

TO ALLOW US TO PROCESS YOUR APPLICATION THIS FORM MUST BE COMPLETED IN FULL, AND RETURNED TO US ALONG WITH:
2 MONTHS BANK STATEMENTS (You can provide these via Open Banking. Please contact us to request a unique link to register for this.)
PROOF OF INCOME (If you are in receipt of Universal Credit – Please also provide copies of 2 Months of FULL Statements)
PLEASE ENSURE THAT THE COMPLETED FORM AND ALL REQUIRED DOCUMENTATION ARE RETURNED TO US BY EMAIL AT: loans@yourcb.org.uk

Applicant Information

Member Number: _____ Title (Mr/Mrs/Miss/Other): _____

First Name (s): _____ Surname: _____

Date of Birth: _____ N.I. Number: _____

Home Tel No: _____ Mobile Tel No: _____

E-Mail: _____

Marital Status: Single / Married / Common-Law Cohabitee / Divorced / Prefer not to say *Delete as appropriate

Number of Dependent(s) (if any) : _____

Name & Date of Birth for Dependent(s) (if any): _____

Current Address: _____

Postcode: _____ Time at Current Address: _____ (if less than 2 years, please provide details of previous address on a separate, signed sheet)

Are you?: A Private Tenant / Home Owner / Living with Family or Friend / Council or Housing Association Tenant *Delete as appropriate

Name of Council / Housing Association (if applicable): _____

Employment Details

Employment Status: Employed (Permanent) / Employed (Temporary Contract) / Self-Employed / Not Working *Delete as appropriate

Occupation (or type of benefit received) _____

Name of Employer: _____ Job Title: _____

Address of Employer: _____

Work Tel No: _____ Work Email: _____

Can you be contacted there? Yes / No *Delete as appropriate Time with Current Employer: _____

Loan Details

Purpose of the Loan (please be specific): _____

I would like to borrow: £_____ I wish to repay by: Child Benefit / Standing Order / Payroll Deduction *Delete as appropriate

I wish to repay the loan at £_____ plus £_____ in Share 1 and £_____ in Share 2 per month / per week * Delete as appropriate

Savings must be a minimum of £25.00 per calendar month

I receive £_____ of Child Benefit every Week / 4 Weeks * Delete as appropriate

I would like my loan paid to me by: * Delete as appropriate

BACS – Sort Code: _____ Account Number: _____

Should my loan be approved, I would like to sign my Loan Agreement at: Croydon / Merton / Sutton * Delete as appropriate

Croydon, Merton & Sutton Credit Union Ltd Trading as Your Community Bank

Office Address: 4th Floor, Amp House, Dingwall Road, Croydon CR0 2LX

Tel: 020 3468 8568 - **Email:** info@yourcb.org.uk **Web:** www.yourcb.org.uk

Authorised and Regulated by the Financial Conduct Authority (FCA) & Prudential Regulation Authority (PRA) Firm Number 213603,
Registration number 569c. Registered Office: 4th Floor, Tuition House, 27/37 St George's Road, Wimbledon, London SW19 4EU



Current Credit Status **Failure to disclose information below may lead to your application being declined.**

Please list all loans, credit cards or any other sums owed including council tax, mortgage or rent arrears. Continue onto a new sheet if necessary and ask if you need clarification.

Please input a monthly amount for every relevant item. If you only know the weekly amount then put this in the weekly column, then multiply the weekly amount by 4 and then put the answer in the monthly column.

Type of Debt	Money owed (£)	Payments negotiated to pay off debts (Weekly)	Payments negotiated to pay off debts (Monthly)
Rent Arrears			
Mortgage or 2 nd Mortgage Arrears			
Council Tax Arrears			
Gas Arrears			
Electricity Arrears			
Fines			
Maintenance Arrears			
Other			
TOTAL	£	=====	£

Name of Creditors (including Credit Cards)	Money owed	Payments negotiated to pay off balance (Weekly)	Payments negotiated to pay off balance (Monthly)
TOTAL	£	=====	£

Current overdraft limit: £_____ of which available: £_____ Bank Name: _____

Have you recently applied for a loan elsewhere? Yes / No *Delete as appropriate

If yes, where? _____

This is a true record, to the best of my knowledge, of my financial situation on _____(Date)

Signed: _____

Print Name: _____

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Budget Sheet

Number of people in my household: _____

Please fill in the two tables below. Please input a monthly amount for every relevant item. If you only know the weekly amount then put this in the weekly column, then multiply the weekly amount by 4 and then put the answer in the monthly column.

Income (Monthly)	Weekly (£)	Monthly (£)	Office use
Wages/Salary			
Wages/Salary (Partner)			
Benefits E.G. JSA / DLA / IS / ESA			
Child Benefit			
Child Maintenance			
Child Tax Credit			
Working Tax Credit			
Money From Other People			
Other **please use an additional sheet for details of this**			
Total Income			

Outgoings (Monthly)	Weekly (£)	Monthly (£)	Office use
Total Payments to Creditors (Including Credit Cards from Previous Page)			
Mortgage/Rent			
Second Mortgage/Secured Loan			
Ground Rent/Service Charge			
Buildings/Contents Insurance			
Life Insurance/Endowment			
Council Tax			
Gas			
Electricity			
Water			
Food/Housekeeping			
Travel/Fares			
Child Care			
Telephone			
TV Licence/Rental			
Cable/Sat./Broadband			
Clothing			
Prescriptions/Health Costs			
Car Tax/Mot/Insurance			
Hairdressing			
Other			
Total Outgoings			

My total monthly income is: £ _____ My total monthly outgoings are: £ _____

This leaves me an available monthly income of: £ _____

This is a true record, to the best of my knowledge, of my financial situation on _____(Date)

Signed: _____

Print Name: _____

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For office use only
**Junior Saver
Membership No:**

Have you considered setting up a Junior Saver Account for your young person?

Our Junior Saver Account can be opened from birth and will provide a secure and safe savings account for your young person. This account will remain under your control until the child reaches 17, at which point they will automatically become the owner of the account and any funds that it contains.

Do not worry though, we will write to you before to remind you and you can then decide then what you would like to do going forward.

If you would like to set up an account for your young person, please complete the form below and return it to us, along with proof of the Junior Saver's identity (Birth Certificate, Passport).

If you pay via Child Benefit deductions, there is no need to complete any extra paperwork for the payment. All you need to do is let us know below how much you would like to be allocated from each deposit to this account. If your usual payments are made by Standing Order, then you will need to adjust your Standing Order with your bank. (We can provide you with a Standing Order Form, should you need one)

Details of Junior Saver (Please complete this section of the form on behalf of the Junior Saver)

Full Name: _____

Date of Birth: _____ Gender: Male / Female / Prefer not to say *Delete as appropriate

Address (incl. Postcode): ***The Junior Saver must live in the same household as the Adult Member ***

I would like to deposit £_____per week / 4 weekly period / month to this Junior Saver Account via Child Benefit Deductions / Standing Order *Delete as appropriate

Details of Trustee (Adult Member)

Member Number: _____

Full Name: _____

Date of Birth: _____ Relationship to Junior Saver: _____

Address (incl. Postcode): _____

Email: _____ Telephone Number: _____

Adult Member Signature: _____

Date: _____

Print Adult Member Name: _____

Declaration *delete one, as appropriate for each statement

- I **have / have no** un-discharged County Court Judgments against me.
- I **have / have no** insolvency, a Debt Management Plan an IVA or DRO.
- I **have / have not** got a Social Fund Loan.

Having a CCJ does not necessarily prevent us issuing a loan, however, failure to disclose this WILL lead to the application being rejected.

As a responsible lender we have a duty of care to our members, as such we may have to decline loans where there is evidence that previous loans may have been used for the purposes of: Gambling, Supplementing income on a regular or ongoing basis and/or Illegal activities

IMPORTANT - Your Personal Information, Credit Decisions and the Prevention of Fraud and Money Laundering

We may use credit reference and fraud prevention agencies to help us make decisions.

A short guide to what we do and how both we and credit reference and fraud prevention agencies will use your information is detailed in the leaflet called: **'A condensed guide to the use of your personal information by ourselves and at Credit Reference and Fraud Prevention Agencies'**

If you would like to read the full details of how your data may be used please visit our website at: www.yourcb.org.uk/privacy-policy or call us on: 020 3468 8568

BY CONFIRMING YOUR AGREEMENT TO PROCEED YOU ARE ACCEPTING THAT WE MAY EACH USE YOUR INFORMATION IN THIS WAY.

DECLARATION: Please read carefully before signing. Please contact us if any part of this is unclear.

1. I confirm that there have been no changes and I am unaware of any upcoming change in my personal circumstance that would affect my ability to repay my loan.
2. I have no insolvency, Debt Management Plan, IVA or DRO in place and have not entered into any discussions or asked for advice from any debt agency.
3. I am required to maintain minimum savings of £25.00 per month throughout the term of my loan.
4. I understand that if I fail to repay the loan (default) I will be liable for the costs of recovery including legal costs and a £100 administrative charge towards the Credit Union's costs.
5. I may not withdraw savings from Share 1 until the savings balance exceeds the outstanding loan.
6. I have read and understood the statement regarding data sharing and I agree that my information may be shared for non-commercial project monitoring purposes with Credit Union Funders.
7. I understand that providing false information and/or documentation is fraud, which may result in criminal proceedings against me.
8. The Statements herein are made for the purpose of obtaining a loan and are true to the best of my knowledge.

Applicant Signature: _____ **Date:** _____

Print Name: _____

THIS SECTION IS FOR OFFICE USE ONLY – To be completed by The Loans Panel

Member Number: _____ Date Received: _____

Delete as appropriate

Loan Approved for £ _____ plus £ _____ savings per month (min £25) Loan Approved Date: _____

OR

Loan Declined Reason: _____ Loan Declined Date: _____

Authorised Signatories

Print Names:

Member Notified of Decision by (initials):

1. _____

1. _____

2. _____

2. _____

Standard Information Notice for New Applications

In order to process your application, we will supply your personal information to credit reference agencies (CRAs) and they will give us information about you, such as about your financial history. We do this to assess creditworthiness and product suitability, check your identity, manage your account, trace and recover debts and prevent criminal activity.

We will also continue to exchange information about you with CRAs on an ongoing basis, including about your settled accounts and any debts not fully repaid on time. CRAs will share your information with other organisations. Your data will also be linked to the data of your spouse, any joint applicants or other financial associates.

The identities of the CRAs, their role is also as fraud prevention agencies, the data they hold, the ways in which they use and share personal information, data retention periods and your data protection rights with the CRAs are explained in more detail at: www.yourcb.org.uk/privacy-policy

Crain is also accessible from each of the three CRAs – clicking in any of these three links will also take you to the same CRAIN document – Crain links:

Call Credit: www.callcredit.co.uk/crain

Equifax: www.equifax.co.uk/crain

Experian: www.experian.co.uk/crain

Standing Order Mandate

Name of Credit Union Member: _____
(the credit union a/c to receive money)

Name of Bank Account Holder: _____
(as It appears on the Bank Account, if different)

Address of Bank Account holder: _____

Name of Your Bank: _____

Your Bank Sort Code: _____

Your Bank Account Number: _____

Until you receive further notice from me please pay:

The Co-operative Bank, Croydon Branch, Sort Code 08-92-99

For the **Croydon Merton & Sutton**

Credit of: **Credit Union Ltd Ref:**

6	7	0	0	5	7	5	0

The sum of (Amount in Figures): £ _____

(Amount in Words): _____

Commencing on _____

(The start date of the payments)

and thereafter every _____ or Weekly / Fortnightly / Monthly
(Due Date)

Signature of Bank Account Holder: _____ Date _____
(Bank Account Holder to sign here)

TO THE BANK: Please ensure you use this reference:

Please cancel any previous standing order in favour of CMS Credit Union / Croydon Plus / Your Community Bank

Account 1	Account 2	Account 3	Account4	TOTAL		Date + Initials
S					Received From Member	
L	£	£	£		COPY, Original To Bank	
					Entered on COMPUTER	