## LOAN APPLICATION PERSONAL CREDIT





Name of Credit Union:				
Branch:				
	1,21,21-10,410,11			
DATE OF BIRTH (DD/MM/YY)	T.R.N.	ACCOUNT#		
PRESENT HOME ADDRESS				
MAILING ADDRESS IF DIFFERENT FROM HOME ADDRESS				
PREVIOUS HOME ADDRESS YEARS THERE				
	RELATIONSHIP	TELEPHONE #		
STATUS	NGLE DIVORCED	DATE OF MEMBERSHIP (DD/MM/YY)		
10.24				
YEARS THERE	OCCUPATION/TYPE	E OF BUSINESS		
EMPLOYEE#	TELEPHONE #			
YEARS THERE	OCCUPATION/TYPE	OCCUPATION/TYPE OF BUSINESS		
ADDRESS OF PREVIOUS EMPLOYER				
CT III				
3. SPOUSE'S EMPLOYMENT INFORMATION  NAME OF SPOUSE (SURNAME, MAIDEN NAME (if applicable), FIRST NAME, MIDDLE NAME)				
NAME OF EMPLOYER YEARS THERE				
ADDRESS OF EMPLOYER				
NAME OF PREVIOUS EMPLOYER YEARS THERE				
ADDRESS OF PREVIOUS EMPLOYER				
DATE OF BIRTH (DD/MM/YY)	T.R.N.	MEMBER ACCOUNT #		
PRESENT HOME ADDRESS				
MAILING ADDRESS IF DIFFERENT FROM HOME ADDRESS				
PREVIOUS HOME ADDRESS YEARS THERE				
	RELATIONSHIP	TELEPHONE #		
# OF DEPENDENTS STATUS (MARRIED, SINGLE, DIVORCED)				
N				
YEARS THERE	OCCUPATION/TYPE	E OF BUSINESS		
	TELEPHONE #			
YEARS THERE	OCCUPATION/TYPE OF BUSINESS			
ADDRESS OF PREVIOUS EMPLOYER				
	YEARS THERE  STATUS MARRIED SIN  YEARS THERE  EMPLOYEE #  YEARS THERE  YEARS THERE  DATE OF BIRTH (DD/MM/YY)  YEARS THERE	OWN, RENT, OTHE HOME TELEPHONE YEARS THERE STATUS MARRIED SINGLE DIVORCED  YEARS THERE OCCUPATION/TYPE EMPLOYEE # TELEPHONE #  YEARS THERE OCCUPATION/TYPE TELEPHONE #  VEARS THERE OCCUPATION/TYPE TELEPHONE #  DATE OF BIRTH (DD/MM/YY) T.R.N. OWN, RENT, OTHE HOME TELEPHONE YEARS THERE E-MAIL ADDRESS RELATIONSHIP SPOUSE'S NAME  ON  YEARS THERE OCCUPATION/TYPE TELEPHONE #		

## LOAN APPLICATION - PERSONAL CREDIT

6. CO-MAKER'S	INFORMATION					
NAME OF CO-MAKER (SUR)	AME OF CO-MAKER (SURNAME, FIRST NAME, MIDDLE NAME)  DATE OF BIRTH (DD/MM/YY)			T.R.N.	MEMBER ACCOUNT #	
PRESENT HOME ADDRESS			OWN, RENT, OTHER	YEARS THERE		
MAILING ADDRESS IF DIFFERENT FROM HOME ADDRESS			HOME TELEPHONE #	FAX/CELLULAR #		
PREVIOUS HOME ADDRESS YEARS THERE			E-MAIL ADDRESS			
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	TELEPHONE #		
OF DEPENDENTS STATUS (MARRIED, SINGLE, DIVORCED)			SPOUSE'S NAME			
				O COOL O TV AVIL	ACT 1 1 CONTRACT PARTIES AND STREET	
. CO-MAKER'S	EMPLOYMENT INFORMAT	ION				
NAME OF EMPLOYER YEARS THERE			YEARS THERE	OCCUPATION/TYPE OF BUSINESS		
DDRESS OF EMPLOYER			·	TELEPHONE #		
AME OF PREVIOUS EMPLO	DYER		YEARS THERE	OCCUPATION/TYPE OF B	BUSINESS	
DDRESS OF PREVIOUS EN	MPLOYER			TELEPHONE #		
. GUARANTOR	SINFORMATION					
AME OF GUARANTOR (SU	RNAME, FIRST NAME, MIDDLE NAME)	DATE	OF BIRTH (DD/MM/YY)	T.R.N.	I.D. #	
RESENT HOME ADDRESS				OWN, RENT, OTHER	YEARS THERE	
MAILING ADDRESS IF DIFFERENT FROM HOME ADDRESS				HOME TELEPHONE #	FAX/CELLULAR#	
AME AND ADDRESS OF E	MPLOYER			E-MAIL ADDRESS		
AME AND ADDRESS OF N	EAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	TELEPHONE #	
OF DEPENDENTS ST	TATUS MARRIED □SINGLE □DIVORCED	SPO	USE'S NAME			
LOAN DETAIL						
OAN PURPOSE		or defined.	(Color of the color of the colo	REPAYMENT SOURCE:		
				SALARY DEDUCTION	E	
OAN AMOUNT: \$			COUNTER STANDING ORDER (A	CCOUNT#		
COLLATERAL SECURITY HE	ELD AND PROPOSED					
O. INCOME AND	EXPENDITURE STATEMI	ENT	0 1 9	alay Pedic	re deservation	
	COME	\$		alay Deduc	\$	
ross Monthly Family Income		Ψ	Car Loan Payment	AT LINDITORL	Ψ	
ess Deductions At Source			Hire Purchase Payme	nts		
et Income (Take Home Pay)			Life Insurance Premiu			
ther Income			Other Loan Payments			
OTAL INCOME			Rent			
			Mortgage, Maintenand	ce		
			Insurance, Home, Vel	nicle		
			Transportation Expens			
TOM:			Utilities - Telephone, \	Vater, Electricity	15.	
			Living Expenses - Foo			
			Educational Expenses			
			Medical, Dental, Option	al Expenses		
			Entertainment			
			Other			
TOTAL EXPENS						

	\$	\$	\$	ASSETS	\$	\$	\$
MORTGAGE (financial institution, branch)	PAYMENTS Current (Y/N)	MONTHLY PAYMENTS	BALANCE OUTSTANDING	REAL ESTATE (incl. address, volume and folio numbers)	INSURANCE COVERAGE AMOUNT	MEMBER VALUATION	LOANS OFFICER VALUATION
IEN HOLDER				CHATTELS (Motor vehicle, Furniture, Equipment, Other)			
				Equipment, Other)			
OTHER AMOUNTS OWED excluding the above)				OTHER ASSETS (share certificate, etc)			
				j,			-
IFE INSURANCE POLICIES loans)				LIFE INSURANCE POLICIES (insurer, policy date, face value)	PREMIUMS Current (Y/N)	C.S.V.	C.S.V.
OANS (financial institution, granch)				DEPOSIT ACCOUNTS (financial institution, branch)	ACCOUNT #	BALANCE	BALANCE
						×	
		1	1	TOTAL ASSETS	I	1	1

FOR CREDIT UNION USE ONLY						
CONNECTED ACCOUNTS	S OTHER CREDIT UNION SERVICES					
A/C #		IN USE	NEEDED		IN USE	NEEDED
A/C #	REGULAR DEPOSITS			REGULAR LOANS		
A/C #	TERM DEPOSITS			BUSINESS LOANS		
A/C #	GOLDEN HARVEST			LINE OF CREDIT		
A/C #	LONG TERM DEPOSIT			ACCESS PLUS		
A/C #	CHRISTMAS/VACATION DEPOSIT	г		FINANCIAL COUNSELLING		
A/C #	FAMILY INDEMNITY PLAN			OTHER (SPECIFY)		
A/C #	BLUE CROSS HGM PLAN					
INTERVIEWED BY: NAME/TITLE  CREDIT SCORE:  LOANS OFFICER'S ESTIMATED SURPLUS \$  REGISTRATION FEES \$  OTHER FEES \$  SHARE BALANCE \$  DEPOSIT BALANCES \$  CURRENT LOAN BALANCES \$  REPAYMENT PERIOD  INTEREST RATE  PROPOSED MONTHLY REPAYMENT \$						
	REPAYMENT RECORD O ORIGINAL LOAN BALANCE \$					
	DATE OF LAST LOAN:			_		-
	REPAYMENT RECORD: DEXCELLENT DOOD POOR					
LOAN COMMITTEE/CREDIT COMMITTEE DECISION: DISAPPROVED  ON A LOAN OF \$						
MEMBERS OF COMMITTEE		WAS APPRO OTHER COM		ROVED ON THE FOLLOWING (	CONDITION	VS/
	·					
					12.	
			9			

	LOAN AGREEMENT		Loan No	oan No	
			Cheque No		
Amount Borrowed. \$			A/C No		
Terms \$			Final Payment due		
	Name of Cre				
,	7.4			20	
FOR VALUE RECEIVED I/We,					
notice) jointly and severally promise to pay	to the	• • • • • • • • • • • • • • • • • • • •			
or order the sum of			(\$	) as follows:-	
	on	20	and		
each succeeding week/month, thereafter, the	e whole sum to be repaid in or	within			
from date; interest to be at					
As Collateral	security for this note said Borro	ower has deposited w	rith said Credit Union.		
In case of any default in payment as immediately due and payable on demand. Twithout giving at least six months notice or build and the same are as a six months and the same are as a six months and the same are as a six months are a six months are a six months are a six months are as a six months are a	This loan shall also become due				
Said principal and co-makers jointly failure to comply with the terms of this linereof after default, shall place this loan in 1	oan together with all costs or	expenses incurred in	the collection of any su		
The Credit Union reserves the right notice to that effect specifying the new rate	to vary the rate of interest pay	able by the Borrow	ver from time to time by	giving to the Borrower, a	
Signature of Witne			Signature of Principal		
Signature of Witne	ss		Signature of Co-maker		
Signature of Witne			Signature of Co-maker		

Signature of Co-maker

Signature of Witness

## GRACE CO-OPERATIVE CREDIT UNION LIMITED LOAN DEDUCTION FORM

an employee c	1				
hereby agree to have the sum of \$ deduc	ted form my salary each month/week				
commencing and pay the full amount to GRACE CO-OP CREDIT					
UNION LIMITED in consideration of their lending me \$ with deduction					
also of \$ for shares until this debt has been liquidated.					
I am aware that these deduction cannot be stopped without written advice from GRACE					
CO-OP CREDIT UNION LIMITED and should my se	ervice be terminated with the				
company. I hereby agree that the balance of my account	nt at that time be deducted from my				
salary or any other perquisites that may be due to me.					
LOANS SHA	RE DEPOSIT TOTAL				
CURRENT DEDUCTIONS	•				
INCREASE/DECREASE					
TOTAL NEW DEDUCTIONS					
DATE SIGNATURE OF BORROWER SIGNATURE OF WITNESS	· · · · · · · · · · · · · · · · · · ·				
Dear Sir					
Kindly pay to GRACE CO-OP CREDIT UNION L	IMITED the sum of  \$ from				
proceeds of my pension fund.					
Name: 8ign	ature:				