

LOAN APPLICATION FORM

Account/Member Number	
Date	
PLEASE COMPLETE I	N BLOCK CAPITALS

1. PERSONAL DETAILS							
Name							
Current Address (include Eircode)	Previous Address (if less than 3 years current address)						
Date of Birth	No of dependents						
Home Number	Mobile						
Email							
Preferred method of Mobile Home Number Marital Status Single Married Other (Please tick) Contact Home Number for the first of the please Specify							
2. EMPLOYMENT	DETAILS						
Employer Name							
Employer Address							
Grade	Position Temporary Permanent Contract Retired (Please tick)						
Work Email							
Length of Service	Work Number						
3. LOAN DETAILS							
Amount of new loan	€ OFFICE USE ONLY						
Purpose of loan	Loan 1 €						
Loan Repayment	Eoan 2 €						
Amount to Shares	Shares €						
Amount to Linked	Einked A/C €						
Account	Flexi €						
Flexi Account	lotal €						
Total Salary Deduction	Address Filolie No Mobile No DAS 3.0 DD						
Repayment	Weekly Fortnightly Monthly Signed:						
*(This figure to include loan repayment/interest/savings)							

4. INCOME DETAILS								
Net Salary (before Credit Union deduction)								
Self	€		per week per fortnig	per month per month				
Other Income			please specify)					
	€		per week per fortnig	per month per month				
5. MORTGAGE/	RENT DETAI	LS						
Accommodation type	e mo	rtgaged owned rented	other (please specify)					
Amount of rent	€		per month					
Mortgage provider								
Amount Borrowed	€	Current Balance	2 €	Repayments €				
Do any of the following arrangements apply to your mortgage repayments? interest only / arrears capitalised / reduced mortgage payment / or in any forbearance If yes please provide a copy of the agreement								
6. CREDIT COMM	MITMENT							
		other credit union, bank or loan agency Bank Loans, Bank Overdraft, Credit						
Name of Creditor	ucoto sucii us i	Original Debt	Current Balance	Repayments (weekly / fortnightly / Monthly)				
		€	€	€				
		€	€	€				
		€	€	€				
		PRIVACY STATEMENT						
but it may not be possil	ble to provide yo			In this form. You do not have to provide this information By signing below, you are explicitly consenting to the use				
Member's Signature				Date				
You have the right to withdraw this consent at any time by by contacting us by letter or email info@pscu.ie. We will process this information in accordance with the Privacy Statement which is available on our website and in our office.								
8. HEALTH DECL	ARATION							
I declare that to the bes	st of my knowle	dge and belief, I am in good health and	I am fit to follow my normal occupatio	n. Yes No (Tick appropriate box).				
Member's Signature				Date				
9. PPSN								
PPSN								
documentary evidence	(e.g. Payslip, Ta		the number. In addition, to save you h	e Central Credit Register. We may need you to provide aving to provide this information again in the future, we				

X

X

10. CENTRAL CREDIT REGISTER

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

11. NOTICE FROM IRISH CREDIT BUREAU D.A.C ('ICB')

In addition to the Central Credit Register and as part of the credit assessment process, Public Service Credit Union will be consulting the Irish Credit Bureau D.A.C ('ICB'). This consultation will provide us with the essential additional information we require to fully consider your application. Below is a notice from the ICB setting out their basis for the processing of your personal and credit information, there is also a link to their Fair Processing Notice.

As a result of the introduction of the General Data Protection Regulation ('GDPR'), from 25th May, 2018 ICB will be using Legitimate Interests (GDPR Article 6 (f)) as the legal basis for processing of your personal and credit information. These Legitimate Interests are promoting greater financial stability by supporting a full and accurate assessment of loan applications, aiding in the avoidance of over-indebtedness, assisting in lowering the cost of credit, complying with and supporting compliance with legal and regulatory requirements, enabling more consistent, faster decision-making in the provision of credit and assisting in fraud prevention.

Please review ICB's Fair Processing Notice which is available at http://www.icb.ie/policy_privacy.php. It documents who they are, what they do, details of their Data Protection Officer, how they get the data, why they take it, what personal data they hold, what they do with it, how long they retain it, who they share it with, what entitles them to process the data (legitimate interests), what happens if your data is inaccurate and your rights i.e. right to information, right of access, right to complain, right to object, right to restrict, right to request erasure and right to request correction of your personal information.

12. FREE COMPULSORY LOAN PROTECTION INSURANCE - SEE PAGE 4 13. DOCUMENTS REQUIRED Please supply: Your last 3 pay slips 3 months up to date bank statements **Recent Utility Bill Proof of PPSN** If we do not hold the following items on file - you will be required to supply: Copy of Passport/Drivers licence **14. LOAN ISSUE OPTIONS** Please indicate your preferred payment option: Post to home address Collect at Credit Union Office Lodge to bank account Name of Bank Name of Account Holder(s) IBAN: BIC: These will be available from your bank statement or your bank 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. **OFFICE USE ONLY** Loan considered and approved by Subject to the following conditions Reason Loan Approved Approved by Credit Officer Credit committee **Board of Directors** CE₀ Total loan approved:

3

Date

Board of Directors

Credit Committee

Refused by



X

DECLARATIONS LOAN PROTECTION INSURANCE

The Loan Protection Insurance Policy exists solely between ECCU Assurance and the Credit Union. Credit Union staff should ensure the member completes the form in line with Loan Protection Summary Guidelines.

Public Service Credit Union	Contact Name						
IMPORTANT - Informing ECCU about material facts PLEASE REMEMBER THAT YOU MUST TELL US EVERYTHING RELEVANT IN ANSWER TO ALL OF THE QUESTIONS ON THE DECLARATIONS FORM. IF YOU DO NOT OR IF ANY OF THE ANSWERS TO THESE QUESTIONS ARE NOT TRUE AND COMPLETE, ANY INSURANCE COVER PROVIDED COULD BE VOIDED. A MATERIAL FACT (RELEVANT INFORMATION) INCLUDES ANYTHING WHICH A REPUTABLE INSURER WOULD REGARD AS LIKELY TO INFLUENCE THE ASSESSMENT AND ACCEPTANCE OF AN APPLICATION FOR INSURANCE. SECTION A - MEMBER DECLARATION (Parts 1 to 4 inclusive) Part 1 - Personal Details (Please use block letters)							
Member's Name							
A/C Number		Date of birth					
Present outstanding loan balance	€	Additional loan now required	€				
Total loan balance for cover	€						
Data Protection Disclosures and Consents ECCU Assurance DAC ("ECCU"), will process your personal details in accordance with its Data Protection Policy and all applicable Irish and EU data protection laws. Information about you will be lawfully processed by ECCU in its legitimate interest for purposes associated with your credit union's life assurance policy with ECCU. These include underwriting, retention and processing by computer and manual record systems, claims handling and fraud prevention. We collect special category personal data, i.e. information relating to your physical or mental health, to assess terms of insurance cover and to administer claims which may arise. We may share your information for these purposes with agents or service providers we have appointed, regulatory organisations,(re)insurance companies, those to whom we outsource certain business operations and as required by law. You have a rights under the Data Protection Acts 1988, 2003 and 2018, including the right to object to the processing, to access and to rectify any errors in data we hold concerning you. By providing us with your information and signing Section A of this form, you affirm you have read the full ECCU Privacy Notice in Section F and agree to your information being processed, disclosed, transferred and retained by ECCU and your credit union. (The full ECCU Privacy Notice is available at www.pscu.ie/downloads) Part 2 - Which of the statements below best describes your normal occupation or duties? - means actively at work and regularly performing all the usual duties of your occupation; or - not actively at work solely because of a temporary minor sickness or injury; or - not actively at work solely because of maternity leave, parental leave, redundancy, unemployment or other lack of work, strike or holiday provided that you are at that time physically and/or mentally able to be active at work and can regularly perform all the usual duties of your occupation - means someone who is retired from paid employment (other th							
	a full time education student, aged 16 years or older a		-	ent of the same age			
Homemaker - means a housewife, househusband or homemaker actively and regularly performing all of the usual duties of a homemaker None of the above							
Part 3 I confirm I am fit to follow my normal occupation or duties (as indicated in Part 2). Part 4 Are you receiving an illness or injury related benefit for more than 3 months? Member's signature Date							
Have you been referred to or seen by a specialist or consultant at a hospital or clinic in the last 12 months with the exception of routine antenatal check-up's or routine orthopaedic treatments (except back conditions)? Yes No If you have answered "YES", PLease provide full details:							
Member's signature			Date				