

# Attachment F – Loan Application Form

## Community Care Beenleigh Districts Inc. Loan Application Form

Date: \_\_\_\_\_ NILS Reference Number: \_\_\_\_\_

### Client 1 Details

Surname: \_\_\_\_\_ First Name/s: \_\_\_\_\_

### Client 2 Details

Surname: \_\_\_\_\_ First Name/s: \_\_\_\_\_

### Gender:

Female  Male  Joint?

Applicant 1 Date of Birth \_\_\_\_\_ Applicant 2 Date of Birth \_\_\_\_\_

### Country of Origin

Applicant 1 \_\_\_\_\_ Applicant 2 \_\_\_\_\_

Aust, ATSI? (Y/N) \_\_\_\_\_ Aust, ATSI? (Y/N) \_\_\_\_\_

### Pension/Benefit

Applicant 1 Pension/Benefit \_\_\_\_\_ Applicant 2 Pension/Benefit \_\_\_\_\_

### Address

Street: \_\_\_\_\_

Suburb \_\_\_\_\_ Post code \_\_\_\_\_

### Contact Information

Home: \_\_\_\_\_ Work: \_\_\_\_\_

Mobile: \_\_\_\_\_ Other \_\_\_\_\_

Email: \_\_\_\_\_

Secondary Contact\* Name \_\_\_\_\_ Secondary Contact Phone \_\_\_\_\_

\*Secondary Contact will only be used in exceptional circumstances & no loan information will be divulged.

### Household

Number of dependents: \_\_\_\_\_ Dependents' average age: \_\_\_\_\_

Housing type \_\_\_\_\_ Length of time at this address: \_\_\_\_\_  
\_Public rent \_Private rent \_Own house  
\_Relatives \_Transitional \_Mobile Home

### Loan Purpose Item/Product

Item: \_\_\_\_\_ Make/Model No.: \_\_\_\_\_

Cost: \_\_\_\_\_

### Referral Source

Friend  Relative  Case Worker  Community Organisation  
 Centrelink  Other