

## JAMAICA POLICE CO-OPERATIVE CREDIT UNION LIMITED PAY DAY LOAN APPLICATION FORM

Date:	Branch:	TRN:			
Name :		Account No.			
Home Address:					
Work Address					
Contact numbers (H	(W)		(C)		
Division:	ID Type:		ID#:		
Rank:	An	Amount Requested:			
Repayment Amount:	Pay	Payment Due Date:			
Purpose of Loan					
Signature of memb	er:	Date:			
Processing Officer:					
	INTERNAL U	USE ONLY			
		YES	NO		
1. Does the mo	ember's salary come to the C.U?				
2. Is the loan	within the pre-authorized limit?				
3. Was the pre	evious loan repaid on time?				
Approved		Date			
Approved		Date			