



**AIRPORTS AUTHORITY CREDIT UNION
CO-OPERATIVE SOCIETY LIMITED**

South Terminal, Piarco International Airport,
Golden Grove Road, Piarco, Trinidad, W.I.

Tel: 669-5566/235-3599 Fax: 669-4135



REGULAR LOAN APPLICATION

Registered No. CU 149185

1. FIRST NAME:			
2. SURNAME:			
3. STAFF NO:		7. TELEPHONE #:	
4. POSITION:		8. EMAIL:	
5. DEPARTMENT:		9. HOME ADDRESS:	
6. DATE JOINED AATT:			
10. AMOUNT APPLIED FOR:			
11. I WILL PAY MONTHLY/FORTHNIGHTLY INSTALLMENT OF: (subject to any variance by the Credit Committee)			
12. DURATION REQUESTED:			
13. PURPOSE OF LOAN: (attach documents where applicable - e.g., performance invoices.)			
14. DO YOU HAVE A CURRENT LOAN WITH THE CREDIT UNION?		NO	YES
15. IF YES WAS IT A REFINANCED LOAN?		NO	YES
16. WAS HALF PAID?		NO	YES
<i>Applicant's Signature:</i>		<i>Date:</i>	
GUARANTOR'S NAME:		HOME:	
STAFF NO.:	DEPT.:		
SHARE HOLDINGS:			
LOAN BALANCE:			
SIGNATURE:		DATE:	

LOAN AGREEMENT

In case of default as herein agreed unless excused by the Committee of Management the entire balance of this note shall become immediately due and payable.

I/We hereby pledge all paid shares, payment on shares, or deposits which I/We now have or thereafter may have in the Credit Union for the payment of loans, interests, fines, cost, expenses, etc., and I/We authorize the Airports Authority of Trinidad and Tobago to pay the Airports Authority Credit Union any outstanding amount due from any money owed to me by way of salaries, wages, gratuity or any money owed to me by the Airports Authority of Trinidad and Tobago etc. To be applied towards the payment of the said loans, interests, fines, costs or expenses. **The Board also reserves the sole and absolute right to increase interest rates during the duration of the loan to the member.**

Signature:

Address:

Maker

Co-Maker

Co-Maker

Cheque No.:

Disbursement Voucher No.:

OFFICIAL USE ONLY **To be completed by Treasurer Manager**

MEMBER'S STATUS AS AT:

- | | |
|--|----|
| 1. SHAREHOLDINGS | \$ |
| 2. MONTHLY SHARE DEDUCTIONS | \$ |
| 3. OUTSTANDING LOAN BALANCE | \$ |
| 4. MONTHLY PAYMENT | \$ |
| 5. WHEN WAS THE LAST LOAN APPROVED | |
| 6. HOW MANY REFINANCED LOANS WITHIN THE LAST TWELVE MONTHS | |
| 7. LOAN STATUS | |
| 8. REFINANCING RECEIPT NO. | |

To be completed by Credit Committee

On the _____ we the undersigned approved the within loan of dollars (\$ _____)

To be repaid in monthly installments of _____

Dollars (\$ _____) plus interest

Outstanding loan balance to be added/deducted to/from above loan application _____

The first installment to be paid on _____

- APPROVED:
- (1) _____
 - (2) _____
 - (3) _____
 - (4) _____
 - (5) _____

INSTRUCTIONS: