



# PERSONAL FINANCE CENTER

126 Chalan San Antonio, Tamuning, GU 96913

TAMUNING CENTER

Phone: 647-6820 \* Fax: 646-1249

DEDEDO CENTER

Phone: 635-7320 \* Fax: 637-3102

## Consumer Loan Application

CHECK APPROPRIATE BOX

- If you are applying for individual credit in your own name and are relying on your own income or assets.
- If you are applying for joint credit with another person.
- If you are applying for individual credit but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested.

Date \_\_\_\_\_  PL  PLD  AL **PROCESSING FEE: \$ 50.00**  
 Amount of Loan Request \_\_\_\_\_ Length of Loan \_\_\_\_\_ Market \_\_\_\_\_ Purpose of Loan \_\_\_\_\_  
 \$ \_\_\_\_\_

### APPLICANT

NAME \_\_\_\_\_ Age \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ S.S.No. \_\_\_\_\_ D.L. No. \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Emp. Address \_\_\_\_\_  
 Type of Business \_\_\_\_\_  
 No. of Years Employed \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
 Position Occupied \_\_\_\_\_  
 If less than 2 years at present employment  
 Previous Employer \_\_\_\_\_  
 Years Employed \_\_\_\_\_ Position \_\_\_\_\_  
 U.S. Citizen \_\_\_\_\_ P.R. No. \_\_\_\_\_

### JOINT APPLICANT

NAME \_\_\_\_\_ Age \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ S.S.No. \_\_\_\_\_ D.L. No. \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Emp. Address \_\_\_\_\_  
 Type of Business \_\_\_\_\_  
 No. of Years Employed \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
 Position Occupied \_\_\_\_\_  
 If less than 2 years at present employment  
 Previous Employer \_\_\_\_\_  
 Years Employed \_\_\_\_\_ Position \_\_\_\_\_  
 U.S. Citizen \_\_\_\_\_ P.R. No. \_\_\_\_\_

Home Address \_\_\_\_\_ Since \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ For how long? \_\_\_\_\_  
 Former Address (2 Years Coverage) \_\_\_\_\_ For how long? \_\_\_\_\_  
 Marital Status (complete for joint or secured credit)  Married  Separated  Unmarried (including single, divorced, and widowed)  
 Ages of Dependants other than Spouse \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
 Present Residence:  Own  Buying  Renting for \$ \_\_\_\_\_ Mo. from \_\_\_\_\_ Address \_\_\_\_\_  
 FMV (IF OWNED) \$ \_\_\_\_\_  Live/Parents, Relative, In-Laws \_\_\_\_\_

### MONTHLY INCOME

	APPLICANT	JOINT APPLICANT
Gross Wages . . . . .	\$ _____	\$ _____
Retirement . . . . .	\$ _____	\$ _____
Social Security . . . . .	\$ _____	\$ _____
Welfare . . . . .	\$ _____	\$ _____
Other Income . . . . .	\$ _____	\$ _____
<b>Total</b> . . . . .	\$ _____	\$ _____

\$ \_\_\_\_\_  
**JOINT INCOME**

You need not reveal alimony, child support, or maintenance income, if you do not want to be considered in evaluating this application.

Are you a co-maker, endorser, or grantor on any loan or contract?

Are there any judgments unsatisfied or lawsuits pending against you?

Have you gone through bankruptcy within the last 14 years?

### BANK REFERENCES

Name of Bank \_\_\_\_\_ Branch \_\_\_\_\_  CHECKING  SAVINGS  
 Name of Bank \_\_\_\_\_ Branch \_\_\_\_\_  CHECKING  SAVINGS

### PERSONAL REFERENCES

Nearest Relative \_\_\_\_\_ Home Address \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_  
 Other Reference \_\_\_\_\_ Home Address \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**AUTO(S)**  
 Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_  
 Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

