

Loan and Mortgage Application

BANK USE ONLY					
CIF Number:					
Loan Application Number:					

Note: All Loan Applicants must have a Savings/Chequing Account with Clarien Bank that is fully compliant prior to any advance of funds.

Loan Information					
☐ New ☐ Increase Term Requested					
		Amount Requested \$	Date (DD/MM/YYYY)		
Purpose of Request					
Applicant - Personal Information Mr. Mrs. Ms. Miss Other	Please √ On	e Individual Applicant	☐ Joint Applicant ☐ Guarantor ☐ Trustee		
Last Name	First Name		Middle Initials		
Residential Address	Parish	Postal Code	Years at Present Address		
Mailing Address (if different from above)	Parish	Postal Code	Years at Previous Address		
Residence: Rent Own Own Free and Clear Live with R		lord or Mortage Holder Tel	ephone No.		
Home Telephone Work		Cel	l Number		
Email Address Date of Birth (DI	D/MM/YYYY)	ID Type	ID Number		
☐ Married ☐ Single ☐ Seperated ☐ Divorced ☐ Widowed	No. of Dependents	Ages			
Bermudian: Yes No If No, Nationality					
· ,			Date moved to Bermuda (DD/MM/YYYY)		
Name of Present Employer	Occupation		Start Date (DD/MM/YYYY)		
Name of Previous Employer	Occupation		Years of Employment		
Name of Contact (not currently residing with you)		Tel	ephone No.		
Do you have any outstanding debts with Bermuda Credit Association? Do you have any outstanding judgements or are you a defendant in any suits or legal actions? Do you have any obligations as an endorser, co-maker or guarantor? On you have any obligations as an endorser, co-maker or guarantor? On you have any obligations as an endorser, co-maker or guarantor?					
Joint Applicant - Personal Information			CIF Number:		
☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Other	Please ✓ Or	e Individual Applicant	☐ Joint Applicant ☐ Guarantor ☐ Trustee		
Last Name	First Name		Middle Initials		
Residential Address	Parish	Postal Code	Years at Present Address		
Mailing Address (if different from above)	Parish	Postal Code	Years at Previous Address		
Residence: Rent Own Own Free and Clear Live with R	RelativesName of Land	lord or Mortage Holder Tel	ephone No.		
Home Telephone Work	Telephone	Cel	l Number		
Email Address Date of Birth (DI	D/MM/YYYY)	ID Type	ID Number		
☐ Married ☐ Single ☐ Seperated ☐ Divorced ☐ Widowed No. of Dependents Ages					



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Personal Financial Statement

Please complete all sections. (List Inc	come\Exp	venses)				
Income Statement						
Monthly Income	Г					
Applicant's Salary (gross)	F					
Co-Applicant's Salary (gross)	L					
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	Г					
Furniture						
	L					
Personal Loans	L					
Credit Cards - 10% of Limit						
Others Monthly Obligations	Г					
Land Tax	L					
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.						
City Children						
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 checkli	ic+.					
Complete all sections of the		tion form				
Provide a quote for item(s)						
Proof of:						
Employment and income (e.g. pay stub)						
Rent/Mortgage payments (e.g. receipt for payment)						
For home purchases/mortgages:						
Details of insurance on exis	_					
Copy of the sales listing or the purchase & sales agreement						

Statement of Net Worth		
Current Assets (what I own)		Balance
Chequing and Savings Accour	nts	Datance
#		
#	_	
#	_	
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		
Total Liabilities	\$ _	
Net Worth	\$	