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Loan and Mortgage Application

Note: All Loan Applicants must have a Savings/Chequing Account with Clarien Bank that is fully compliant prior to any advance of funds. ☐ New ☐ Increase Term Requested Amount Requested \$ Date (DD/MM/YYYY) Purpose of Request **Applicant - Personal Information** ☐ Ms. ☐ Miss ☐ Other — Please ✓ One ☐ Individual Applicant ☐ Joint Applicant ☐ Guarantor ☐ Trustee Middle Initials Last Name First Name Postal Code Parish Residential Address Years at Previous Address Parish Postal Code Mailing Address (if different from above) Residence: Rent Own Own Free and Clear Live with Relatives Telephone No. Name of Landlord or Mortgage Holder Cell Number Home Telephone Work Telephone ID Type **Email Address** Date of Birth (DD/MM/YYYY) ID Number ☐ Married ☐ Single ☐ Seperated ☐ Divorced ☐ Widowed No. of Dependents ___ _____ Ages ___ Bermudian: Yes No If No, Nationality ____ Date moved to Bermuda (DD/MM/YYYY) Start Date (DD/MM/YYYY) Occupation Name of Present Employer Occupation Name of Previous Employer Years of Employment Telephone No. Name of Contact (not currently residing with you) Yes Do you have any outstanding debts with Bermuda Credit Association? No Do you have any outstanding judgements or are you a defendant in any suits or legal actions? Yes No Do you have any obligations as an endorser, co-maker or guarantor? **CIF Number:** Joint Applicant - Personal Information ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Other — Please ✓ One ☐ Individual Applicant ☐ Joint Applicant ☐ Guarantor ☐ Trustee Middle Initials Last Name First Name Postal Code Parish Residential Address Postal Code Years at Previous Address Parish Mailing Address (if different from above) Residence: Rent Own Own Free and Clear Live with Relatives . Name of Landlord or Mortgage Holder Telephone No. Work Telephone Cell Number Home Telephone ID Type **Email Address** Date of Birth (DD/MM/YYYY) ID Number ☐ Married ☐ Single ☐ Seperated ☐ Divorced ☐ Widowed No. of Dependents ___ _ Ages __



Loan and Mortgage Application

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Note: All Loan Applicants must have a Savings/Chequing Account with Clarien Bank that is fully c Joint Applicant - Personal Information Cont.	ompliant prior to any adv	rance or 1	unas.				E CLE INS				
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Bermudian: Yes No If No, Nationality ————————————————————————————————————						- L Dat	e moved	to Bern	nuda (t	DD/MM/	MYY)
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Name of Present Employer	Occupation					- L Sta	rt Date (D	D/MM/Y	YYY)		
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Name of Previous Employer	Occupation					Yea	rs of Emp	loymer	nt		
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Name of Contact (not currently residing with you)				L	eleph	one No).				
Do you have any outstanding debts with Bermuda Credit Association?					Yes	□No			7.0		
Do you have any outstanding judgements or are you a defendant in any sui Do you have any obligations as an endorser, co-maker or guarantor?	ts or legal actions?			H	Yes Yes	No No					
Do you have any obligations as an endorsel, co maker or guarantor.					res	□140			¢		
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I/We hereby declare that the information which I/We have provided to you	in support of this	applica	tion is tru	e and c	omple	ete in a	ll materia	l respe	cts and	d that n	0
information is omitted in relation to any of the items describing my/our lia correctness and completeness of this information and authorise any such p	bilities. I/We author	rise yo	u to conta	act such	pers	ons as	you think	fit to v	erify tl	ne	
I/We hereby authorize the Bank to communicate via email. Yes N		. to you	1.								
,,,,											
I/We authorise Clarien Bank Limited to debit the loan payment from my/our	r account number										
i/ we authorise clarier bank clinited to debit the toan payment from my/our	account number										
										Т	
Signature of Main Applicant						Date	e (DD/MM,	(7777)			
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Signature of Joint Applicant								T			
Signature of Joint Applicant						Date	(DD/MM)	YYYY)			
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Personal Financial Statement

Please complete all sections. (List Income\Expenses) **Income Statement Monthly Income** Applicant's Salary (net) Co-Applicant's Salary (net) Child Maintenance Income Investment Income Rental Income Other Income Bonus Pension **Total Monthly Income Monthly Commitments** Mortgage Rent **Church Tithes** Child Maintenance Payments Installment Payments/Loans: Vehicle **Furniture** Personal Loans Credit Cards - 10% of Limit Others Monthly Obligations Land Tax Home Insurance Life Insurance Miscellaneous **Total Monthly Expenditures** I/We hereby declare that the information provided herein is true and complete in all material respects and that no information is omitted in relation to any of the items describing my/our income and expenses. Signature of Main Applicant Date (DD/MM/YYYY) Signature of Joint Applicant Date (DD/MM/YYYY) For more than two applicants please fill in additional application forms. Loan application checklist: Complete all sections of the application form Provide a quote for item(s) from supplier Employment and income (e.g. pay stub) Rent/Mortgage payments (e.g. receipt for payment) For home purchases/mortgages: Details of insurance on existing home, if applicable Copy of the sales listing or the purchase & sales agreement

Statement of Net Worth		
Current Assets (what I own)		1 · · · · · · · · · · · · · · · · · · ·
Chequing and Savings Accord	unts	Balance
#	270	
#		
#		
Term Deposits		
Investments		
Stocks/Mutual Funds (provide statements)		
What I'm Owed		
Other		
Total Current Assets	\$ [
Fixed Assets		Value
Home Fair Market Value		
Real Estate: Local		
☐ Overseas		
Vehicle		
Household Effects		
Other		
Total Fixed Assets	\$ [
Total Assets	\$□	
Liabilities (What I Owe)		
Mortgage(s) (Disclose Bank)		Balance
Personal Loans (Disclose Bank)		
Credit Cards (Authorized Limit)		
Clarien Bank Limited		
Other		
Other Debts		
	, F	
Total Liabilities	\$	
Net Worth	\$ _	(Total Assets minus Total Liabilities)