
PERSONAL LOAN APPLICATION**APPLICANT INFORMATION:**

First Name: _____ Middle Name: _____

Last Name: _____ Date of birth: ____/____/____

Marital Status: _____ No. of Dependents: ____

Email Address: _____

Driver's License or Passport number: _____ Expiry Date: ____/____/____

Tax Payer Registration number (TRN): _____

Home telephone number: _____ - _____ Cell number: _____ - _____

Address: _____

City: _____ Parish: _____

PREVIOUS ADDRESS (if at current address for less than 5 years):

Address: _____

City: _____ Parish: _____

APPLICANT EMPLOYER:

Employer: _____

Address: _____

City: _____ Parish: _____

Work telephone number: _____ - _____ Occupation: _____

Employment duration: ____ Years ____ Months

Please provide the information for 2 contact persons.**CONTACT PERSONS:**

First Name: _____ First Name: _____

Last Name: _____ Last Name: _____

Relation: _____ Relation: _____

Phone Number: ____ - _____ Phone Number: ____ - _____

GUARANTOR INFORMATION:

First Name: _____ Middle Name: _____

Last Name: _____ Date of birth: ____/____/____

Marital Status: _____ No. of Dependents: ____

Email Address: _____

Driver's License or Passport number: _____ Expiry Date: ____/____/____

Tax Payer Registration number (TRN): _____

Home telephone number: _____ - _____ Cell number: _____ - _____

Address: _____

City: _____ Parish: _____

GUARANTOR EMPLOYER:

Employer: _____

Address: _____

City: _____ Parish: _____

Work telephone number: _____ - _____ Occupation: _____

Employment duration: _____ Years _____ Months

CONTACT PERSON:

First Name: _____

Last Name: _____

Relation: _____

Phone Number: _____ - _____

APPLICANT LOAN REQUEST:

WORKSHEET:

Applicant income \$ _____ Weekly/Bi-Weekly/Monthly

Guarantor income \$ _____ Weekly/Bi-Weekly/Monthly

Loan amount applied for \$ _____

Marketing Information:

How did you hear about Regions Financial Services? _____

I DECLARE THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT, AUTHORIZE IT'S VERIFICATION WITH OTHER PARTIES.

I understand any false or misleading statements in my application may cause this loan application to be denied. I agree that this application and attachment(s) shall be Regions Financial Services, LLC property whether or not this loan application is approved.

By signing my first & last below, I stipulate that I agree to all of the terms and conditions stipulated on this application.

Print Name

Date