

# STOCKING STUFFER LOAN APPLICATION

AMOUNT REQUESTED: \_\_\_\_\_

**Loan Rate as low as 8.49%**

You may apply for any amount between \$500 and \$5,000. Life and/or Disability Insurance is available, please contact your branch for details.

\*\*Stocking Stuffer funds may not be used to paydown or payout existing loans with Ontario Educational Credit Union Limited.

Payments will be amortized over a period of 11 months.

For value received, I/we promise to pay jointly and severally the sum requested above and costs of the loan to Ontario Educational Credit Union Limited.

DATED AT \_\_\_\_\_ This \_\_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_

CO-APPLICANT'S SIGNATURE \_\_\_\_\_

**Personal Information**

Account Number		Date	
Applicant's Name		Date of Birth (MMDDYY)	Social Insurance Number
Co-Applicant's Name		Date of Birth (MMDDYY)	Social Insurance Number
Address		Telephone	
City		Postal Code	

**Employment Information**

Applicant Employer		Position	Length
Location		Telephone	Annual Income
Co-Applicant Employer		Position	Length
Location		Telephone	Annual Income

ASSETS			LIABILITIES		
TYPE	VALUE	TYPE	WHERE	BALANCE	PAYMENT
Real Estate		Mortgage			
RRSP's		Rent			
Savings		Loans			
Automobiles		Car Loan			
Other		Credit Cards			
		Other			

For the value received I/We promise, jointly and severally, to pay, on demand, the principal, interest and any costs of the loan to the Ontario Educational Credit Union. I/We authorize the Credit Union to obtain personal and credit information regarding me/us and to furnish to other credit grantors and any credit bureau the particulars of this application. I/We understand interest will be charged at the rate stated from the date of advance to the date of payment in full. I/We acknowledge a \$25.00 administration fee will be applied upon disbursement.

DATED AT \_\_\_\_\_ This \_\_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_

CO-APPLICANT'S SIGNATURE \_\_\_\_\_

**PAYMENT INSTRUCTIONS:**

I hereby authorize the Payroll Supervisor to deduct from my pay each pay period and transmit the same to the Ontario Educational Credit Union Limited.

EMPLOYEE SIGNATURE \_\_\_\_\_

**FOR OFFICE USE ONLY:**

COMMENTS \_\_\_\_\_

LOAN OFFICER \_\_\_\_\_

DISBURSEMENT \_\_\_\_\_

ACCOUNT# \_\_\_\_\_

CHEQUE # \_\_\_\_\_

