



Falkirk District Credit Union

LOAN APPLICATION FORM

PLEASE PRINT CLEARLY AND FILL IN ALL SECTIONS

APPLICANT'S DETAILS		
Member No.	NI No.	Date of Birth
Surname		Forename
Address		Post Code
Home telephone no		Mobile no
Email address		
Are you? Owner/Occupier <input type="checkbox"/> Tenant <input type="checkbox"/> Private Renter <input type="checkbox"/> Living with parents <input type="checkbox"/>		
Previous address (if at current address less than 3 years)		
Marital Status Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Other <input type="checkbox"/> please specify		
Have you been Bankrupt/Trust Deed or IVA within the last five years or do you have a Debt Management Scheme? YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes, date registered?		
<i>This may not affect your loan application, please check with main office on how much you are entitled to apply for</i>		
EMPLOYMENT DETAILS		PLEASE FILL IN ALL RELEVANT SECTIONS
Are you Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/>		
Occupation		Employer's Name
Length of time with Employer		Employer's Address
Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Zero Hour contract <input type="checkbox"/>		
How are you paid? Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> 4 Weekly <input type="checkbox"/> Monthly <input type="checkbox"/>		
LOAN DETAILS		PLEASE FILL IN CLEARLY
Amount of loan requested £		Shares £
Please ask what you are eligible to borrow		Amount of existing loan £
Collection Point for Issuing Loan		Date loan required
		Paid by BACS <input type="checkbox"/> or Cheque <input type="checkbox"/>
Loan Purpose (e.g. Car, Home Improvements, Christmas etc)		Date of first payment
COMPLETE EITHER		Interest will be charged at a rate of % APR on any reducing balance. Interest is dependent upon loan amount.
Repayment Period	Repayment Instalment £	I also agree to save £ (minimum £1.00) with every loan repayment
Repayment Frequency: Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> 4 Weekly <input type="checkbox"/> Monthly <input type="checkbox"/>		Repayment Method: Collection <input type="checkbox"/> Payroll <input type="checkbox"/> Standing Order <input type="checkbox"/> Paypoint <input type="checkbox"/> If any change to Standing Order or Payroll please submit with appropriate forms.

The Credit Union will carry out a credit reference search on all loans with a licensed credit reference agency. Inaccurate information could result in your loan being refused

Falkirk District Credit Union, 4 Station Road, Grangemouth FK3 8DG

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Ref No 213807)

Consumer Credit Licence No. 642393/1

03/19

(NOT REQUIRED FOR 100% SECURED LOANS i.e. loans less than share balance)

INCOME	WEEKLY £	MONTHLY £	OTHER COMMENTS
Salary/Wages Enter net pay (after tax)			
Benefits (please specify e.g. EESA, Tax Credits, DLA, Child benefit etc)	Type	Frequency	Amount
Pension/Other Income			
CU Payment from Payroll Scheme			To be completed only by those who make payment through Payroll Deduction
TOTAL INCOME			

EXPENDITURE	WEEKLY £	MONTHLY £	OTHER COMMENTS
Rent /mortgage			
Council Tax			
Gas/Electricity			
Mobile/Telephone			
Housekeeping (e.g. food etc)			
Other loans/HP payments/debt agencies			
Credit Cards/ Storecards/catalogues			
CU loans			
Travel/petrol costs			
Insurances			
Entertainment			Broadband/TV package, nights out etc)
Other expenditure			e.g. TV licence
TOTAL EXPENDITURE			

Supporting documentation submitted with application: 3 months consecutive and up to date bank statements

Following our assessment we may offer a reduced loan value. Please tick the box if you are willing to accept a reduced offer <input type="checkbox"/>	
I confirm I have completed this application accurately and honestly. I am in good health and not knowingly suffering from a terminal illness.	
Applicant's Signature	Date
Collector/Interviewer's Signature	Date

Falkirk District Credit Union, 4 Station Road, Grangemouth FK3 8DG

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Ref No 213807)

Consumer Credit Licence No. 642393/1

03/19