

This form must be ***completed in full***prior to submission, failure to do so it will result in this application being returned to you and will delay a decision. Please ensure you enclose the 2 most recent months bank statements for all accounts you hold with this application. Please note the maximum first loan amount that can be considered is £500.

**FAMILY LOAN APPLICATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **ABOUT YOU**  **LOAN APPLICATION** |  | **EMPLOYMENT** | |
| Membership No. | Employment status (circle as appropriate)  Employed / Unemployed / Self Employed / Retired / Other  (Other please state) | |
| Date of Birth |
| Surname |
| Forename | Full Time  Part time - Average No of hours per week \_\_\_\_\_\_ | |
| Home Address | Employer | |
| Place of work | |
| Work Tel No | |
| Postcode | Position | |
| Length of residence | Length of Service | |
| Home Tel No. | Employee Status  Temporary Permanent  Fixed term Contract – End date\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Mobile No. |
| Previous Address (if less than 3 yrs) |
| **LOAN REQUEST DETAILS** | |
| Residential Status  Home Owner Private Tenant  Housing Assoc Living with Parents  Other (please state) | Amount Requested | |
| Purpose of Loan | |
| Repayment Method – **Child Benefit** Term - **1 year** | |
| Name of Housing Association | Child Benefit No | |
| Paid Weekly Paid 4 weekly | |
| Your Email | Number of children (under 16) | |
| Ages of Children | |
| National Insurance Number | Youngest Childs Date of Birth | |
| Are you in arrears with your Rent / Council Tax / Utilities / Mortgage? | | | Yes / No |
| Have you missed any payments to creditors in the last 12 months? | | | Yes / No |
| Are you or have you ever been or are you applying for Bankruptcy / Debt Relief Order / IVA / Debt Management Plan / County Court Judgement | | | Yes / No |
| If you have answered yes to any of the above please provide details here. | | | |

**INCOME & EXPENDITURE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Income** | **Weekly** | **Monthly** |  | **Expenditure** | **Weekly** | **Monthly** |
| Wages/Salary |  |  | Mortgage/Rent ***you pay*** |  |  |
| Working tax credit |  |  | Council Tax ***you pay*** |  |  |
| JSA/ESA |  |  | Insurance/house/pet/life |  |  |
| Housing Benefit |  |  | Vehicle costs/petrol/ins |  |  |
| Council Tax Benefit |  |  | Water |  |  |
| Income Support |  |  | Gas/Electric |  |  |
| Child Benefit |  |  | Food & Toiletries |  |  |
| Child Tax Credit |  |  | Travel costs/bus/taxi |  |  |
| Pension/Pension Credit |  |  | Clothing |  |  |
| DLA/PIP |  |  | TV License |  |  |
| Maintenance |  |  | Satellite/Internet |  |  |
| Carers Allowance |  |  | Landline/Mobile |  |  |
| Universal Credit |  |  | Childcare costs |  |  |
| Other Income/Benefit – please list | | |  |  |  |
|  |  |  | Existing Credit | | |
|  |  |  | Loan repayments |  |  |
|  |  |  | Credit/store cards |  |  |
|  |  |  | Brighthouse/Provident |  |  |
|  |  |  | Other expenses |  |  |
| **Total income** |  |  | **Total expenditure** |  |  |

**Data Protection Statement:**

In accordance with the principles of the Data Protection Act 1998, we only use your data for the purposes of managing your account with the West Cheshire Credit Union. Your personal details will be treated in strictest confidence and will only be shared with other agencies for the purposes of credit referencing and debt recovery, for which purpose we hold a category F consumer licence.

**Declaration:**

I declare that the information I have provided on this form is true and accurate for the purposes of me obtaining a loan.

I/we agree to any appropriate credit checks and information vetting being undertaken to assist the West Cheshire Credit Union reach an informed decision regarding this application and understand that this may include employment checks and searches of credit reference agencies.

I declare I am in good health and I know of no good reason why I would be unable to carry out my usual work or why my benefits or other income may change during the term of the loan.

Signature of Applicant: Print: Date:

**If any element of your partner’s income is declared within this application, they must also sign this form in accordance with the above declaration.**

Partner/spouse’s signature: Print: Date:

**PLEASE ENSURE THAT YOU ENCLOSE YOUR 2 MOST RECENT MONTHS BANK STATEMENTS WITH YOUR APPLICATION. WE ARE UNABLE TO PROCESS YOUR APPLICATION UNTIL THESE ARE RECEIVED.**

This form should be returned to West Cheshire Credit Union Ltd at,

**12-16 Brookdale Place, Chester, CH1 3DY**

West Cheshire Credit Union Ltd is regulated by the Financial Conduct Authority and the Prudential Regulation Authority Reg No 227415