



# Loan Application Additional Details

## About Your Finances

Please complete accurately and in full. This is an important part of your application.

Your Name			
Your Membership No.			
Your Email Address			
Your Phone No.			

Weekly/4 weekly/Monthly Income (please specify in the 'per' column below)			
<b>TABLE 1</b>	<b>You £</b>	<b>Partner £</b>	<b>Per</b>
Average take home pay (wages/salary)			
Additional Pay (wages/salary)			
Pension(s)			
Child Benefit			
Child Tax Credit / Working Tax Credit			
Maintenance/CSA			
Income Support			
Housing Benefit			
Job Seeker's Allowance/Employment & Support Allowance			
Carer's Allowance/Disability Living Allowance/Personal Independence Payment			
Universal Credit			

Other Income			
<b>TOTAL</b>			

Weekly/4 weekly/Monthly Household Expenditure			
<b>TABLE 2</b>	<b>You £</b>	<b>Partner £</b>	<b>Per</b>
Rent/mortgage/board			
Council Tax			
Gas/electricity/oil			
Water			
Landline telephone/Internet			
Mobile Phone			
TV Licence			
TV Rental/Sky/Cable			
Travel expenses (bus/train/taxi fares)			
Car maintenance/MOT/services			
Car Insurance			
Petrol/Diesel			
Housekeeping/groceries			
Clothing/footwear/hair			
Entertainment/tobacco/alcohol/socialising			
Childcare/nursery fees/pocket & dinner money/nappies			
Maintenance/CSA paid			
Pets			
Other spending (please specify)			
Total of weekly payments from <b>Table 3</b>			
<b>TOTAL</b>			

Details of other loans/credit cards/home credit

<b>TABLE 3</b>	<b>Current outstanding balance £</b>	<b>Weekly payment amount £</b>	<b>Any arrears amount £</b>
Name of creditor			
Loans			
Credit Cards			
Catalogues/Mail Order			
Overdraft			
Hire Purchase (e.g. BrightHouse etc.)			
Home Credit			
Doorstep Lender (e.g. Provident)			
Payday Loans (e.g. Wonga)			
Community Fund Loan			
Debt management plan			
Other (please specify)			
<b>TOTAL</b>			

I declare that all the information I have given on this form is, to the best of my knowledge and belief, accurate and in full. I understand that the provision of any false information is fraud and that Leicester Caribbean Credit Union may take appropriate action against me if I am found to have deliberately provided false or misleading information.

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Partner's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(if income included above)

Print Name: \_\_\_\_\_