



**PERSONAL STATEMENT OF  
AFFAIRS**

**PERSONAL INFORMATION**

NAME (PLEASE PRINT)	DATE OF BIRTH (YYYY/MM/DD)	AGE	MARTIAL STATUS	NO. OF DEPENDENTS
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NATIONAL INSURANCE NO./NATIONAL I.D.:

DRIVER'S LICENSE NO.:	EXPIRY DATE (YYYY/MM/DD):	PASSPORT NO.:	EXPIRY DATE (YYYY/MM/DD):
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HOME ADDRESS – NUMBER, STREET, CITY	POSTAL BOX	SINCE (YEAR)	TELEPHONE NUMBERS Home:                      Cell: Work:	SPOUSE'S NAME	DATE OF BIRTH (YYYY/MM/DD)
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NAME, ADDRESS & CONTACT OF LANDLORD (IF RENTING)	PREVIOUS ADDRESS	YEARS THERE
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NEXT OF KIN	ADDRESS – STREET, CITY, P.O. BOX	TELEPHONE NUMBERS Home:                      Cell: Work:	RELATIONSHIP
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NEXT OF KIN	ADDRESS – STREET, CITY, P.O. BOX	TELEPHONE NUMBERS Home:                      Cell: Work:	RELATIONSHIP
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NAME OF BANK OR FINANCIAL INSTITUTION	HAVE YOU ANY JUDGEMENTS OR LEGAL PROCEEDINGS AGAINST YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>IF YES, SEE PAGE 2 ▶ FOR DETAILS ◀</b>	INDIRECT LIABILITIES (GUARANTEES OR ENDORSEMENTS FOR OTHERS) <input type="checkbox"/> YES <input type="checkbox"/> NO
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HAVE YOU EVER BORROWED BEFORE FROM ANY SOURCE? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHERE AND WHEN	AMOUNT	HAVE YOU HAD ANY PREVIOUS LOANS FROM THE BDB? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHERE AND WHEN	AMOUNT
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**EMPLOYMENT INFORMATION**

NAME & ADDRESS OF EMPLOYER	TELEPHONE	EMPLOYMENT DATE (YYYY/MM/DD)	PRESENT ANNUAL SALARY OR WAGES (\$)
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OCCUPATION	POSITION	RENTAL INCOME: <input type="checkbox"/> 50% <input type="checkbox"/> 75%
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PREVIOUS EMPLOYER	EMPLOYMENT DATE (YYYY/MM/DD)	OTHER INCOME (SOURCE)
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NAME & ADDRESS OF SPOUSE'S EMPLOYER	TELEPHONE	EMPLOYMENT DATE (YYYY/MM/DD)	SPOUSE'S ANNUAL SALARY OR WAGES (\$)
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OCCUPATION	POSITION	TOTAL ANNUAL INCOME
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PREVIOUS EMPLOYER	EMPLOYMENT DATE (YYYY/MM/DD)	TOTAL MONTHLY INCOME ▶
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**FINANCIAL INFORMATION**

ASSET	AMOUNT	LIABILITIES	AMOUNT	MONTHLY PMT
CASH		(LOANS, MORTGAGES, CREDIT CARDS. ALL OTHER DEBTS)		
CASH (OTHER)		MORTGAGE RENEWAL DATE (YYYY/MM/DD)		
LIQUID INVESTMENTS (STOCKS, BONDS, ETC.)		BANK LOANS – (BDB)		
		BANK LOANS – OTHER		
LIFE INSURANCE – FACE AMOUNT PAYABLE TO	CSV	LOANS – (CREDIT UNION, OTHER)		
		LOANS – INSURANCE CO.		
OTHER LIQUID ASSETS (SPECIFY)		CREDIT CARDS – VISA – LIMIT \$		
		CREDIT CARDS – OTHER – LIMIT \$		
REAL ESTATE		OTHER DEBTS (SPECIFY)		
AUTOMOBILE				
YEAR AND MAKE				
YEAR AND MAKE				
FURNITURE				
OTHER		MONTHLY RENT (IF APPLICABLE)		
OTHER				
OTHER				
<b>TOTAL ▶</b>			<b>TOTAL ▶</b>	

REAL ESTATE OWNED - LOCATION	REGISTERED - OWNER	YR PURCHASED	PURCHASE PRICE	VALUE	EQUITY	FIRE INS

I/We, the undersigned, do hereby affirm that the information contained in this application form (to the best of my/our knowledge) is true and correct. I/We also authorize the Bahamas Development Bank (including its officers, employees and agents) to carry out such investigation it deems necessary to verify information supplied herein. I/We also request and authorize all companies (including but not limited to all commercial banks and other financial institutions) contacted by the Bahamas Development Bank, its agents or representatives, to release all information requested that concerns me/us. I/We hereby acknowledge and agree that companies releasing information to the Bahamas Development Bank shall bear absolutely no responsibility or liability for any loss emerging from the disclosure and/or use of such information provided to the Bahamas Development Bank.

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APPLICANT'S SIGNATURE

\_\_\_\_\_  
CO-SIGNOR (SPOUSE ONLY)

\_\_\_\_\_  
WITNESS

DATE: \_\_\_\_\_