



Carrick on Shannon & District Credit Union Limited

LOAN APPLICATION INFORMATION

Tel: **071 962 1828** • email: **marketing@carrickcreditunion.com** • ML Completed: ID • Proof of Address • PPSN

We will contact you at the number/email you provide below with any further information we require or if your loan falls into arrears.

*Name:		Account Number:	
*Name:		Contact Phone(s):	
*Address:		Email:	
Eircode:		*Marital Status:	
*Marital Status:		*DOB:	
Permission to contact at work / email Yes <input type="checkbox"/> No <input type="checkbox"/>		Dependents:	
Loan Amount requested:		Share balance €	
This loan will be secured by any attached shares and deposits held as security, the lien that the credit union has over all shares and deposits in my account, and any other agreed security		Loan balance €	
Suggested repayment amount _____ per week/fortnight/month		Purpose (s):	
Name of proposed Guarantor: (if applicable)		Term Required:	

INCOME	Borrower 1			Borrower 2				
	€	Weekly	Fortnight	Monthly	€	Weekly	Fortnight	Monthly
Salary/Wages								
Overtime								
Spouse Income								
Child Benefit								
Pension								
Social Welfare								
Rental Income								
Other Income								

*Denotes items of personal data requested for the purposes of the Central Register - see notice below.

Notice: Under the Credit Reporting Act 2013 lenders are required to provide personal and credit information for credit applications and credit agreements of €500 and above to the Central Credit Register. This information will be held on the Central Credit Register and may be used by other lenders when making decisions on your credit applications and credit agreements.

The Central Credit Register is owned and operated by the Central Bank of Ireland. For more information see www.centralcreditregister.ie

EXPENSES

Purpose	To Whom	Amount Owed	Repayment	Weekly/Fortnightly/Monthly	Term
Mortgage(s)					
Rent(s)					
Car Loan(s)					
Other Loan(s)					
Credit Card(s)					

DECLARATION

I/We are not indebted to any other credit union, bank or loan agency either as a borrower or guarantor, except as stated above (under expenses). The information given by me/us on this form is made for the purpose of obtaining the loan, and is true to the best of my/our knowledge and belief. I/we confirm that I/we am/am not fit to follow my normal occupation or duties. (Delete as appropriate).

I/We understand that this loan is not protected by repayment protection insurance (RPI).

Signed:	Date:	Signed:	Date:
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Employer Details:

Name & address of employer: _____

Name & address of employer: _____

Your take home pay € _____

Your take home pay € _____

Weekly Fortnightly Monthly

Weekly Fortnightly Monthly

Length of service with current employer _____

Length of service with current employer _____

Date: _____

Date: _____

FOR OFFICIAL USE ONLY

Loan officer Approved Rejected Approval Signature _____

Manager Approved Rejected Approval Signature _____

Credit Committee Approved Rejected Approval Signature _____

Board Approved Rejected Approval Signature _____

Additional Member Information	supplied	Requested	Outstanding	Additional Member Information	supplied	Requested	Outstanding
Payslips	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Business / Farm accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bank Statements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Quotation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mortgage Statements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P60	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visa Statements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Direct Debit / Standing Order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loan Statements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I confirm the above information has been requested / supplied

Signed: _____ Date: _____

Receive obligatory notices by email

There are certain notices that credit unions are obliged to provide from time to time. Please provide your email address if you would like to receive these obligatory, non-marketing communications by email (for example the AGM notice). This will assist the Credit Union in reducing its carbon foot print and will also reduce costs.

Email address: _____

The credit union maintains the right to contact members by such means as best available to it in relation to a non-performing loan or outstanding debt to the credit union, including by text or email.

Keeping you informed: Direct Marketing

To improve our service to you, from time to time, the Credit Union would like to inform you of goods, services, competitions and or/promotional offers available from the Credit Union. The Credit Union may use different means when sending such marketing communications. Please indicate your consent or otherwise to being marketed using the below methods.

Post: Yes No
Email: Yes No
Text: Yes No

Landline call: Yes No
Mobile call: Yes No

You have a right to notify us free of charge at any time of your right to refuse such marketing by writing to Carrick on Shannon & District Credit Union or by using the "opt-out" options in any marketing message we send you.

Signed: _____ Date: _____

Signed: _____ Date: _____

Consent for Credit Check

I/We authorise Carrick on Shannon & District Credit Union Ltd to process and retain data provided by me/us in respect of this application, to seek and provide credit references (searches), to record details of any transaction which may result from this application with Irish Credit Bureau Limited and ICB/CCR to record, retain and disclose to it's members details of such searches for a period of one year and for monitoring the loan if granted. I/We acknowledge that Carrick on Shannon & District Credit Union Ltd and/or the ICB/CCR are permitted to disclose any material misstatement of the fact contained in the application for financial accommodation to it's members and relevant bodies. I/We consent to any such application being processed, recorded and retained by ICB/CCR. We retain the right to conduct a second credit check search if the loan subsequently defaults and is restructured.

(Please note that under General Data Protection Legislation ('GDPR') ICB/CCR are processing their data under the lawful basis of "legitimate interests" (Article 61.(f)).

Signed: _____	Date: _____
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Signed: _____	Date: _____
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For the member:

I consent to and authorise the credit union to process and retain data provided by me in respect of this application, and to record details of any transaction relating to a loan or other credit which may result from this loan application with the ICB/CCR for a period of 5 years from the expiry date of the credit agreement, I acknowledge that the credit union and/or the ICB/CCR are permitted to disclose any material misstatement of fact contained in the application to its members and relevant bodies, I consent to any such application being processed, recorded and retained by ICB/CCR.

Signature of applicant: _____ **Date:** _____

Signature of applicant: _____ **Date:** _____

The Member(s) has the right to access personal data held about them by the ICB/CCR and to correct any inaccuracies in such data. More information can be found at www.icb.ie and www.centralisedcreditregister.ie

The Central Credit Register (CCR)

The CCR is a credit referencing agency which is operated by the Central Bank of Ireland. Unlike the ICB/CCR, the Credit Union is obliged to make certain submissions to the CCR in respect of personal and credit information about you under the Credit Reporting Act 2013. The member has certain rights in respect of the CCR. Please see centralcreditregister.ie for more information.

Insurance

We act as an intermediary with ECCU Assurance DAC (ECCU) in respect of Loan Protection Insurance (LPT) , In order to administer this service we will pass your details to ECCU , This may include sensitive personal data such as data about your health, You will be provided with an opportunity at a later date to consent to the transfer of any sensitive data from us to ECCU as your specific consent is required in that regard.

Savings Protection Scheme

We are affiliated to the Irish League of Credit Unions (ILCU) and have the benefit of being a member of the ILCU Savings Protection Scheme (SPS), We may disclose information in your application or in respect of any account or transaction of yours from the date of your original consent to authorised officers or employees of the Irish League of Credit Unions for the purpose of fulfilling requirements under the SPS.

Debt Recovery

In the unfortunate case of having to recover this loan or enforce any security taken, certain personal and financial details may be passed to our solicitor, debt collection agent or private investigator to assist with same.

Audit

The Credit Union is required to engage both internal and external auditors. Auditors may require access to certain personal data in performing their function.

Your Rights

Please note that you have the right to access personal data held about you by the credit union and to correct an Inaccuracies in such data. If you wish to avail of either of these rights, please contact us at Carrick-on-Shannon & District Credit Union Ltd., Summerhill, Carrick-on-Shannon, Co. Leitrim.

Share to Loan Consent

I/We _____ (members) authorise Carrick on Shannon & District Credit Union Ltd to transfer as and when required from my/our share account to cover interest and loan repayments in the event of missed payments/default by me/us.

Signature of loan applicant: _____ Date: _____

Signature of loan applicant: _____ Date: _____

By signing below you are confirming that you have reviewed this application and the details provided by you are true to the best of your knowledge and belief.

Signature of loan applicant: _____ Date: _____

Signature of loan applicant: _____ Date: _____

Witnessed by: _____ Date: _____

Please take time to read the lending privacy notice of the Credit Union which outlines how and why we process your personal data. A copy is available for you to take away and you can access the privacy notice at any time on www.carrickcreditunion.com. Please sign here to confirm that you have received a copy of our lending privacy notice _____

CENTRAL CREDIT INFORMATION RECEIVED:
Signature of loan applicant: _____ Date: _____

WARNING: IF YOU DO NOT MEET THE REPAYMENTS ON YOUR CREDIT AGREEMENT, YOUR ACCOUNT WILL GO INTO ARREARS. THIS MAY AFFECT YOUR CREDIT RATING, WHICH MAY LIMIT YOUR ABILITY TO ACCESS CREDIT IN THE FUTURE.

WARNING: YOUR HOME IS AT RISK IF YOU DO NOT KEEP UP PAYMENTS ON A MORTGAGE OR ANY OTHER LOAN SECURED ON IT.