



Member Loan Application Form

Local Ethical Banking

PLEASE COMPLETE THIS FORM TOGETHER WITH A BUDGET SHEET
Provide proof of income (1 x current payslip) and a current Bank statement.
SEND TO ESSEX SAVERS: BY FAX, scan, email, post. OR, DELIVER TO ESSEX SAVERS MAIN OFFICE

Title/ Full Name		*Mr/Mrs/Miss/Ms											
Membership No:		New member?		*Yes / No		Age		18 - 24		25 - 34		35 - 49	
								50 - 64		65+			
Address		Postcode:						Telephone:		Day/Work:		_____	
										Evening:		_____	
National Insurance No:		Email:								Mobile:			
Homeowner*		Renting*		Private Landlord		Social Housing		Living with friends/family		NFA		Bank account? *Yes/No	
Household*		Single		Lone parent		Couple		Dependent children?		Yes / No		How many?	
Employment*		Full-time	Part-time	Self	Retired	Student	Unemployed	Incapacity	Other				
Employer's name & address										Years with employer:			
Apply for a loan		£		Date loan to start				Welfare benefits				* Yes/No	
Purpose of loan													
High cost lenders?		*Yes / No		BrightHouse		Greenwoods		Pay Day loans		Provident Financial			
				Pawnbroker		Shopper Cheque		Other (give details)					
To the best of my knowledge and belief I am / am not in good health. If not in good health, please detail the health condition here: I have given due consideration to all other financial commitments and feel confident that I shall be able to make repayments in accordance with my loan and savings repayments detailed below. I understand that loans are subject to loan officer / credit committee decision and availability of funds. I agree that a Credit Reference Agency search can be carried out. <input type="checkbox"/>													
Signature:				Print Name:				Date:					

Financial Information in support of loan application

This information must be provided for your application to be processed. All information is for Essex Savers use only and will be treated in the strictest confidence. Essex Savers is registered with the Data Protection Register

Total income per week / fortnight / month*		£	
Total expenses per week / fortnight / month *Proof of expenses will be required (please complete and return the attached Budget Sheet to support this)		£	
I can afford to pay each week / fortnight / month* (Loan repayment & savings)		Loan: £	Savings: £
How will you make your loan & savings payments?		Payroll deduction	Standing Order
			at a Service Point
Your loan payment options are: a) By Bank transfer* - please provide your bank details ▶ b) Loaded onto your ENGAGE debit card c) Cheque: payable in your name*; cashable at Post Offices* (£500 max); or payable to a third party*		Bank name:	_____
		Sort Code:	____ - ____ - ____
		Account No:	_____
I declare this to be a true statement		*Delete / circle where appropriate	
Signature:		Print Name:	
		Date:	

Emailed*/Faxed*/Posted*/Delivered at Head Office* / Service Point* (*delete) Received by: _____

Essex Savers net Credit Union Ltd, 53 New Street, Chelmsford. Essex. CM1 1AT

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Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm number: 230859