOUS EMPLOYER		TELEPHONE #	

4. CO-MAKER'S INFORMATION

NAME OF CO-MAKER (SURNAME, FIRST NAME, MIDDLE NAME)		DATE OF BIRTH (YYYY/MM/DD)	T.R.N	MEMBER ACCOUNT #
PRESENT HOME ADDRESS			OWN. RENT. OTHER	YEARS THERE
MAILING ADDRESS IF DIFFERENT FROM HOME ADDRESS			HOME TELEPHONE #	FAX/CELLULAR #
PREVIOUS HOME ADDRESS		YEARS THERE	E-MAIL ADDRESS	
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	TELEPHONE #
# OF DEPENDANTS	STATUS (MARRIED, SINGLE, DIVORCED)		SPOUSE NAME	

5. CO-MAKER'S EMPLOYMENT INFORMATION

NAME OF EMPLOYER		YEARS THERE	OCCUPATION/TYPE OF BUSINESS
ADDRESS OF EMPLOYER			TELEPHONE #
NAME OF PREVIOUS EMPLOYER		YEARS THERE	OCCUPATION/TYPE OF BUSINESS
ADDRESS OF PREVIOUS EMPLOYER			TELEPHONE #

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6. GUARANTOR'S INFORMATION 1			
NAME OF GUARANTOR (SURNAME, FIRST NAME, MIDDLE NAME)		DATE OF BIRTH (YYYY/MM/DD) / /	T.R.N
PRESENT HOME ADDRESS		OWN. RENT. OTHER	YEARS THERE
MAILING ADDRESS IF DIFFERENT FROM HOME ADDRESS		HOME TELEPHONE #	FAX/CELLULAR #
NAME AND ADDRESS OF EMPLOYER		E-MAIL ADDRESS	
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP	TELEPHONE #
# OF DEPENDANTS	STATUS (MARRIED, SINGLE, DIVORCED)		SPOUSE NAME
7. GUARANTOR'S INFORMATION 2			
NAME OF GUARANTOR (SURNAME, FIRST NAME, MIDDLE NAME)		DATE OF BIRTH (YYYY/MM/DD) / /	T.R.N
PRESENT HOME ADDRESS		OWN. RENT. OTHER	YEARS THERE
MAILING ADDRESS IF DIFFERENT FROM HOME ADDRESS		HOME TELEPHONE #	FAX/CELLULAR #
NAME AND ADDRESS OF EMPLOYER		E-MAIL ADDRESS	
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP	TELEPHONE #
# OF DEPENDANTS	STATUS (MARRIED, SINGLE, DIVORCED)		SPOUSE NAME
8. LOAN DETAILS			
LOAN PURPOSE _____		REPAYMENT SOURCE: SALARY DEDUCTION POST DATED CHEQUE COUNTER STANDING ORDER (ACCOUNT #)	
LOAN AMOUNT \$ _____			
COLLATERAL SECURITY HELD AND/ OR PROPOSED			
		Mortgage \$	Instrument of Charge \$
		Insurance \$	Hypothecation \$
		Bill of Sale \$	Other \$
9. INCOME AND EXPENDITURE STATEMENT			
INCOME	\$	EXPENDITURE	\$
Gross Monthly Family Income		Car Loan Payment	
Less Deduction At Source		Hire Purchase Payments	
Net Income (Take Home Pay)		Life Insurance Premiums	
Other Income		Other Loan Payments	
TOTAL INCOME		Rent	
		Mortgage, Maintenance	
		Insurance, Home, Vehicle	
		Transportation Expenses	
		Utilities – Telephone, Water, Electricity	
		Living Expenses – Food, Clothing, etc.	
		Educational Expenses – School Fees, etc.	
		Medical, Dental, Optical Expenses	
		Entertainment	
		Other	
		TOTAL EXPENSES	
		SURPLUS (DEFICIT)	

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CONNECTED ACCOUNTS	OTHER CREDIT UNION SERVICES																																													
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MEMBER OF COMMITTEE	WAS APPROVED/DISAPPROVED ON THE FOLLOWING CONDITIONS/OTHER COMMENTS:																																													
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