



Account No.	Date	Loan No.
--------------------	-------------	-----------------

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 Dependants:..... 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"/> (please tick all boxes that apply)
---	--

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 £ Total amount payment £
 per week fortnightly per month 4-weekly Principal to be repaid plus interest at 17.458% APR.

I REQUIRE THIS LOAN FOR THE FOLLOWING PROVIDENT OR PRODUCTIVE PURPOSE

.....

Applicant's Financial Statement

	EXPENDITURE		INCOME	
	Weekly	Monthly	Weekly	Monthly
Mortgage/Rent			Wages Self	
Council Tax			Wages Spouse	
Electricity / Gas			Child Benefit	
Child Care			Pension	
TV Licence			Work Pension	
Telephone			Other Benefits	
Life/Home/Car Insurance			Other Income	
Hire Purchase			Tax Credits	
Car Finance/ Fuel/ Travel Expenses			Pension Credits	
Bank/Other Loans			DLA/PIP 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/...../.....