SECU CREDIT UNION CO-OPERATIVE SOCIETY LIMITED

HEAD OFFICE: 101 Southern Main Road, California, Couva. Trinidad West Indies. Phone: 1(868) 636-5487 Fax: 1 (868) 679-3293	BRANCH OFFICE: Level 2 Ramsingh's Plaza 11 Soutthern Main Road, Chaguanas Tel 671-2141 Fax 665-3131	BRANCH OFFICE: 55 High Street, Princes Town Tel 655-3116/3023 Fax 655-6479.		
HOME MORTGAGE LOANS	LOAN APPLICATION	SMALL BUSI	SMALL BUSINESS LOANS	
		SECU ACCT. NO		
NAME OF APPLICANT	COMPANY	TEL.NO.		
NAME OF APPLICANT(PRINT)				
HOME ADDRESS (PRIN	LOCATION			
TEL 1	NO.: POSITIO	N		
I hereby place for a loan/ additional loan of				
		(\$)	
PURPOSE OF LOAN (Explain Fully)				
SECURITY OFFERED	Shares/ Character			
	Other (Give Details)			
PERSONAL DATA	OTHER COMMITM	IENTS		
Date of Birth		PAYMENT	BALANCE	
Single (incl. widowed/ divorced etc.)	House (Mortgage/ Ren	ntal)	XXXXXXXX	
Married (incl. common-law)	Hire Purchase	,	MAMAAA	
No. of Dependants	Credit Union		xxxxxxxx	
Gross Income \$	Bank Loan			
Income from other sources \$	Other			
Total Income \$	·			
I declare that I am not indebted to any other Credi The statements herein are made for the purpose of			n.	
Make Cheque payable to	4			
SELF OTHER	Verified By OCK LETTERS)	Da	Date	
CO-MAKER DATA	DOCK BETTERS)			
I/We the undersigned agree to pledge my/ our shares in understanding that SECU Credit Union Co-operative Security Securi		as co-maker of the loan referred quivalent amount of the loan has be		
Signature:	Address:			
Verified By:	_			
Signature:	Address:			
Verified By:			12 112	
AMT.\$APPROVED BY (CREDIT COMMITTEE/ MANAGER ON	CHEQUE AM	ИТТ	
		CHEQUE NO		
		DATE		
EXCEPTIONS (If any)				
(All Committee members present at the meeting at which this application was approved must sign above)		Manager'	Manager's Signature	