

## **CUSTOMS CREDIT CO-OPERATIVE SOCIETY (S) LTD.**

35 Selegie Road #04-01, Parklane Shopping Mall, Singapore 188307 Tel: +65 6338 4890 Fax: +65 6338 4870 Email: cccsl@singnet.com.sg

UNSECURED	LOAN A	PPLICATION
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Membership No. :	(Ne	O SURETY )		Date Joined :	
PART I – PERSONAL PAR	RTICULARS				
NAME (as in NRIC) IN BLOC	К			Gender :	Male/Female
NRIC :	Pink/Blue Age :	Date of Birth :	Mari	ital Status : Single / Mar	ried
Residential address :		Post	al Code	_Email :	
Contact No:	(Home)	_ (Office)	(Mobile)		
Job title (Rank) :	Bra	nch :		Date employed	
Gross Salary : \$	pm *Take-home Sala	ry : \$	pm *(to exclu	de OT & allowances)	
PART II – LOAN DETAIL	S (to be filled by applicat	nt) & DOCUMENTS S	SUBMISSION		
[ ] A copy of applicant's	NRIC is required	[ ] A copy	of applicant's la	test pay slip must be s	ubmitted
Loan amount required: \$	(Dollars :			) Interest at 6%	6 per annum.
Purpose of Loan :			_ Proposed repay	yment plan :	months
I authorize the Head of Department or officer duly authorize to deduct from my salary \$ on account of principal with interest at 6% per annum from the month of repayment of the loan onwards till the loan is fully repaid. I agree to pay a surcharge of \$20.00 per month in the event of default in my loan repayment. I also agree to inform the society of any change in my address. In the event that I fail, neglect, or refuse to inform the society of the change in my address, the society may use my last known address to serve all correspondence and Court Documents and such service shall be considered good and proper service and would be considered as rightly served. I also authorise the society to deduct from my thrift/general savings and share capital to offset my outstanding loan balance.					

## PART III – DECLARATION (Important : Applicant please read carefully before you sign)

I declare and agree to the following :

(a) that I have made full disclosure of all facts and information in Part I and II above;

(b) that I authorize the Society to obtain and verify any personal information about me;

- (c) that I am not an undischarged bankrupt, and also that no statutory demand has been served on me nor legal proceedings taken against me;(d) that I agree to pay the loan amount or a reduced amount approved by the Society, and I hereby authorize my employer to deduct from my salary the loan repayment in equal monthly installments until the loan is completely paid within the mutually agreed loan repayment plan;(e) that I am not a surety/ guarantor for any other loan with any other organization;
- (f) that I understand that the Society reserves the right to decline my application for the loan without giving any reason(s) whatsoever:

(g) that I have not taken any loan from other thrift and loan co-operatives, banks or other financial credit companies;

(h) that I have no plans to take a loan and resign from my employment and I am committed to pay the loan; and

(i) that in the event I default repayment of the loan for a period up to a maximum of two monthly installments, the Society may take legal action to recover the outstanding loan and interest payable. I also agree that if I default in the payment of this loan, the Society may list my name in DP SME Credit Bureau's record and I may be assessed by financial institutions and other approving credit companies. All legal costs, incidental expenses and disbursements incurred by the Society in claiming for the non-payment of my outstanding loan shall be fully paid by me on indemnity basis.

## PART IV CREDIT COMMITTEE'S DECISION & BOARD OF DIRECTORS' APPROVAL

	Salary	Thrift Savings	Curi	ent Liabilities	Eligibility	Remarks
Applicant		Rate pm	Bond	No:		
		Balance :				
Date : Name of Processing Officer & Signature:						
Approved	/ <b>Rejected</b> : \$		Repayme	nt period :	months	
Outstanding	g Loan : \$		Principal	at : \$	per month	
Total	: \$		Interest a	6 % p.a. : \$	per month	
			Total Repa	yment : \$	per month	
Approved by Credit Committee Approved / Rejected by Board of Directors						
Chairma	n Secret	ary Committee M				
		U C	<b></b>	Chairman Board of Directors	s BOD Meeting Dat	Date

## ACKNOWLEDGEMENT AND AGREEMENT TO NOTIFY CHANGE OF ADDRESS

I hereby acknowledge receipt of cheque No.	dated	\$
In the presence of	on	
(Name of Staff/Official)		(Date)
I agree to inform the society of any change in my	address. In the event that I	fail, neglect or refuse to inform the society
of the change in my address, the society may use a	ny last known address to se	rve all correspondence and Court
Documents and such service shall be considered g	ood and proper service and	l would be considered rightly served.
Name of Recipient	Signature of Recipient	
Name of Staff/Official:	Signature of Staff/Official	: