



**LOAN APPLICATION FORM**

**PERSONAL DETAILS ( PLEASE WRITE IN BLOCK)**

NAME OF APPLICANT (as in NRIC):		
HOME ADDRESS:		OFFICE TEL:
		MOBILE:
NRIC NO:	DATE OF BIRTH:	HOME TEL:
NAME OF BANK / BRANCH		BANK ACCOUNT NO:
NAME OF COMPANY:		
DEPARTMENT:	LOCATION:	DESIGNATION:
EMAIL ADDRESS:		
<b>LOAN AMOUNT APPLY:</b> (A)		REPAYMENT PERIOD: 12 / 18 / 24 / 30 / 36 months
Total Saving : (B)		BASIC SALARY: (please submit latest payslip)
Loan apply less Total Saving (C) = A-B		<b>Please submit Credit Bureau Report if loan application amount net off total saving is =&gt;\$10,000</b>

**I understand that all loan applications and documents submitted are subjected to assessment of my credit worthiness and the approval of the Committee of Management.**

**REASON OF LOAN: (Please tick the type of loan appropriately)**

RENOVAION     EDUCATION     MEDICAL EXPENSES     MARRIAGE     TRAVELLING  
 PURCHASE OF FLAT     PURCHASE OF APPLICANCES     PURCHASE OF VEHICLE     LEGAL FEES  
 OTHERS: \_\_\_\_\_ \* please specify

**TYPES OF LOAN: (Please tick the type of loan appropriately)**

AGAINST SUBSCRIPTION     \*UNSECURED LOAN     SURETY LOAN ( Please fill up your surety particular below)  
 I declare that I am not a surety / guarantor for any other loan with ST Co-op.

**SURETY 1 :**

NAME: \_\_\_\_\_  
 NRIC NO: \_\_\_\_\_  
 SALARY: \_\_\_\_\_  
 TOTAL SAVING: \_\_\_\_\_

**SURETY 2 :**

NAME: \_\_\_\_\_  
 NRIC NO: \_\_\_\_\_  
 SALARY: \_\_\_\_\_  
 TOTAL SAVING: \_\_\_\_\_

**NOTES:-**

Documents required to be submitted with this application:- Recent salary slip and supporting documents as proof for medical and Education loan. Please complete all the relevant particulars, as insufficient detail and non- submission of required documents will delay in processing the loan.

**DECLARATION:-**

All Statements made in this declaration are, to the best of my knowledge and belief, correct and complete.

I have read and understood the Co-operative's Personal Data Protection Policy. I hereby consent to the Co-operative collecting, using and disclosing my personal data for the purposes set out therein, in particular, to the disclosure of my personal data in accordance with the Personal Data Protection Act.

\_\_\_\_\_  
Applicant's Signature / Date

**FOR OFFICIAL USE ONLY**

Approved at the Committee Meeting held on \_\_\_\_\_

Signature of Chairman \_\_\_\_\_

Personal Data Protection Policy may be downloaded from [www.stcoop.sg/images/pdpa.pdf](http://www.stcoop.sg/images/pdpa.pdf)