

CREDIT APPLICATION

| DEBTOR | SPOUSE / COHABITANT |
|---|---|
| Surname: <input style="width: 90%;" type="text"/> | Surname: <input style="width: 90%;" type="text"/> |
| First name: <input style="width: 90%;" type="text"/> | First name: <input style="width: 90%;" type="text"/> |
| Date of Birth: <input style="width: 90%;" type="text"/> | Date of Birth: <input style="width: 90%;" type="text"/> |
| Marital Status: <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> separated <input type="checkbox"/> divorced <input type="checkbox"/> widow(er) <input type="checkbox"/> pacsed | Marital Status: <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> separated <input type="checkbox"/> divorced <input type="checkbox"/> widow(er) <input type="checkbox"/> pacsed |
| Family situation: <input type="checkbox"/> couple <input type="checkbox"/> living together <input type="checkbox"/> alone <input type="checkbox"/> alone with children | |
| Dependent children: <input type="checkbox"/> until 6 years <input type="checkbox"/> from 7-10 years <input type="checkbox"/> from 11-12 years <input type="checkbox"/> more than 12 years | |
| Nationality: <input style="width: 90%;" type="text"/> | Nationality: <input style="width: 90%;" type="text"/> |
| Residence permit: <input type="checkbox"/> C <input type="checkbox"/> B <input type="checkbox"/> L | Residence permit: <input type="checkbox"/> C <input type="checkbox"/> B <input type="checkbox"/> L |
| Address : <input style="width: 90%;" type="text"/> | |
| NPA / Locality: <input style="width: 80%;" type="text"/> Since: <input style="width: 10%;" type="text"/> | |
| If < 3 years previous address: <input style="width: 90%;" type="text"/> | If < 3 years previous address: <input style="width: 90%;" type="text"/> |
| Address if other country: <input style="width: 90%;" type="text"/> | Address if other country: <input style="width: 90%;" type="text"/> |
| Home phone nb: <input style="width: 90%;" type="text"/> | Home phone nb: <input style="width: 90%;" type="text"/> |
| Mobile: <input style="width: 90%;" type="text"/> | Mobile: <input style="width: 90%;" type="text"/> |
| Email: <input style="width: 90%;" type="text"/> | Email: <input style="width: 90%;" type="text"/> |
| Current occupation: <input style="width: 90%;" type="text"/> | Current occupation: <input style="width: 90%;" type="text"/> |
| Employer name + NPA: <input style="width: 90%;" type="text"/> | Employer name + NPA: <input style="width: 90%;" type="text"/> |
| Employed in the same situation since: <input style="width: 90%;" type="text"/> | Employed in the same situation since: <input style="width: 90%;" type="text"/> |
| Employment contract: <input type="checkbox"/> permanent <input type="checkbox"/> non cancelled | Employment contract: <input type="checkbox"/> permanent <input type="checkbox"/> non cancelled |
| Previous employer: <input style="width: 90%;" type="text"/> | Previous employer: <input style="width: 90%;" type="text"/> |
| Duration of previous job (year): <input style="width: 90%;" type="text"/> | Duration of previous job (year): <input style="width: 90%;" type="text"/> |
| Prof. phone nb: <input style="width: 90%;" type="text"/> | Prof. phone nb: <input style="width: 90%;" type="text"/> |
| Monthly gross salary: <input style="width: 80%;" type="text"/> <input type="checkbox"/> x 12 <input type="checkbox"/> x 13 | Monthly gross salary: <input style="width: 80%;" type="text"/> <input type="checkbox"/> x 12 <input type="checkbox"/> x 13 |
| Other financial monthly incomes: <input style="width: 80%;" type="text"/> <input type="checkbox"/> x 12 <input type="checkbox"/> x 13 | Other financial monthly incomes: <input style="width: 80%;" type="text"/> <input type="checkbox"/> x 12 <input type="checkbox"/> x 13 |
| Alimony/Maintenance allowance: <input style="width: 80%;" type="text"/> <input type="checkbox"/> received <input type="checkbox"/> to be paid | Alimony/Maintenance allowance: <input style="width: 80%;" type="text"/> <input type="checkbox"/> received <input type="checkbox"/> to be paid |
| Monthly rent (total): <input style="width: 80%;" type="text"/> <input type="checkbox"/> shared | Monthly rent (total): <input style="width: 80%;" type="text"/> <input type="checkbox"/> shared |
| Other current loans/leasing: <input style="width: 90%;" type="text"/> | Other current loans/leasing: <input style="width: 90%;" type="text"/> |
| Other expenses (meals, etc): <input style="width: 90%;" type="text"/> | Other expenses (meals, etc): <input style="width: 90%;" type="text"/> |
| Are you under guardianship or curatorship? <input type="checkbox"/> yes <input type="checkbox"/> no | Are you under guardianship or curatorship? <input type="checkbox"/> yes <input type="checkbox"/> no |
| Pursuits within the 3 last years? <input type="checkbox"/> yes <input type="checkbox"/> no | Pursuits within the 3 last years? <input type="checkbox"/> yes <input type="checkbox"/> no |

| OBJECT | |
|--|--|
| Loan purpose: <input style="width: 90%;" type="text"/> | |
| Desired amount: <input style="width: 90%;" type="text"/> | Duration (month): <input style="width: 90%;" type="text"/> |
| Repurchase of credit/leasing: <input type="checkbox"/> yes <input type="checkbox"/> no | Payback amount: <input style="width: 90%;" type="text"/> |
| Bank account nb: <input style="width: 90%;" type="text"/> | Bank clearing nb: <input style="width: 90%;" type="text"/> |
| Comment(s): <input style="width: 90%;" type="text"/> | |
| Place and date: <input style="width: 90%;" type="text"/> | Place and date: <input style="width: 90%;" type="text"/> |
| Debtor's signature: <input style="width: 90%;" type="text"/> | Spouse/Cohabitant's signature : <input style="width: 90%;" type="text"/> <small>(only if joint and several co-debtor's)</small> |