

| BANK | USEONLY | | |
|-------------|--------------------------|--|--|
| CIF Number: | Loan Application Number: | | |
| | | | |

Personal Loan, Mortgage and Overdraft Application Form

| Loan Information | Sank that is rately compliant prior to any advance or rainas. | |
|---|---|--------------------------------------|
| New Increase | Amount Requested \$ | Date (DD/MM/YYYY) |
| Overdraft Information | | |
| New ☐ Increase Term Requested (3 month minimum) Currency ☐ BMD ☐ USD Purpose of Request | | ccount Number |
| Applicant - Personal Information | | |
| ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Other | Please ✔ One ☐ Individual Appl | cant |
| Last Name | First Name | Middle Initials |
| Residential Address | Parish | Postal Code Years at Present Address |
| Mailing Address (if different from above) | Mailing Address (if different from above) Parish Pos | |
| Residence: Rent Own Own Free and Clear Live with Re | lativesName of Landlord or Mortage Holder | Telephone No. |
| Home Telephone Work Te | lelephone | |
| Notice receptions work to | Elephone | Cell Number |
| Email Address Date of Birth (DD/ | /MM/YYYY) ID Type | ID Number |
| ☐ Married ☐ Single ☐ Separated ☐ Divorced ☐ Widowed | No. of Dependents Ages | |
| Bermudian: Yes No If No, Nationality | | Date moved to Bermuda (DD/MM/YYYY) |
| | | |
| Employment Status: Full Time Part Time Self-Emplo | yed Retired Other (please specify): | |
| Name of Current Employer | Address | Start Date (DD/MM/YYYY) |
| Main Telephone | Position | Years of Employment |
| Name of Previous Employer (If at current less than two years) | Address | |
| Main Telephone | Position | Years of Employment |
| | | |
| Name of Contact (not currently residing with you) | | Telephone No. |
| Do you have any outstanding debts with Bermuda Credit Association? Do you have any outstanding judgements or are you a defendant in any Do you have any obligations as an endorser, co-maker or guarantor? | suits or legal actions? | No No No |

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Personal Loan, Mortgage and Overdraft Application Form

Note: All Loan Applicants must have a Savings/Chequing Account with Clarien Bank that is fully compliant prior to any advance of funds.

| Joint Applicant - Personal Information | | | | | | | | | |
|---|---------------------------------------|---------|--|-------------|-----------|------------------------------|-----------------------------|--|--|
| Mr. Mrs. Ms. Miss Other Please ✓ One Individual Applicant Joint Applicant Guarantor Trustee | | | | | | | | | |
| Last Name First Name Middle Initials | | | | | | | le Initials | | |
| Residential Address Parish | | | | Postal Code | | | Years at Present Address | | |
| Mailing Address (if different from above) Parish | | | Postal Code | | | Years at Previous Address | | | |
| Residence: Rent Own Own Free and Clear Live with Relati | vesName of Landlord or Mortage Holder | elephor | ne No. | | | | | | |
| Home Telephone Work Telephone Cell Nu | | | | | | | | | |
| Email Address Date of Birth (DD/MM | //YYYY) ID Type | | ID Numb | er | | | | | |
| | lo. of Dependents Ages | | | | | | | | |
| Bermudian: Yes No If No, Nationality | _ | | | | | | | | |
| Employment Status: Full Time Part Time Self-Employed | _ | | Date mo | ved to I | Bermuda (| DD/MM | /YYYY) | | |
| | | | Chart Dat | 1004 | 44400000 | | | | |
| Name of Current Employer Address | | | Start Date (DD/MM/YYYY) Years of Employment | | | | | | |
| Main Telephone | Position | | rears or | ЕПРЮ | yment | | | | |
| Name of Previous Employer (If at current less than two years) | Address | | | | | | | | |
| Main Telephone | Position | | Years of | Emplo | yment | | | | |
| Name of Contact (not currently residing with you) | | elephor | ne No. | | | | | | |
| Do you have any outstanding debts with Bermuda Credit Association? Do you have any outstanding judgements or are you a defendant in any suit Do you have any obligations as an endorser, co-maker or guarantor? | Yes No |) | | | | | | | |
| I/We hereby declare that the information which I/We have provided to you in support of this application is true and complete in all material respects and that no information is omitted in relation to any of the items describing my/our liabilities. I/We authorise you to contact such persons as you think fit to verify the correctness and completeness of this information and authorise any such persons to release it to you. I/We hereby authorize the Bank to communicate via email. Yes No | | | | | | | | | |
| I/We authorise Clarien Bank Limited to debit the loan payment from my/ou | r account number | | | | | | | | |
| I/we understand that should this application be successful, I/we may be required to obtain independent legal advice in connection with any legal documentation prepared pursuant to my/our application. I/we accept and acknowledge that I am/we are responsible for any legal fees or associated costs incurred in obtaining such independent legal advice, and that Clarien Bank Limited, nor any of its affiliates, will not be liable for any such fees or costs in any way whatsoever. | | | | | | | | | |
| Signature of Main Applicant | | | Date (DE |)/MM/YY | YY) | | | | |
| Signature of Joint Applicant | | | Date (DD |)/MM/YY | YY) | | | | |



Personal Financial Statement

| Please complete all sections. (| List Income\Expenses) | | |
|---|--|--|--|
| Income Statement | | Statement of Net Worth | |
| Monthly Income | | Current Assets (what I own) | |
| Applicant's Salary (net) | | Chequing and Savings Accounts | Balance |
| Co-Applicant's Salary (net) | | # | |
| Investment Income | | # | |
| Rental Income | | # | |
| Other Income ——— | | Term Deposits | |
| Bonus — | | | |
| Pension | | Investments (Provide Statements) | |
| Total Monthly Income \$ | | Stocks/Mutual Funds (provide statements) | |
| Monthly Commitments | | What I'm Owed | |
| Mortgage | | Othor | |
| Rent | | Other | |
| Church Tithes | | | |
| Child Maintenance Payments | | Total Current Assets \$ | |
| Installment Payments/Loans: | | Fixed Assets | Value |
| Vehicle | | Home Fair Market Value | Value |
| Furniture | | | |
| Personal Loans | | Real Estate: Local | |
| Credit Cards | | ☐ Overseas | |
| Others Monthly Obligations | | Vehicle | |
| Land Tax | | | |
| Home Insurance | | Household Effects | |
| Vehicle License & Insurance | | Other | |
| Life Insurance | | 13 | |
| Miscellaneous | | Total Fixed Assets \$ | |
| Total Monthly Expenditures \$ | | Total Assets \$ | |
| | | Liabilities (MI 110) | |
| I/We hereby declare that the information p | | Liabilities (What I Owe) | Balance |
| material respects and that no information in describing my/our income and expenses. | s omitted in relation to any of the items | Mortgage(s) (Disclose Bank) | Butance |
| | | | |
| | | | |
| Signature of Main Applicant | Date (DD/MM/YYYY) | Personal Loans (Disclose Bank) | |
| | | | |
| Simple of this Application | | | |
| Signature of Joint Applicant | Date (DD/MM/YYYY) | | |
| For more than two applicants please fill in ac | ditional application forms. | Credit Cards (Authorized Limit) | |
| Loan application checklist: | | Clarien Bank Limited | |
| Complete all sections of the applic | cation form | Other | |
| Provide a quote for item(s) from su | | | |
| Proof of: | | | |
| 3 months of Employment and inco | ome (e.g. pay stub, 3 month bank statements) | Other Debts | |
| 3 months of Rent/Mortgage paym | ents (e.g. receipt for payment, signed lease, bank statements) | Other Debts | |
| For home purchases/mortgages: | | Total Liabilities \$ | |
| Details of insurance on existing ho | | | |
| Copy of the sales listing or the pur | chase & sales agreement | Net Worth \$ | (Total Assets minus Total Liabilities) |

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