



# Trinity Credit Union Limited Loan Application Form

CHECKED BY:



# Trinity Credit Union Limited

## Consent to use & disclosure / Data Protection Acts, 1988 and 2003 and Section 71 of the Credit Union Act, 1997.

I understand that under the Data Protection Acts 1998 & 2003 (the "DPA"), my consent may be required for the Credit Union to process personal data that it may have in its possession concerning me (including disclosure to third parties). I note that this personal data may include sensitive personal data, such as data about my health, within the meaning of the DPA, the processing of which requires my explicit consent.

I also understand that under Section 71 of the Credit Union Act 1997, the Credit Union, subject to exceptions listed in the Section, shall not disclose or permit to be disclosed, without my consent, any information that concerns an account or transaction of mine with the credit union.

For the purpose of assessing my application for membership, assessing any loan applications which I may make to you and generally for administering and monitoring any accounts I have with the Credit Union, including any loan accounts I have from time to time with you:

1. I consent:

- (i) to you seeking information concerning applications for loans and my credit history from the date of my original consent from any credit union for that purpose you may disclose any relevant information in any loan application which I may make to you or which you may have concerning me to any such credit union;
- (ii) to any credit union disclosing information to you concerning applications for loans and my credit history from the date of my original consent with any such credit union;
- (iii) to you disclosing any information in any application (including loan applications) or in respect of any account or transaction of mine with the Credit Union from the date of my original consent to officers or employees of the Irish League of Credit Unions for the purpose of fulfilling our requirements and under the Savings Protection Scheme if such a scheme is operated on behalf of the Credit Union by the Irish League of Credit Unions; and
- (iv) to the processing of any information relating to me, either contained in this form or any other form or application, for the purpose of assessing applications and administering any accounts I maintain with the Credit Union.

2. From time to time, the Credit Union, or third parties selected by the Credit Union, may use your details to inform you of goods and/or services which may be of interest to you.

The use of your details for marketing purposes will depend on the preferences that you express below:

**Opt-In (Marketing by email, text message and fax)**

I consent to the credit union, or third parties selected by the Credit Union, informing me of goods or services that may be of interest to me by email, text message or fax.

**Opt-Out (other forms of marketing)**

Please tick the box opposite if you do **not** want the Credit Union, or third parties selected by the Credit Union, to inform you by phone or letter of goods or services that may be of interest to you.

Please note that you have the right to access personal data held about you by the Credit Union and to correct any inaccuracies in such data.

Member's signature:

Date:

Print name:

Witnessed by:

Print name:

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Tel. No.: Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

Previous Address (if less than 3 yrs) \_\_\_\_\_

Share Balance € \_\_\_\_\_

Regular Loan Balance € \_\_\_\_\_

C.U. Car Loan Balance € \_\_\_\_\_

Loan Required € \_\_\_\_\_

Purpose of Loan \_\_\_\_\_

**PERSONAL DETAILS**

Status:  Single  Married  Widowed  
 Separated  Divorced (please tick)

My residence is:  Mortgaged  Owned  
 Rented  Living with Parents (please tick)

No. of Dependent Children: \_\_\_\_\_

**YOUR REPAYMENT AMOUNT TO US INCLUDING INTEREST**

Regular Loan + Car Loan + Shares = TOTAL

+  +  =

Please save at least €5 per week

PLEASE TICK  Weekly  Fortnightly  Monthly

**Outgoings:** PLEASE TICK W M

Mortgage	€ _____	<input type="checkbox"/>	<input type="checkbox"/>
Rent	€ _____	<input type="checkbox"/>	<input type="checkbox"/>
Loans (Bank etc.)	€ _____	<input type="checkbox"/>	<input type="checkbox"/>
Insurance (Car, House etc.)	€ _____	<input type="checkbox"/>	<input type="checkbox"/>
Other Outgoings	€ _____	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL</b>	€ _____		

**EMPLOYMENT DETAILS**

Position \_\_\_\_\_

Employer Name \_\_\_\_\_

Address \_\_\_\_\_

How long with this employer \_\_\_\_\_ years

Your Take Home Pay € \_\_\_\_\_

Weekly  Fortnightly  Monthly (please tick)

**DECLARATION**

I confirm that I am fit to follow my normal occupation or duties:

Yes

No

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR CREDIT UNION USE ONLY**

Date \_\_\_\_\_ Amount Approved € \_\_\_\_\_

Signed \_\_\_\_\_

Signed \_\_\_\_\_

Signed \_\_\_\_\_

Comments \_\_\_\_\_

Credit Officer	Amount
Date	€

**Other Household Income** (please tick) W M

Childrens Allowance € \_\_\_\_\_

Social Welfare € \_\_\_\_\_

Lone Parents Allowance € \_\_\_\_\_

Carers Allowance € \_\_\_\_\_

Pension € \_\_\_\_\_

Other (Please specify) \_\_\_\_\_