



## LOAN APPLICATION FORM

PLEASE PRINT CLEARLY. COMPLETE ALL INFORMATION.

\*Please email completed form to [info@bleccu.com](mailto:info@bleccu.com)

|                       |                        |
|-----------------------|------------------------|
| NAME:                 | ACCOUNT NUMBER:        |
| STREET ADDRESS:       | POSTAL ADDRESS:        |
| HOME PHONE NUMBER:    | WORK PHONE NUMBER:     |
| RANK/JOB TITLE:       | EMPLOYEE NUMBER:       |
| EMPLOYER:             |                        |
| CELL PHONE NUMBER:    | EMAIL ADDRESS:         |
| POSTING/WORK ADDRESS: |                        |
| LENGTH OF SERVICE:    | DATE CONTRACT EXPIRES: |

|  |                |
|--|----------------|
| AMOUNT APPLYING FOR:   | DATE REQUIRED: |
| AMOUNT IN WORDS:   |                |
| SECURITY OFFERED: <input type="checkbox"/> SHARES <input type="checkbox"/> OTHER <i>(please specify)</i> |                |

**PURPOSE:**

- |   |   |
|---|---|
| <input type="checkbox"/> Consolidation of Debts<br><input type="checkbox"/> Refinancing of Loan<br><input type="checkbox"/> Purchase of Land/Building<br><input type="checkbox"/> Wedding Expenses<br><input type="checkbox"/> Home Improvements/Repair<br><input type="checkbox"/> Funeral Expenses<br><input type="checkbox"/> Down Payments of Property<br><input type="checkbox"/> Shopping<br><input type="checkbox"/> Building Materials<br><input type="checkbox"/> Dental Expenses<br><input type="checkbox"/> Purchase/Repair of Vehicle | <input type="checkbox"/> Family Emergencies<br><input type="checkbox"/> License & Insurance of Vehicle<br><input type="checkbox"/> School Fees/School Supplies<br><input type="checkbox"/> Legal Fees<br><input type="checkbox"/> Payment of Bills<br><input type="checkbox"/> Vacation Travel<br><input type="checkbox"/> Medical Expense<br><input type="checkbox"/> Purchase/Repair Household Items<br><input type="checkbox"/> Purchase/Repair of Boat<br><input type="checkbox"/> Business Investments<br><input type="checkbox"/> Incidental/Other Expenses |
|---|---|

|           |       |
|-----------|-------|
| SIGNATURE | DATE: |
|-----------|-------|

### ADDITIONAL INFORMATION