Loan Application

Newport Credit Union • 5 Market Arcade • Newport • South Wales • NP20 1FS • Tel: 01633 214913 • E-mail: info@newportcreditunion.co.uk • www.newportcreditunion.co.uk



		Membership N	lo:
Title:	Surname:	Forename(s):	
Address:			
——————————————————————————————————————	Landlina Tal:	Mobile Tel:	
Postcode:	Landline Tel: E Mail:	Mobile Tel:	
Date of Birth:		Insurance No:	
	married Single syou lived at your present address?		ch address:
Address:		Post Code:	
Address:		Post Code:	How long?
Number of de	rependants: Children	Adults	
Landlords r	name:	Housing Ass Name:	
Or :- Home	e owner with mortgage () Living with p	parents / friends Home ow	ner without mortgage

Data Protection Statement: In accordance with the principles of the Data Protection Act 1998, we will use your personal details for the purposes of managing your accounts with Newport Credit Union. Your personal details will be treated confidentially and will only be shared as outlined below, for which purposes we hold a Category H Consumer Credit Licence.

Credit Reference (CRA) and Fraud Prevention Agencies (FPA): We may make searches about you at CRA who will supply us with credit information as well as public information (including the Electoral Register). The CRA will record details of the search whether or not this application proceeds. Credit searches and other information which is provided to us and/or the credit reference agencies about you and anyone with whom you are linked financially may be used by us if credit decisions are made about you or anyone with whom you are linked financially. Where you borrow from us, we will give details of your accounts and how you manage it/them to CRA. This information may be supplied to other organisations by CRA and FPA to perform similar checks and to trace your whereabouts and recover debts that you owe. This information may also be used for the detection and prevention of crime and money laundering as well as the management of your account. In addition, we may ask you to provide physical forms of identification and/or we may telephone you to confirm your identity. We may also make periodic searches at CRA and FPA to manage your account with us.

To prevent or detect fraud, money laundering or to assist in verifying your identity we may make searches of group records and at FPA who will supply us with information. If you give us false or inaccurate information, details may be passed to FPA and other organisations involved in crime and fraud prevention. Your data may also be used for other purposes for which you give your specific permission or, in very limited circumstances, when required by law or where permitted under the terms of the Data Protection Act 1998.

Contact details of the Credit Reference Agencies are available upon request.

Household Expenditur	e					Yes	No
	Weekly	Monthly	Have you ev	er had a DWP So	cial Fund Loan?		
Mortgage / Rent	£	£	Do you have	any CC l's?			
Council Tax £ £		Do you have any CCJ's?					
Child care £ £		Do you have any default notices?					
School bus / meals	£	£	Charging Ord	ders against your	property?		
Food	£	£					
Court Orders	£	£	-	ndischarged ban	•		
TV Licence	£	£		Have you ever been bankrupt or are you in the process of bankruptcy?			
Satellite / Internet	£	£	·				
Home Insurance £ £		£		e process of takir elief orders inclu			
Health Insurance £		£	·		•		
Gas	£	£	Are you currently using the services of a debt management organisation?				
Electric	£	£					
Water Rates	£	£		er yes, or are uns			
Landline telephone	£	£	provide detai	ls or use this spa	ice for any furthe	r miormati	ion)
Mobile	£	£					
Car Tax	£	£					
Insurance	£	£					
Smoking	£	£					
Drinking	£	£					
House Keeping	£	£					
Fuel / Fares	£	£					
Pets Insurance etc	£	£	To	tal Expenditure	£) W	vk/mnt
Other	£	£	Total	Total credit payments			vk/mnt
Total	£	£					
Partners contribution	£	£	lotal ove	erall expenditure	£	w	vk/mnt
Who else do you owe n	noney to? (Pl	ease list all lo	ans, Credit Card	ds, mail order, C	catalogues etc.)		
Lender	Purp	oose	Loan Amount/ Limit	Outstanding Amount	WK/Monthly Payment	To be C	
			£	£	£		
			£	£	£		
			£		£		
				£			
			£	£	£		
			£	£	£		
			£	£	£		
	Tot	al	£	£	£		
]	Do you have a E	Bank or Post (Office account (d	elete as appropri	ate)? Yes	O No) (

Are you in employment?:	Yes \bigcirc	No 🔾	If your partner pays bills plea	se complete	this section
If Yes, Permanen	t 🔘 Temp	oorary (Is your partner in employmen	t? Yes (No (
F 1 0		, ,	If Yes, Perman		
			For how long?		
			Employers name:		
Employers address.					
lob title:			Employers address:		
Job title:	Weekly	Monthly	Job title:	Weekly	Monthly
Net Salary/wages	£	£	Net Salary/wages	£	£
Benefits	L		Benefits		
Tax Credits	£	£	Tax Credits	£	£
Incapacity / ESA	£	£	Incapacity / ESA	£	£
Child Benefit	£	£	Child Benefit	£	£
Income Support	£	£	Income Support	£	£
JSA	£	£	JSA	£	£
DLA / Attendance Allowance	£	£	DLA / Attendance Allowance	£	£
Pensions	£	£	Pensions	£	£
Carers Allowance	£	£	Carers Allowance	£	£
Contributions of children	£	£	Contributions of children	£	£
Other (specify)	£	£	Other (specify)	£	£
Total	£	£	Total	£	£
			wk/mnth on he/she will have to sign the Partn	ers Declarati	on on page 4
Loan Requested					
£	amount in v	vords			
Purpose of loan			Date loan	required:	1 1
Existing loan balance (if know	/n) £	+ New lo	pan £ = Total £		
Repayments to be made: we	eekly / 2 wee	ekly / 4 weekly /	monthly Over: yrs	mtl	าร
By: Cash (under £1,000 only)) C Sta	nding Order (Payroll PayPoint		
I would like to pay in instalme	ents of: £	Sta	arting on / /		
I will continue to save in addit	tion £	To	al proposed Payment of savings an	nd loan: £	
If approved would you like the How would you prefer your load	•		ed to your registered address? Yes		No
Cheque:) Who wou	ld you like the C	Cheque made payable to?		
	Where w	ould you like to	cash your cheque?		
Bank Transfer:		-	oan is accepted you will need to pro	ovide full bar	ık details.)
Transfer to CU Account) Please s _l	pecify which acc	ount:		

Partners Declaration:						
		tails as part of your overall income in applying for tion to be used in considering the loan and its re		partner \	will nee	d to sign
Partners name:		Partners Signature:		Date:	/	/
Partners date of birth:	/ /					
Formal Declaration:						
applicable) I further declare that full complete. I understand the pito have deliberately provided fals	the informate ovision of factorial or mislea.	I that I have/have not* been diagnosed as having a tion I have given on this form is, to the best of malse information is fraud and the credit union manding information. I acknowledge that Newport Croans are subject to Credit Committee approval and	y knowledge a y take appropr edit Union ma	and belie iate action y verify	f, accui on if I a	rate and m found
Are you happy to receive information (Please note we will not disclose		atements by e mail instead of post?. Yes to any third parties)	s No			
Signature:		Da	ate: /	/		,
To be completed by colle	ction poi	nt				
Application completed and ac	cepted by:		Date:	/	/	
Collection Point:						
If successful would the custor	ner prefer	to collect the paperwork from this collection	point? Yes		No (
Additional Information:						
Head Office use only						
Experian search reqd	Signed		Date	/	/	
				,	,	
Equifax search reqd	Signed		Date —	/	1	
Further Action Required						_
Approved / Refused	Signed _		Date	/	/	
Approved / Refused	Signed _		Date	/	/	,
Pending / Reason						
Informed of decision Tel / Tex	xt / In pers	on Signed	Date	/	/	
Loan No.	Loan	amount: Loan &	Interest:			
Loan agreement prepared by	:	Transfered to:				
Loan agreement returned:		Date	1 1			
Chq No.		Bacs Payment ID No:				
Chq Processed By:		Bacs Processed By:) Date	1	1
Undebau Credyd		Handed over by:		Date	/	1

