

APPLICATION FOR (PLEASE INDICATE) FAILURE TO COMPLETE ALL RELEVANT INFORMATION MAY DELAY THE PROCESSING OF THIS APPLICATION

PERSONAL LOAN   
  MORTGAGE   
  Individual Application   
  Joint Application   
 Date: \_\_\_\_\_

Purpose of Loan \_\_\_\_\_

Sale Price (if applicable): \$ \_\_\_\_\_ Amount Requested: \$ \_\_\_\_\_ Term Requested \_\_\_\_\_

### APPLICANT-PERSONAL INFORMATION

Please  if you are related to any Officer / Director of Butterfield    
  Mr.   
  Mrs.   
  Ms.   
  Miss

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name(s) \_\_\_\_\_

Home Address \_\_\_\_\_ Parish \_\_\_\_\_ Postal Code \_\_\_\_\_

Mailing Address (If different from above) \_\_\_\_\_ Time at present address (yrs) \_\_\_\_\_

Previous Address (If less than two years at present address) \_\_\_\_\_ Time at previous address (yrs) \_\_\_\_\_

Birth Date (Day / Month / Year) \_\_\_\_\_ Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Married   
  Unmarried   
  Separated/Divorced   
  Widowed   
 No. of Dependents \_\_\_\_\_ Ages \_\_\_\_\_ Social Insurance No. \_\_\_\_\_ Driver's Licence No. \_\_\_\_\_

Bermudian:  Yes     No   
 If no, date moved to Bermuda \_\_\_\_\_ Name of present employer \_\_\_\_\_

Occupation \_\_\_\_\_ Years of employment \_\_\_\_\_ Employer contact No. \_\_\_\_\_

Previous employer (If less than two years with present employer) \_\_\_\_\_ Years of employment \_\_\_\_\_

Name of nearest living relative not currently residing with you \_\_\_\_\_ Telephone No. \_\_\_\_\_

Residence:  Rent     Own     Own free & clear     Live with relatives

Associated with Butterfield since \_\_\_\_\_ Name and phone number of mortgage holder or landlord \_\_\_\_\_

Relation to Butterfield  Customer     Employee/Director

Do you have any outstanding debts with Bermuda Credit Association?  Yes     No    If yes, give details \_\_\_\_\_

Do you have any outstanding judgements or are you a defendant in any suits or legal actions?  Yes     No    If yes, give details \_\_\_\_\_

Do you have any obligations as an endorser, co-maker or guarantor?  Yes     No    If yes, give details \_\_\_\_\_

I am also interested in  Credit Cards     Savings Accounts     Chequing Accounts     Insurance     Other (please state) \_\_\_\_\_

FOR BANK USE ONLY  
CIF  
Customer No.

### JOINT APPLICANT-PERSONAL INFORMATION

Relationship to Main Applicant \_\_\_\_\_  Mr.     Mrs.     Ms.     Miss

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Home Address \_\_\_\_\_ Parish \_\_\_\_\_ Postal Code \_\_\_\_\_

Mailing Address (If different from above) \_\_\_\_\_ Time at present address (yrs) \_\_\_\_\_

Previous Address (If less than two years at present address) \_\_\_\_\_ Time at previous address (yrs) \_\_\_\_\_

Birth Date (Day / Month / Year) \_\_\_\_\_ Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Married   
  Unmarried   
  Separated/Divorced   
  Widowed   
 No. of Dependents \_\_\_\_\_ Ages \_\_\_\_\_ Social Insurance No. \_\_\_\_\_ Driver's Licence No. \_\_\_\_\_

Bermudian:  Yes     No   
 If no, date moved to Bermuda \_\_\_\_\_ Name of present employer \_\_\_\_\_

Occupation \_\_\_\_\_ Years of employment \_\_\_\_\_ Employer contact No. \_\_\_\_\_

Previous employer (If less than two years with present employer) \_\_\_\_\_ Years of employment \_\_\_\_\_

Name of nearest living relative not currently residing with you \_\_\_\_\_ Telephone No. \_\_\_\_\_

Residence:  Rent     Own     Own free & clear     Live with relatives

Name and telephone number of mortgage holder or landlord \_\_\_\_\_

Relation to Butterfield  Customer     Employee/Director

Do you have any outstanding debts with Bermuda Credit Association?  Yes     No    If yes, give details \_\_\_\_\_

Do you have any outstanding judgements or are you a defendant in any suits or legal actions?  Yes     No    If yes, give details \_\_\_\_\_

Do you have any obligation as an endorser, co-maker or guarantor?  Yes     No    If yes, give details \_\_\_\_\_

I am also interested in:  Credit Cards     Strata Savings     Insurance     Chequing Accounts     Other (please state) \_\_\_\_\_

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I/We hereby declare that the information in support of this application is true and complete in all material respects and that no information is omitted in relation to any of the items describing my/our liabilities. I/We authorise you to contact such persons as you think fit to verify the correctness and completeness of this information and such other persons as may be necessary to conduct a credit check and authorise any such persons to release it to you. I/We authorise you to provide references to other financial institutions concerning my/our loan or other accounts with you.

I/We authorise The Bank of N.T. Butterfield & Son Limited to debit the loan payment from my/our account number \_\_\_\_\_

in the name of \_\_\_\_\_ This authority is to remain in effect until cancelled by me/us. Preferred payment due date \_\_\_\_\_

Signature of Main Applicant \_\_\_\_\_ Date \_\_\_\_\_ Signature of Joint Applicant \_\_\_\_\_ Date \_\_\_\_\_

PERSONAL FINANCIAL STATEMENT

INCOME STATEMENT

MONTHLY INCOME (1)

Applicant's Salary (net)	\$	
Joint-Applicant's Salary (net)	\$	
Rental Income (halved)	\$	
Other Income (please specify)		
_____	\$	
Bonus	\$	
Pension	\$	
<b>TOTAL MONTHLY INCOME</b>	<b>\$</b>	

MONTHLY FIXED EXPENSES (2)

Mortgage	\$	
Rent	\$	
Insurance Premiums/Maintenance Fees	\$	
Instalment Payment/Loans		
Car	\$	
Furniture	\$	
Personal Loans	\$	
Credit Cards	\$	
Other	\$	
<b>TOTAL FIXED MONTHLY EXPENSES</b>	<b>\$</b>	

Notes: (1) Enter the income you receive on a regular basis (overtime, second job, alimony, investments, 50% of rental income, etc.)  
 (2) Include your total estimated monthly mortgage and/or personal loan payment(s). As a guide your total fixed monthly expenses should not exceed 50% of your total monthly income.

STATEMENT OF NET WORTH

CURRENT ASSETS (What I own)

Balance

Chequing and Savings Accounts	\$	
_____	\$	
_____	\$	
_____	\$	
Term Deposits	\$	
Investments	\$	
Stocks/Mutual Funds	\$	
What I'm Owed	\$	
Other (please specify)	\$	
_____	\$	
_____	\$	
<b>TOTAL CURRENT ASSETS</b>	<b>\$</b>	

LIABILITIES (What I owe)

Balance

Mortgage _____	\$	
Personal loans (please describe below)		
_____	\$	
_____	\$	
_____	\$	
Credit Card Limits		
Butterfield	\$	
Other (please specify)	\$	
_____	\$	
Other Debts (please specify)		
_____	\$	
<b>TOTAL LIABILITIES</b>	<b>\$</b>	

FIXED ASSETS

Value

Home	\$	
Real Estate	\$	
Automobile	\$	
Boat	\$	
Other	\$	
<b>TOTAL ASSETS</b>	<b>\$</b>	

NET WORTH

\$

(Total Assets minus Total Liabilities)

Insurance: I wish to obtain the following insurance:

- Home & Contents
- Motorcar & Motorcycle
- Yacht & Pleasure Craft
- Creditor Life & Disability

Signature of Main Applicant \_\_\_\_\_

Date \_\_\_\_\_

Signature of Joint Applicant \_\_\_\_\_

Date \_\_\_\_\_

I/We hereby declare that the information provided herein is true and complete in all material respects and that no information is omitted in relation to any of the items described in my/our Income Statement and Statement of Net Worth.

BANK USE ONLY

Additional Credit Approved

Amount \$ \_\_\_\_\_

Facility Type \_\_\_\_\_

Expiry Date \_\_\_\_\_