



member number

loan application

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

1. Your personal details

What is your name?

☐ Mr ☐ Mrs ☐ Miss ☐ MsOTHER FIRST NAMES LAST NAME

Have you ever gone by any other name? (maiden name or other)

FULL NAME

What is your date of birth?

 / /

What is your gender?

☐ Male ☐ Female

What is your marital status?

☐ Single ☐ Defacto ☐ Married ☐ Divorced ☐ Separated

Are you a permanent resident of New Zealand?

☐ Yes ☐ No

How many dependant children do you have?

What are their ages?

What is your Drivers Licence number?

Version Number (5B)

What type of licence do you hold?

☐ Learners ☐ Restricted ☐ Full

(Please provide a copy of your licence)

How did you hear about First Credit Union? (Tick as many as apply)

☐ TV ☐ Radio ☐ Newspaper ☐ Referred to by friend/family☐ Other (please specify)

Are you employed?

☐ Yes, full time ☐ Yes, part time ☐ Yes, self employed☐ Yes, casual ☐ No, unemployed

What is your occupation?

How many hours do you work on average per week?

Who is your employer?

EMPLOYER'S NAME EMPLOYER'S ADDRESS PHONE NUMBER []

How long have you been employed there?

YEARS AND

MONTHS

If less than 2 years where did you work previously and for how long?

Are you currently a Guarantor for someone?

☐ Yes ☐ No

What is their name?

What amount are you guarantor for?

\$

2. Your contact details

What is your home address?

POST CODE

What type of residence is this?

☐ Own home ☐ Renting ☐ Boarding

How long have you lived at this address?

YEARS AND

MONTHS

What was your previous address? (If under 3 years at current address)

How long did you live at this address?

YEARS AND

MONTHS

What are your phone numbers and email address?

HOME []MOBILE []WORK []FAX []EMAIL

What is the best way to contact you regarding this application?

(Please bear in mind phone calls will be made between 9am and 5pm weekdays)

☐ Home phone ☐ Work phone ☐ Mobile ☐ Email ☐ Text

Please provide contact details of TWO relatives or friends in New Zealand, NOT living with you:

Person 1

NAME ADDRESS HOME PHONE []MOBILE []RELATIONSHIP TO YOU

Person 2

NAME ADDRESS HOME PHONE []MOBILE []RELATIONSHIP TO YOU

NOTE: These people will be contacted for verification prior to your loan being approved.

3. Joint Applicant's details (if applicable)

What is your name?

☐ Mr ☐ Mrs ☐ Miss ☐ Ms

FIRST NAMES

LAST NAME

Have you ever gone by any other name? (maiden name or other)

FULL NAME

What is your relationship to the main applicant?

What is your date of birth?

What is your gender?

☐ Male ☐ Female

What is your marital status?

☐ Single ☐ Defacto ☐ Married ☐ Divorced ☐ Separated

Are you a permanent resident of New Zealand?

☐ Yes ☐ No

What is your home address?

☐ The same address as the main applicant ☐ The address below

POST CODE

What are your phone numbers and email address?

HOME [] MOBILE []

WORK [] FAX []

EMAIL

Are you employed?

☐ Yes, full time ☐ Yes, part time ☐ Yes, self employed

☐ Yes, casual ☐ No, unemployed

What is your occupation?

How many hours do you work on average per week?

Who is your employer?

EMPLOYER'S NAME

EMPLOYER'S ADDRESS

PHONE NUMBER []

How long have you been employed there?

YEARS AND MONTHS

If less than 2 years, where did you work previously?

EMPLOYER

What is your Drivers Licence number?

Version Number (5B)

What type of licence do you hold? (Please provide a copy of your licence)

☐ Learners ☐ Restricted ☐ Full

Are you currently a Guarantor for someone?

☐ Yes ☐ No

What is their name?

What amount are you guarantor for?

\$

4. Loan details

How much would you like to borrow?

\$

What is the purpose of the loan? (Please provide full details)

5. Repayments

How much would you like to pay back each repayment?

\$

And how often?

☐ Weekly ☐ Fortnightly ☐ Monthly

OR How long would you like to pay the loan back over?

☐ 12 months ☐ 24 months ☐ 36 months Other: months

6. Security

What are you offering as security for this loan? (please tick and complete as many as apply)

☐ MOTOR VEHICLE

Registration number

Vehicle make

Vehicle model

Year of vehicle

Estimated value of vehicle

\$

Is the vehicle insured?

☐ Yes ☐ No

Type of insurance

☐ Full cover ☐ Third party

Name of insurance company

If your vehicle is not insured by Credit Union Insurance please attach proof of your insurance.

continued >>

Security Continued

You may have a second motor vehicle to offer as security (please tick and complete as many as apply)

☐ MOTOR VEHICLE

Registration number

Vehicle make

Vehicle model

Year of vehicle

Estimated value of vehicle \$

Is the vehicle insured? ☐ Yes ☐ No

Type of insurance ☐ Full cover ☐ Third party

Name of insurance company

If your vehicle is not insured by Credit Union Insurance please attach proof of your insurance.

In some circumstances we may consider a boat as security.

☐ SAVINGS

Value of savings \$

Account where savings are held

☐ GUARANTOR

Guarantor's name

(Don't forget - we'll need your Guarantor to hand in a completed Guarantor Form before we can approve your application)

7. Financial Position

Please fill in the table below and tick the appropriate letter to show how often you are paid/pay each item. W = weekly, F = fortnightly, M = monthly

<i>Income</i>	How often?	Amount
Net income after tax	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Joint applicant's income	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Other income (please specify)		
<input type="text"/>	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
<input type="text"/>	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
<input type="text"/>	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Total Income		\$ <input type="text"/>

<i>Expenditure</i>	How often?	Amount
Mortgage/Rent/Board	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Other loans	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Insurances	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Credit/Store card repayments	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Hire purchase repayments	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Family support or child care	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Power/Phone/Petrol	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Food	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Other living costs	<input type="radio"/> W <input type="radio"/> F <input type="radio"/> M	\$ <input type="text"/>
Total Expenditure		\$ <input type="text"/>

<i>What do you OWN (Assets)?</i>	Estimated value
Home	\$ <input type="text"/>
Household contents	\$ <input type="text"/>
Motor vehicle/s	\$ <input type="text"/>
Savings	\$ <input type="text"/>
Other property (please specify)	
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
Total Assets	\$ <input type="text"/>

<i>What do you OWE (Liabilities)?</i>	Estimated amount left to pay
First mortgage	\$ <input type="text"/>
Motor vehicle/s	\$ <input type="text"/>
Overdrafts	\$ <input type="text"/>
Credit card debt	\$ <input type="text"/>
Store cards/Hire purchases	\$ <input type="text"/>
Student loan	\$ <input type="text"/>
Personal loan/s	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
Total Liabilities	\$ <input type="text"/>

Have you or your joint applicant been declared bankrupt or gone through the No Asset Procedure?

☐ Yes ☐ No

If yes, in what year?

Is your income paid into a First Credit Union account? ☐ Yes ☐ No
If no, make sure you attach recent bank statements with your application.

Do you require budgeting advice? ☐ Yes ☐ No

NOTES TO THE ABOVE

continued overleaf >>

Privacy Act Declaration

Authorisation by Applicant(s) and Guarantor(s) for use and disclosure of information

Pursuant to the Privacy Act 1993, I/We acknowledge that:

1. I/We understand that the information will be used to assess my/our credit worthiness and financial position, to process my/our application.
2. By signing this application, I/we authorise First Credit Union to:
 - make enquiries about me/us and disclose and obtain any additional information First Credit Union considers necessary, including checking driver licence/s information with LTSA,
 - disclose my/our personal information (including payment default information) to potential or actual assignees, to insurers and other third parties that my have or may intend to take security over any of my/our assets, to credit rating and credit reporting agencies and any other person that First Credit Union may appoint to collect any outstanding debt from me/us.
3. I/We declare that the information I/we have provided in this application is true and correct.

Main Applicant (please print your name)

FIRST NAMES

LAST NAME

Joint Applicant (please print your name)

FIRST NAMES

LAST NAME

Main Applicant's Signature

Today's date

Joint Applicant's Signature

Today's date

Office Use Only

- ☐ Approved
☐ Declined

Interest rate

%

SIGNATURE

DATE

PROCESSED BY

LOAN TYPE

SIGNATURE

DATE

CONDITIONS/COMMENTS