



Kilcloon
Credit Union

LOAN APPLICATION FORM

The Square, Kilcock, Co. Kildare.

Tel: (01) 6287824

E-mail: info@kilcu.ie

PERSONAL DETAILS

Name:	Account Number:
Address:	Tel: (Mobile)
D.O.B / /	Tel: (Home) (Work)
Owner or Tenant: Living with Parents: <input type="checkbox"/>	Can we contact you at work Yes <input type="checkbox"/> No <input type="checkbox"/>
How long at current address:	E-mail:
Previous address:	Spouse/Partner's name:
	A/c Number if any:
How long at this address:	Number of Dependents:

EMPLOYMENT DETAILS

Employer's Name:	Spouse/Partner's Employer:
Employer's Address:	Employer's Address:
Position Held:	Position Held:
Length of Service:	Length of Service:
Net pay per week/fortnight/month: €	Net pay per week/fortnight/month: €
Other income: €	Other income: €
Are you: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Homemaker <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed	Are you: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Homemaker <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed
Social Welfare Recipients... What type of Welfare:	Amount of Payment €

LOAN DETAILS

Loan Purpose:	Loan Repayment: € week/fortnight/month
Loan Amount: €	Inclusive of Interest:
Existing Loan: €	Pledge to shares: €
New Loan Balance: €	TOTAL COMMITMENT TO CREDIT UNION
Share Balance: €	€ week/fortnight/month

LOAN REPAYMENTS

COMMITMENTS/OTHER DEBTS

Name	Dept Outstanding	Repayment Amount	Name	Dept Outstanding	Repayment Amount
Other Credit Unions:	€	€	Mortgage or Rent	€	€
Bank overdraft:	€	€	Bank Loan:	€	€
Credit Cards:	€	€	Motor Loan:	€	€
Catalogue loan	€	€	Money Lender:	€	€
			Total Debt repayments:	€	€

Are you a home owner with a mortgage?

Yes ☐ No ☐

Is your mortgage in arrears?

Yes ☐ No ☐

Are any of your other commitments/Debts in arrears?

Yes ☐ No ☐

If required can you provide a suitable guarantor (if yes) separate form to be completed

Yes ☐ No ☐

SAVINGS HELD

	Monthly Amount	Total Balance		Monthly Amount	Total Balance
Credit union	€	€	Bank	€	€
Other financial institution	€	€	Pension/PRSA contribution	€	€

TERMS & CONDITIONS

DATA PROTECTION

(Consent to Use and Disclose/Data Protection Acts 1998 and 2003 and Section 71 of the Credit Union Act 1997). I understand that the data Protection Acts, 1998 and 2003 ("the DPA"), my consent may be required for the Credit Union to process personal data which it may have in its possession concerning me (including disclosure to third parties.) I note that this personal data may include personal sensitive data, such as data about my health, within the meaning of the DPA, the processing of which requires my explicit consent. I also understand that under Section 71 of the Credit Union Act 1997, the Credit Union, subject to exceptions listed in this Section, shall not disclose or permit to be disclosed, without my consent, any information that concerns an account or transaction of mine with the Credit Union.

For the purpose of assessing my application for membership, assessing any loan applications which I may make to you and generally for administering and monitoring any accounts I have with the Credit Union, including any loan accounts I have from time to time with you, I consent:

- 1 (i) to you seeking information concerning applications for loans and my credit history from the date of my original consent from any Credit Union and for that purpose you may disclose any relevant information in any loan application which I may make to you or which you may have concerning me to any Credit Union;
- (ii) to any Credit Union disclosing information to you concerning applications for loans and my credit history from the date of my original consent with any such Credit Union;
- (iii) to you disclosing of any information in any application (including loan applications) or in respect of any account or transaction of mine with the Credit Unions from the date of my original consent to officers or employees of the Irish league of Credit Unions for the purpose of fulfilling our requirements and under the Savings Protection Scheme if such scheme is operated on behalf of the Credit Union by the Irish League of Credit Unions; and
- (iv) to the processing of any information relating to me, either contained in this form or any other form or application, for the purpose of assessing applications and administering any accounts I maintain with the Credit Union.
- 2 From time to time the Credit Union may use your details to inform you of goods and or services which may be of interest to you. The use of your details for marketing purposes will depend on the preferences that you express below:
- ☐ **Opt In (marketing by e-mail, text message and fax)**
I consent to the Credit Union, or third parties selected by the Credit Union, informing me of goods or services that may be of interest to me by e-mail, text or fax.
- ☐ **Opt Out other forms of marketing)**
Please tick the above box if you do NOT want the Credit Union or third parties selected by the Credit Union, to inform you by phone or letter, of goods or services that may be of interest to you.

IRISH CREDIT BUREAU CONSENT

The information that is held on the ICB database relates to credit agreements, between these ICB members and their customers/members. A condition of such agreements is that the customer/member agrees that the financial institution/Credit Union may use the data supplied for the purpose of credit checking. Consequently, where an individual enters a credit agreement with an ICB member, details of the individual's performance in complying with the terms of the agreement are input into the ICB "credit file" database, which may be accessed by all member institutions of ICB. Each time a person applies for credit from an ICB member, that institution accesses the ICB's "credit file" to ascertain the applicants performance under any previous credit agreements with ICB members.

3. In addition to paragraphs 1 and 2 above, I/We further consent to and authorise to process and retain data provided by me/us in respect of this application, to see and provide credit references (searches), to record details of any transaction relating to a loan or other credit which may result from this application with Irish Credit Bureau Ltd (ICB) for a period of 5 years from the date of closure of the loan and ICB to record, retain and disclose any material misstatement of the fact contained in the application for financial accommodation to its member and relevant bodies.

4. I/We consent to any such application being processed, recorded and retained by ICB. Please note that you have the right to access personal data held about you by the Credit Union and to correct any inaccuracies in such data.

CENTRAL CREDIT REGISTER

Under the Credit Reporting Act 2013 lenders are required to provide personal and credit information for credit applications and credit agreements of €500 and above to the Central Credit Register. This information will be held on the Central Credit Registration and may be used by other lenders when making decisions on your credit applications and credit agreements.

Please note that you have the right to access personal data held about you by the Credit Union and to correct any inaccuracies in such data.

Member 1 Signature	X
Print Name:	
Date: / /	

Member 2 Signature	X
Print Name:	
Date: / /	

DECLARATION

- I/we confirm I/we have declared all indebtedness to other Credit Union, bank or loan agency either as a borrower or guarantor.
- I/we confirm that I have the financial means to repay this loan, and that it will be used for the purpose stated overleaf.
- The statements herein are made for the purpose of obtaining the loan and are true to the best of my knowledge and belief.
- It has been explained to me that my shares will be held as security for this loan.
- I/we confirm that I/we have read the terms and conditions above

I confirm that I am fit to follow my normal occupation ☐ Yes ☐ No.

Member 1 Signature	X
Print Name:	
Date: / /	

I confirm that I am fit to follow my normal occupation ☐ Yes ☐ No.

Member 2 Signature	X
Print Name:	
Date: / /	

Witness Signature	X
Print Name:	
Date: / /	

Witness Signature	X
Print Name:	
Date: / /	

OFFICE USE ONLY	Application Decision Status		Approved Signatories	Date: / /
	Loan Officer	Approved <input type="checkbox"/> Rejected <input type="checkbox"/>		
	Manager	Approved <input type="checkbox"/> Rejected <input type="checkbox"/>		
	Credit Committee	Approved <input type="checkbox"/> Rejected <input type="checkbox"/>		
	Board	Approved <input type="checkbox"/> Rejected <input type="checkbox"/>		
	Amount Applied for €.....	Conditions:		
Amount Approved €				
				Maturity Date:
				Cheque No.
				Issued Date: