



Fast Track Application for Top-Up to existing Personal Loan

No:

Title _____ First Name _____
(Mr, Mrs, Miss, Ms, other)

Surname _____

Use this fast track form to apply for a top-up loan where you meet the criteria below. Otherwise use a full loan application.

No more than 24 months since loan Three months since last top-up loan Six months loan repayments on-time and no recent arrears

My income has not reduced and I have not taken on or increased other debts or CCJs since my last full loan application to Lewisham Plus Credit Union Limited.

I have not applied for or entered into a bankruptcy order, IVA, debt collection or Debt Management Plan and am not intending to do so in the next twelve months.

Current Address _____

Postcode _____ Mobile _____

Please bring proof of your ID and adress with this form and when you sign the loan agreement.

Time at current address (Years / Months) / Landlord (if not a home owner) _____

I apply for a top-up loan of: £ _____ (New loan total may not exceed last loan granted). I declare that:

- 1) The statements given on this form for the purpose of obtaining a loan are true to my best knowledge and belief. I understand that knowingly giving false information is fraud.
- 2) I am not indebted to any other credit union, bank or loan agency, either as a borrower or guarantor, except as stated on my full loan application.
- 3) I have read the 'Your Personal Information' note below.

Important - Your Personal Information: We will use the information you provide in this form, and the existing information we have about you, to consider your application. We may use Credit Reference Agencies (CRAs) to help us make a decision, and we report all loans that we make to CRAs. What we do and how both we and CRAs will use your information is outlined in the accompanying leaflet *Managing Your Information – Privacy Notice Summary*, and in greater detail in the *Lewisham Plus Credit Union Privacy Notice* and the *Credit Reference Agency Information Notice* (see website or ask for a copy).

Your Signature _____ Date _____

Return this form to: **Lewisham Plus Credit Union Limited, 262 Kirkdale, Sydenham, London SE26 4RS, or your local branch.**
Tel: 020 8778 4738 Email: admin@pluscu.co.uk www.pluscu.co.uk
Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and The Prudential Regulation Authority - Firm Reference 213588

ID verified with copy in Curtains Application declined Loan Agreement produced by:
 Application checked by _____ Application referred _____