

**NATIONAL EXPORT IMPORT BANK OF JAMAICA  
CUSTOMER PERSONAL FINANCIAL STATEMENT OF AFFAIRS**

|  |                       |  |                                 |
|--|-----------------------|--|---------------------------------|
| <b>Applicant's Full Name</b>   |                       | <b>Spouse's Full Name</b>  |                                 |
| <b>Date of Birth</b>   | <b>Marital Status</b> | <b>No. of Dependents</b>   | <b>Address &amp; Phone</b>      |
| <b>Previous Address (If At Above For Less Than 2 Years)</b>  |                       | <b>At Present Address how long</b><br><input checked="" type="checkbox"/> Own <input type="checkbox"/> Rent \$ _____ Per Month |                                 |
|  |                       | <b>Employer Name, Address &amp; Number #</b>   |                                 |
| <b>TRN#</b>  | <b>Position</b>       | <b>Length of Service</b>   | <b>Gross Annual Salary</b>      |
| <b>Previous Employer (If above is less than 2 years)</b>   |                       |  |                                 |
| <b>Spouse's Employer (Name &amp; Address)</b>  |                       | <b>Position</b>  | <b>Gross Annual Salary</b>      |
|  |                       | <b>Length of Service</b>   |                                 |
| <b>Bank Accounts</b>   |                       | <b>Other Income - Sources and Amounts</b>  |                                 |
|  |                       |  |                                 |
| <b>DETAILS OF ASSETS &amp; LIABILITIES</b><br>(If item marked* is more than one, list overleaf with description) |                       |  |                                 |
| <b>DESCRIPTION</b>   | <b>ASSETS</b>         | <b>DESCRIPTION</b>   | <b>LIABILITIES</b>              |
| Real Estate  |                       | Loans on Real Estate   |                                 |
| Motor Vehicles   |                       | Loans on Motor Vehicle   |                                 |
| Furniture and Equipment  |                       | Loans on Furniture and Equipment   |                                 |
| Life Insurance Cash Surrender Value (Not Life Cover)   |                       | Current Account Overdraft  |                                 |
|  |                       | Credit Cards   |                                 |
| Other Non-Cash Assets* (Describe Overleaf)   |                       | Other Loans Payable to You* (Describe Overleaf)  |                                 |
| Amounts owed to you (Describe here)  |                       | Other Liabilities not described here (Describe here)   |                                 |
| Savings/Deposit Accounts   |                       | <b>SUB-TOTAL (2)</b>   |                                 |
| Other Investments (Describe Overleaf)  |                       | <b>NET WORTH (1) minus (2)</b>   |                                 |
| <b>TOTAL (1)</b>   |                       | <b>TOTAL</b>   |                                 |
| <b>DETAILS OF LIFE INSURANCE POLICIES HELD</b>   |                       |  |                                 |
|  |                       |  |                                 |
| <b>INSURANCE COMPANY</b>   | <b>SUM INSURED</b>    | <b>ANNUAL PREMIUM</b>  | <b>REMARKS (ASSIGNED, ETC.)</b> |
|  |                       |  |                                 |
|  |                       |  |                                 |
|  |                       |  |                                 |
|  |                       |  |                                 |

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| <b>PROJECTED MONTHLY CASH FLOW</b>   |  |  |  |
|--|--|--|--|
| <b>NOTE: FOR ACCURACY, COMPUTE ANNUAL AND DIVIDE BY 12</b>   |  |  |  |
| <b>OUTFLOWS</b>  |  | <b>INFLOWS</b>   |  |
| Shelter<br>(Rent/Mortgage, Property Taxes, Property Insurance, Maintenance, etc.)                      |  | Gross Monthly Salary and Benefits (Based on official Income verification from employer)                    |  |
| Other Installment Payments<br>(Loan, Life Insurance, Credit Card Payments, Savings, etc.)              |  | Self-Employed Income (net)<br>(Audited accounts or statement from Chartered Accountant attached)           |  |
| Utilities  |  |  |  |
| Transportation<br>(Gas, Car Insurance, Licence, Maintenance, etc.<br>of Cost of Public Transportation) |  | Other Income:<br>[Give detail(s) include estimated rent (if any) from real estate owned or being acquired] |  |
| Other Living Expenses<br>(Food, Clothing, Medical, School, Entertainment, etc.)                        |  | Less Statutory Deductions at Source<br>(Income Tax, NHT, etc.)   |  |
| <b>TOTAL OUTFLOWS</b>  |  | <b>TOTAL INFLOWS</b>   |  |
|  |  | <b>SUBTRACT TOTAL OUTFLOWS</b>   |  |
|  |  | <b>RESIDUAL INCOME AFTER</b>   |  |

**PARTICULARS OF REAL ESTATE HOLDINGS**

|   | ADDRESSES | VOLUME & FOLIO # | OWNERSHIP | VALUATION | EXISTING LOAN BALANCE | MONTHLY PAYMENT | LENDER |
|---|-----------|------------------|-----------|-----------|-----------------------|-----------------|--------|
| 1 |           |                  |           |           |                       |                 |        |
| 2 |           |                  |           |           |                       |                 |        |
| 3 |           |                  |           |           |                       |                 |        |
| 4 |           |                  |           |           |                       |                 |        |
| 5 |           |                  |           |           |                       |                 |        |
|   |           |                  |           |           |                       |                 |        |

| DESCRIPTION |
|-------------|
|             |
|             |
|             |
|             |
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|             |
|             |
|             |
|             |

**PARTICULARS OF MOTOR VEHICLE**

|   | TYPE | YEAR & MODEL | VALUE | LOAN BALANCE | MONTHLY PAYMENT |
|---|------|--------------|-------|--------------|-----------------|
| 1 |      |              |       |              |                 |
| 2 |      |              |       |              |                 |
| 3 |      |              |       |              |                 |
|   |      | <b>TOTAL</b> |       |              |                 |

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|  |  |  |  |
|--|--|--|--|
| PARTICULARS OF OTHER NON-CASH ASSETS, INVESTMENTS ETC. |  |  |  |
|--|--|--|--|

|   | ACCOUNT NO. | TYPE OF INVESTMENT | OWNERSHIP    | VALUE |
|---|-------------|--------------------|--------------|-------|
| 1 |             |                    |              |       |
| 2 |             |                    |              |       |
| 3 |             |                    |              |       |
| 4 |             |                    |              |       |
|   |             |                    | <b>TOTAL</b> |       |

|   |  |  |  |
|---|--|--|--|
| PARTICULARS OF OTHER LIABILITIES (PAYABLE OR GUARANTEED BY YOU) |  |  |  |
|---|--|--|--|

|   | CREDITOR | TYPE         | BALANCE | MONTHLY PAYMENT |
|---|----------|--------------|---------|-----------------|
| 1 |          |              |         |                 |
| 2 |          |              |         |                 |
| 3 |          |              |         |                 |
| 4 |          |              |         |                 |
| 5 |          |              |         |                 |
|   |          | <b>TOTAL</b> |         |                 |

I CERTIFY THAT THE INFORMATION GIVEN ABOVE AND OVERLEAF IS TRUE AND ACCURATE AND UNDERSTAND THAT THE SAID INFORMATION FORMS PART OF MY CURRENT LOAN APPLICATION  
I ALSO AUTHORIZE YOU TO VERIFY THE INFORMATION PROVIDED

NAME \_\_\_\_\_

NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

WITNESS \_\_\_\_\_

WITNESS \_\_\_\_\_

DATE \_\_\_\_\_ 20\_\_\_\_