

# Personal Loan, Mortgage and Overdraft Application Form

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 \$

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Date (DD/MM/YYYY)

Purpose of Request \_\_\_\_\_

## Overdraft Information

New    Increase   \_\_\_\_\_   Term Requested (3 month minimum)

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Account Number

Currency    BMD    USD   \_\_\_\_\_   Purpose of Request   \_\_\_\_\_   Amount

## Applicant - Personal Information

Mr.    Mrs.    Ms.    Miss    Other \_\_\_\_\_   Please  One    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 Relatives   \_\_\_\_\_   Name of Landlord or Mortgage Holder

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Telephone No.

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Home Telephone

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Work Telephone

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Cell Number

\_\_\_\_\_   Email Address

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Date of Birth (DD/MM/YYYY)   \_\_\_\_\_   ID Type   \_\_\_\_\_   ID Number

Married    Single    Separated    Divorced    Widowed   No. of Dependents \_\_\_\_\_   Ages \_\_\_\_\_

Bermudian:    Yes    No   If No, Nationality \_\_\_\_\_   

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Date moved to Bermuda (DD/MM/YYYY)

\_\_\_\_\_   Name of Present Employer   \_\_\_\_\_   Occupation   \_\_\_\_\_   

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Start Date (DD/MM/YYYY)

\_\_\_\_\_   Name of Previous Employer   \_\_\_\_\_   Occupation   \_\_\_\_\_   \_\_\_\_\_   Years of Employment

\_\_\_\_\_   Name of Contact (not currently residing with you)

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Telephone No.

Do you have any outstanding debts with Bermuda Credit Association?    Yes    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?    Yes    No

CIF Number:	Loan Application Number:

# Personal Loan, Mortgage and Overdraft Application Form

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

## Joint Applicant - Personal Information

Mr.  
  Mrs.  
  Ms.  
  Miss  
  Other \_\_\_\_\_  
 Please  One  
  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 Relatives  
 Name of Landlord or Mortgage Holder \_\_\_\_\_ Telephone No. \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ Cell Number \_\_\_\_\_

Email Address \_\_\_\_\_ Date of Birth (DD/MM/YYYY) \_\_\_\_\_ ID Type \_\_\_\_\_ ID Number \_\_\_\_\_

Married  
  Single  
  Separated  
  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) \_\_\_\_\_ Telephone No. \_\_\_\_\_

Do you have any outstanding debts with Bermuda Credit Association?  Yes  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?  Yes  No

I/We hereby declare that the information which I/We have provided to you in support of this application is true and complete in all material respects and that no information is omitted in relation to any of the items describing my/our liabilities. I/We authorise you to contact such persons as you think fit to verify the correctness and completeness of this information and authorise any such persons to release it to you.

I/We hereby authorize the Bank to communicate via email.  Yes  No

I/We authorise Clarien Bank Limited to debit the loan payment from my/our account number \_\_\_\_\_

Signature of Main Applicant \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_\_

Signature of Joint Applicant \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_\_

## Personal Financial Statement

Please complete all sections. (List Income\Expenses)

### Income Statement

#### Monthly Income

Applicant's Salary (net)	<input type="text"/>
Co-Applicant's Salary (net)	<input type="text"/>
Investment Income	<input type="text"/>
Rental Income	<input type="text"/>
Other Income _____	<input type="text"/>
Bonus _____	<input type="text"/>
Pension	<input type="text"/>
<b>Total Monthly Income</b>	\$ <input type="text"/>

#### Monthly Commitments

Mortgage	<input type="text"/>
Rent	<input type="text"/>
Church Tithes	<input type="text"/>
Child Maintenance Payments	<input type="text"/>
<b>Installment Payments/Loans:</b>	
Vehicle	<input type="text"/>
Furniture	<input type="text"/>
Personal Loans	<input type="text"/>
Credit Cards	<input type="text"/>
<b>Others Monthly Obligations</b>	
Land Tax	<input type="text"/>
Home Insurance	<input type="text"/>
Vehicle License & Insurance	<input type="text"/>
Life Insurance	<input type="text"/>
Miscellaneous	<input type="text"/>
<b>Total Monthly Expenditures</b>	\$ <input type="text"/>

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.

_____	<input type="text"/>
Signature of Main Applicant	Date (DD/MM/YYYY)

_____	<input type="text"/>
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

#### Proof of:

- Employment and income (e.g. pay stub, 3 month bank statements)
- Rent/Mortgage payments (e.g. receipt for payment, signed lease, bank statements)

#### 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)

Chequing and Savings Accounts	Balance
# _____	<input type="text"/>
# _____	<input type="text"/>
# _____	<input type="text"/>
Term Deposits	<input type="text"/>
Investments (Provide Statements)	<input type="text"/>
Stocks/Mutual Funds (provide statements)	<input type="text"/>
What I'm Owed _____	<input type="text"/>
Other _____	<input type="text"/>
_____	<input type="text"/>
<b>Total Current Assets</b>	\$ <input type="text"/>

#### Fixed Assets

	Value
Home   Fair Market Value	<input type="text"/>
Real Estate: <input type="checkbox"/> Local	<input type="text"/>
<input type="checkbox"/> Overseas	<input type="text"/>
Vehicle	<input type="text"/>
Household Effects	<input type="text"/>
Other _____	<input type="text"/>
<b>Total Fixed Assets</b>	\$ <input type="text"/>
<b>Total Assets</b>	\$ <input type="text"/>

#### Liabilities (What I Owe)

Mortgage(s) (Disclose Bank)	Balance
_____	<input type="text"/>
_____	<input type="text"/>
Personal Loans (Disclose Bank)	<input type="text"/>
_____	<input type="text"/>
_____	<input type="text"/>
_____	<input type="text"/>
<b>Credit Cards (Authorized Limit)</b>	
Clarien Bank Limited	<input type="text"/>
Other	<input type="text"/>
_____	<input type="text"/>
Other Debts	<input type="text"/>
_____	<input type="text"/>
<b>Total Liabilities</b>	\$ <input type="text"/>
<b>Net Worth</b>	\$ <input type="text"/>

(Total Assets minus Total Liabilities)