

UNITED ENTERPRISE CREDIT UNION LIMITED LOAN APPLICATION

Depart, partner, propper with up.									
APPLICATION DATE:			ACCOUNT NUMBER:						
I hereby apply for a loan in the amount of (\$			or, I hereby apply for a						
			consisting of e	xternal debt (\$) and present credi				
(\$) which is									
			SECTION A:	APPLICANT INFORM	<u>MATION</u>				
LAST, FIRST NA	AME, MIDDLE N	NAME		BANK ACC	C#		1	TIN#	
DATE OF BIF	RTH	AGE		NATIONAL REGIS	TRATION	NO. OF DEPENDENTS			
NAME	E OF SPOUSE		MARTIAL STATU		ATUS	AGES OF DEPENDENTS			
CURRE	NT ADDDESS			FORMER ADDRE	CC (If less than 1		T F11	FDUONE	
CURRENT ADDRESS			NO. OF YEARS AT ADDRESS	FORMER ADDRESS (If less than 1 year)			IELI	EPHONE	
							FΜΔΙΙ	. ADDRESS	
			SECTION B: EN	IPLOYMENT INFO	RMATION				
CURRENT EMPLOYER:									
EMPLOYER'S ADDRESS:				TELEPHONE:		EN	1PLOYN	MENT STATUS	
LIVII LOTEN 3 ADDINESS.				TEELI HONE.					
POSITION:					APPLICATION SALARY				
How long with the comp	-		YEARS		SPOUSE'S SALARY				
(if less than 5yrs name previ	ous company)				OTHER - ALLOWANCES				
SPOUSE'S EMPLOYER					TOTAL FAMILY INCOME				
SPOUSE'S POSITION			SECTION	C: ASSETS & LIABIL	NET PAY				
CHARES/SAVINGS IN			SECTION	C. ASSETS & LIABIL	MOTOR VEHICLE OWNER	MOD	E I	YEAR	
SHARES/SAVINGS IN CREDIT UNION	\$		YES NO				EL	TEAN	
HOMEOWNER	\$				VEHICLE VALUE	\$			
	110				GODDARD'S SHARES		10	VALUE:	
SAVINGS IN BANK	\$			LIADILITIES	OTHER PROPERTY	YES I	VO	VALUE:	
				<u>LIABILITIES</u>		MONT	шv		
NAME OF CREE	DITOR		DESCRIPTION (AUTO, HOME ETC.)			PAYMENTS		BALANCE OWING	
				-					
			SECTIO	ON D: EXPENDITUR	<u>{E</u> □				
RENT		MORTGAGE		CREDIT CARD		HIRE PURG	CHASE		
UTILITIES		MEDICAL PROPERTY		CAVE SHEPHERD		OTHER TOTAL			
FOOD		TAXES		MASSY CARD		EXPENDIT	URF		
		.,,,,,,		RATIO %			V.1.2		
MONTHLY INCOME MONT		MONTH	MONTHLY DEBT UEC		CU LOANS	DTIR (%)	TDSR (%)	
	"	SECTION	NE: REFERENC	ES (NOT LIVING AT	SAME ADDRESS)				
NAME OF REFERENCE				REFERENCE # 2					
ADDRESS		ADDRESS							
RELATIONSHIP		RELATIONSHIP MOBILE TELEPHONE (W)(H) MOBILE							
TELEPHONE (W)(H)	ON DROVIDED TO IT BY MA				ORIZED TO OBTAIN ANY INFORMATION IT R		F TO MAY/O	ID CDEDIT HISTORY OR	
APPLICATION FOR CREDIT AND ANY SUCI UECU LTD IS FURTHER AUTHORIZED TO D	H SOURCE IS HEREBY AUT DISCLOSE TO ANY CREDIT ISTORY OR INFORMATION	HORIZED TO PROVIDE AN BUREAU, REPORTING AGI AS DEEMED APPROPRIAT	Y SUCH REQUESTED INFO ENCY, BUSINESS, FINANCI TE, LAWFUL AND NECESSA	ORMATION. IAL INSTITUTION OR PERSON WITH ARY IN THE SOLE DISCRETION OF U	H WHOM I HAVE ENTERED INTO OR PROPOS JECU LTD OR EXPRESSLY PROVIDED BY LAW	SE TO ENTER INTO	A BUSINES	S OR FINANCIAL RELATIONSHIP	
	APPLICANT'	S SIGNATURE	JOINT MEM	IBER SIGNATURE	GUARANTOR 'S SIGNATURE	SPOUS SIGNAT		STAFF DISBURSING	
Signatures					J.G.W.TORL	JIGHAI	J112		

		APPLICANT'	S SIGNATURE	JOINT MEN	MBER SIGNATURE	GUARANTOR 'S SIGNATURE	SPOUSE'S SIGNATURE	STAFF DISBURSING
Signatures	→							
Dates	→							
SECURITY		Assignment of Policies:	Life Insurance		Shares in Company		Term Insurance	
REQUIREMENTS	Legal Mortgages			Land		Chattel Mortgages		
REQUIREIVIENTS			Bill of Sale		Other			

	SECTION	F: ASSESSME	NT & RECOMI	MENDATION (BY LO	DANS OFFICER OR OTHER	STAFF)				
CHARACTE	CHARACTER CAPACITY COLLATER			LLATERAL						
						SAVING WHILE	REPAYING LOANS			
CCB RATING										
RECOMMENDATIONS										
EXPOSURE - The total un	secured					REGULAR SHARES	•			
amount is now \$13,500	Secured			SECURITY ASSIGN	NED TO PREVIOUS LOAN	NEGOLAN SHANES				
	ΟΔΝ ΔΡΡΙΙΟΔΤ	ION & OR CO	ISOLIDATION	AMOUNT LOAN	REPAYMENT PERIOD & I	NTEREST RATE				
					ember from Section C - YE					
REGULAR LOAN AMOUN		opportunities to	consonaute e		OLIDATED LOANS	S NO				
	I DISBUKSED	NACNITU/C)		LOAN DURATION	ULIDATED LUANS	NAONITU/C)				
LOAN DURATION		MONTH(S)				MONTH(S)				
LOAN REPAYMENT		INITEDEST DATE	DED ANNUA	LOAN REPAYMENT		INTEREST DATE OF	ED ANNUA			
		INTEREST RATE		VIV DEDUCTION 8	ALLOCATION	INTEREST RATE PI	EK ANNUIVI			
		<u>IVIUI</u>	NIMLY / WEE	KLY DEDUCTION &						
	WEEKLY				NEW LOANS ALLOCATION					
DEDUCTIONS	BI WEEKLY			ALLOCATIONS	DEPOSIT/ TRANSFER					
	MONTHLY				REGULAR SHARES					
				REQUIRED BEFORE						
	it from employe	er detailing inco	me and deduc	tions or most recent	salary slip (2 months or 4	weeks) Note: First	time applicants			
should provide both		2 1 5 1	.	**1	n. (
· Self-employed perso										
· Proof of Address (Uti	ility Bill, Bank St	atement or A si	gned letter fro	m co-habitant, thei	r utility bill and a copy of th	neir identification)				
	ı			ı						
Appliance/Furniture	· Letter/invoice	confirming iter	ms nurchased	Medical	· Letter/Quotation from D	octor				
/ ippliance/r armeare	Lettery invoice		no parenasea	Wiedical						
	· Ouote/Itinera	ry from Airline	or Travel		· Acceptance letter from o	college/university/	educational			
Travel	Agency/Hotel	ily iloni Allinie	or maver	Education	institution		•			
	Agency/Hotel				Invoice					
					· Letter from Vendor stati	Letter from Vendor stating sale price and address of				
				Purchasing Land /	Vendor's Attorney					
Weddings	· Quotation for	expenses to be	incurred	Property	Copy of Certified Surveyor's Plot					
				Valuation of land or property being purchased.						
					variation or land or prop	erty being parenas				
	· Quotation cor	nfirming purcha	se price from		· Letter of certification of	ownership from ve	endor .			
		cifications of th			Confirmation of sale price					
Vehicle(New)		onfirmation of co		Vehicle (Used)	d) .Roadworthy Certificate & Valuation Report					
	coverage		Jp. cc		.Quotation/Confirmation of comprehensive coverage.					
	coverage				. Quotation Committation of comprehensive coverage.					
Vehicle Repairs /	· Detailed quot	ation of expens	es to be	Business Loans	· 3 Months Bank Statements					
Insurance	incurred · Rer	newal notice fro	m Insurer	Dusiness Loans	Written Reference					
				<u>ACTION</u>						
DATE		_/20		AMOUNT APPROVED	\$					
DATE		/20		REJECTED	\$					
DATE	/	/20		DEFERRED	\$					
Conditions to the appro-	val of the Loan:									
Reason for Rejection:										
Reason for Deferring:										
	/5	Loans with	in Savings		Internal Credit C	ommittee				
Signature of Approving	g / Rejecting	General I		General Manager	Junior Loans		Loans Officer			
Body				General Manager			Louis Officer			
			C	redit Committee						
Chairman				Care Committee		Mambar				
Chairman		-	Secretary	un (Essera Osalia a	Committee	Member				
		ROS		rs (Extra-Ordinary	Committeej					
President			V. President			Treasurer				
Secretary	Member									
Supervisory Committee (Extra-Ordinary Committee)										
Chairman Secretary Member										
Date Disbursed	Cheque	Amount		gnature		Remarks				
	25400			· · · · ·						
						DATE COMPLETED	STAFF INITIALS			
						DATE CONTRETED	STAFF IIVITIALS			
İ										



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DIRECT DEPOSIT FORM

Please provide a copy of the header from your financial institution which bears the account number. The part of the statement which has the financial details of your account is not required.

FULL NAME OF MEMBER:			
FIRST NAME: M	IDDLE NAME(S):	SURNAME(S):	ACCOUNT NO:
ADDRESS OF MEMBER:			
NATIONAL REGISTRATION NO.			
BANKING INSTITUTION:			
CIBC/FIRSTCAR	IBBEAN BANK 🔲 FIRST CIT	IZENS BANK L SCOT	IA BANK
REPUBLIC BANK	BARBADOS \square ROYAL BA	NK	
BANK ACCOUNT NO:			
		☐ CHEQUING ☐ SAVIN	igs
BRANCH LOCATION	BRANCH CODE	SWIFT CODE	
	I		
BRANCH LOCATION informati	ion should match information on the Ban	k Statement provided.	
·	•	-	
	d directly into your bank account there		
provide ALL the inform information, payment v	ation requested above. If you submit the	ne form with incorrect	
mormation, payment	viii be delayed.		
DECLARATION			
Please read and sign below:			
I have read and understand t	he information on this form. I declare th	hat the information that I have n	provided on this
form is correct.		nat the miorination that I have p	
_			_
NAME (Print): I			
hereby authorise you to deposit my req	uested payment(s) to my account as pe	r the information provided above	
SIGNATURE:	DATE	MONTH	YEAR