



# Phibsboro & District Credit Union Limited

390-392 North Circular Road, Phibsboro, Dublin 7.

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## LOAN APPLICATION INFORMATION FORM

Account Number: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

How long at present address: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

Loan required: € \_\_\_\_\_ Purpose of Loan: \_\_\_\_\_

Personal Details			Employment Status						
Marital Status: (Please tick) Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Partnered <input type="checkbox"/>			Employer Address						
Home (Please tick) Rented <input type="checkbox"/> Owned <input type="checkbox"/> Living with parents <input type="checkbox"/> Other <input type="checkbox"/>			Occupation Full time <input type="checkbox"/> Part-time <input type="checkbox"/> Permanent <input type="checkbox"/>						
No. of Dependent Children			How long with present employer						
Partner's Credit Union Account Number			Partner's Employment Status						
A/c No.:			Employed <input type="checkbox"/> Unemployed <input type="checkbox"/>						
<p>I authorise Phibsboro &amp; District Credit Union Limited to process and retain data provided by me in respect of this application, to seek and provide credit references (searches), to record details of any transaction which may result from this application with Irish Credit Bureau Limited (ICB) and ICB to record, retain and disclose to its members details of such searches for a period of one year. I/We acknowledge that Phibsboro &amp; District Credit Union Limited and/or ICB are permitted to disclose any material misstatement of fact contained in the application for financial accommodation to its members and relevant bodies. I/We consent to any such application being processed, recorded and retained by ICB.</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> Signed: _____</p>									
Household Income (Please tick)		W	F	M	Recurring Debts (Please tick)		W	F	M
Applicant's Net Income	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mortgage	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner's Net Income (if applicable)	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rent	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Welfare	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bank Loans	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One Parent Allowance	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Credit Cards	Minimum Monthly Payment €	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pension	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Credit Union Loans	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Income	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other Loans (1)	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					Other Loans (2)	€	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL NET INCOME</b> €					<b>TOTAL</b> €				

\* Proof of income required for all loans in excess of shares.