



Member Number

# application to change loan repayments

PO Box 585 Hamilton 3240 • firstcreditunion.co.nz • helpdesk@firstcu.co.nz

## 1. Account Details

### Main account holder details

What is your date of birth?

What is your postal address?

POST CODE

### Joint account holder details (if applicable)

What is your date of birth?

What are your phone numbers?

HOME

WORK

MOBILE

## 2. Employment Details

What is your occupation?

What is the average amount of hours you work weekly?

Employers Name

Employers Contact Number

## 3. Current Repayments

How much are you paying onto your loan currently?

AMOUNT \$

FREQUENCY

Weekly

Fortnightly

Monthly

## 4. New Repayments

What would you like your new repayments to be?

AMOUNT \$

FREQUENCY

Weekly

Fortnightly

Monthly

Why are you requesting this change?

**If your application is due to a reduction in income or financial hardship please complete the income and expenses section on the back of this form. If your wages are not banked into your First Credit Union account please provide 3 months recent bank statements.**

Effective from

Date

## 5. Signatures

Main Applicant's Signature

Joint Applicant's Signature

Today's date

Today's date

**NOTE:** If this is a guarantor loan the guarantor will need to sign any changes made to your loan agreement. If this application is approved, a variation form needs to be processed and signed by all parties (including guarantor).

## 6. Income & Expenses

Income and Expenditure (Tick whether single or joint)

Single

Joint

<i>Income (Please provide proof)</i>	How often?	Amount	<i>Expenditure (Please provide proof)</i>	How often?	Amount
Net income after tax	W F M	\$	Mortgage/Rent/Board	W F M	\$
Spouse/Defacto income	W F M	\$	Other loans	W F M	\$
Other income (please specify)			Insurances	W F M	\$
_____	W F M	\$	Credit/Store card repayments	W F M	\$
_____	W F M	\$	Hire purchase repayments	W F M	\$
_____	W F M	\$	Family support or child care	W F M	\$
<b>Total Income</b>		\$	Power/Phone/Petrol	W F M	\$
Does your income go into your First Credit Union account?			Food	W F M	\$
Yes No			Other living costs	W F M	\$
If no, we will need to see your bank statements from the last 3 months.			<b>Total Expenditure</b>		\$

Credit Card (Credit Limit and Institution)

Credit Card

Visa

Mastercard

American Express

Diners

Other (Please specify)

Credit Limit (Please specify which card limit is for if you have more than one)

<i>What do you OWN (Assets)? (Please provide proof)</i>	Estimated value	<i>What do you OWE (Liabilities)? (Please provide proof)</i>	Estimated amount left to pay
Home	\$	First mortgage	\$
Household contents	\$	Motor vehicle/s	\$
Motor vehicle/s	\$	Overdrafts	\$
MAKE MODEL YEAR		Credit card debt	\$
Savings	\$	Store cards/Hire purchases	\$
Other property (please specify)		Student loan	\$
_____	\$	Personal loan/s	\$
_____	\$	_____	\$
_____	\$	<b>Total Liabilities</b>	\$
<b>Total Assets</b>	\$		

The following questions must be answered:

1. Have legal proceedings ever been taken against you, your spouse, defacto, for any debt?

No Yes (If yes, give details)

2. Have you, your spouse or defacto ever been bankrupt, NAP, or insolvent?

○ No ○ Yes (If yes, give details)

### Office Use Only

Approved

Declined

Authorised By:

Processed by:

DATE

Comments: