



LEECH LAKE FINANCIAL SERVICES, INC
CBLP – LOAN APPLICATION

CONTACT INFORMATION

Applicant Name: _____ DOB _____
(FIRST, FULL MIDDLE, LAST, SUFFIX)

Street Address: _____ Mailing Address: _____

City: _____ Zip Code: _____ Business Phone: _____
(456-7890)

Cell Phone: _____ E-Mail: _____ County: _____
(123-456-7890)

Employer: LLBO LLTC LLH LLG Other: _____

Division: _____ Title: _____

SS #: _____ Payroll ID # _____ Loan Request Amt: \$ _____
(123456789)

- ✓ ***A Release of Information must be signed and attached to the application.***
- ✓ ***A Payroll Deduction form must be signed and dated at loan closing***
- ✓ ***A \$25.00 application fee will be applied to each loan.***
- ✓ ***Qualified employee loan amounts will depend on the total amount of Accumulated Leave Hours that the employee shall use as collateral.***
- ✓ ***The loan must be paid back in full according the loan terms agreed upon***

CIVIL RIGHTS INFORMATION

Race:

- American Indian
- Leech Lake Band Member
 - MCT Enrolled
 - Red Lake Nation
 - Other _____

- Alaskan Native
- Asian
- African American
- Hawaiian / Pacific Islander
- Hispanic/Latino
- White

Loan Terms

- 6 months
- 12 months

Vital Statistics:

Married Single Yrs. of Education _____

Male Veteran City Limits

Female Disabled Veteran Rural

Household size: _____ + _____
(Adults) (Children)

Received In Office:



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SIGNATURE

By my signature I attest I understand the eligibility requirements for the Credit Building Loan Program and will assume responsibility for Payment in Full of Loan proceeds, plus all Fees and Interest accrued.

THESE FUNDS WILL NOT BE USED FOR ILLEGAL OR UNLAWFUL ACTIVITIES

 Print Full Legal Name:

 Last 4 of SS #

 Payroll ID

X _____
 Employee Signature:

 Date:

<i>Office Use Only</i>	
Interest Accrual Rate:	8%
Employee Loan Amount:	\$
Interest Amount:	\$
Total Principal & Interest:	\$
Non-Refundable Application Fee:	\$ 25.00
Total Loan Amount (Prin/Int/Fee):	\$
Total Withheld / pay period:	\$
Total No. of Leave Hours to Freeze:	

<i>Eligibility Verification</i>		
A/R:		Date: _____
Outstanding Obligations:	CBLP	\$
	RTC	\$
	TR	\$
	OTHER	\$
Payroll:		Date: _____
Hire Date: _____	<i>Rate of Pay</i>	
Available Leave: _____	\$	

Payments are to be sent to:

Leech Lake Financial Services Inc. Loan Start: _____ Loan End: _____ Loan Term: _____ months
PO Box 848 (6 – 12 mo.)
Cass Lake, MN 56633

Date Denied: _____

Date Approved: _____

Reason:

_____ **Payment History w/LLFS** _____ **Excessive DTI** _____ **Insufficient PTO** **Other:** _____

 LLFS Officer / Loan Officer

 Date