



# Wesleyan Holiness Co-operative Credit Union Ltd

"Neville O. Badenock Building" Bank Hall Main Road, St. Michael, Barbados, W.I.

Tel: (246) 435-2227, Email: wesleycredit@caribsurf.com, website: www.wesleyancoop.com

## LOAN APPLICATION FORM

### PERSONAL INFORMATION

Applicant's Last Name: \_\_\_\_\_ Applicant's First Name: \_\_\_\_\_ Spouse's Full Name: \_\_\_\_\_

National Reg No. \_\_\_\_\_ Spouse's Reg No. \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ mm/ dd/ yyyy Number of Dependents: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ Phone (Work): \_\_\_\_\_ Phone (Mobile): \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_ Are you a member? Yes  No

### GENERAL INFORMATION

Book No. \_\_\_\_\_ Date Joined \_\_\_\_\_ Are you a member of another credit union? Yes  No

Shares: \_\_\_\_\_ If 'Yes' Please list the credit unions below

W/D Shares: \_\_\_\_\_ 1. \_\_\_\_\_

Deposits: \_\_\_\_\_ 2. \_\_\_\_\_

Total Shares & Deposits \_\_\_\_\_ 3. \_\_\_\_\_

Current Loan Balance: \_\_\_\_\_ 4. \_\_\_\_\_

Current LOC Balance: \_\_\_\_\_ 5. \_\_\_\_\_

Required Loan Amt: \_\_\_\_\_ 6. \_\_\_\_\_

Reason for Loan: \_\_\_\_\_

### FINANCIAL INFORMATION (Details of existing loans including hire-purchase agreements)

Company Name	Loan Agreement Date	Total Encumbrance	Loan Balance	Monthly Payments
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Are all Loan Repayments Up-to-date? Yes  No

If 'No' state reason: \_\_\_\_\_

\_\_\_\_\_



# Wesleyan Holiness Co-operative Credit Union Ltd LOAN APPLICATION FORM (cont'd)

## FINANCIAL COMMITMENTS

Annual Salary inc. Allowances \_\_\_\_\_

Mthly Salary & Allowances (Net) \_\_\_\_\_

Less: Food \_\_\_\_\_

    Utilities \_\_\_\_\_

    Rent \_\_\_\_\_

    Vehicle Maintenance \_\_\_\_\_

    Loan Repayments \_\_\_\_\_

    Life Insurance \_\_\_\_\_

    Personal Expenses \_\_\_\_\_

    Property Maintenance \_\_\_\_\_

    Other Expenses \_\_\_\_\_

    Total Expenses \_\_\_\_\_

Amt. Available to Service Loan \_\_\_\_\_

## GUARANTOR INFORMATION

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

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

Occupation: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_ (H) \_\_\_\_\_ (W)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_  
mm/ dd/ yyyy

### COMMITMENT (Official Use ONLY)

Monthly Payments including Interest : \_\_\_\_\_

No. of Months/Years: \_\_\_\_\_

Monthly Payments to be made on: \_\_\_\_\_

### NB: MEMBER MUST BE PRESENT THE DAY OF THE MEETING

The information given on this Loan Application Form is correct to the best of my knowledge.  
Should my loan application be approved, I intend to honour my commitment to repay the loan within the specified period.

\_\_\_\_\_  
Applicant's Signature:

\_\_\_\_\_  
Date: mm/ dd/ yyyy

## APPROVED

\_\_\_\_\_  
Chairperson

\_\_\_\_\_  
Date: mm/ dd/ yyyy

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Date: mm/ dd/ yyyy

\_\_\_\_\_  
Other Members

\_\_\_\_\_  
Date: mm/ dd/ yyyy

## COMMENTS