



<b>REQUIRED OVERDRAFT LIMIT</b>		_____ EUR					
INFORMATION OF THE APPLICANT							
Name, surname		Personal code or year of birth	Phone	Mobile phone	Number of dependants		
Home address (district, city/province, village/hamlet, street/farm, house, appart-s)		Postal address (district, city/province, village/hamlet, street/farm, house,ap)		E-mail			
Education (mark with "x") higher ___ College ___ Secondary ___ Primary ___ Other ___		Marital status (mark with "x") married ___ civil marriage ___ single ___ divorced ___ widow/er ___					
APPLICANT'S OCCUPATION AND EMPLOYER							
Employer/Company name		Phone	Position held	Time employed	Monthly salary (net) €		
Previous employers							
Employer		Position held		Time employed			
Other monthly income of the applicant				Sum (net)			
PROPERTY OWNED BY THE APPLICANT							
Type		Details		Market Value			
EXISTING FINANCIAL OBLIGATIONS							
Type of obligation	Creditor	Amount	Outstanding	Final Maturity	%	Monthly repayment	Collateral
APPLICANT'S INCOME AND EXPENSES							
Applicant's monthly net income (a)							€
Applicant's monthly expenses (b)							
Housing costs		Loan repayments + insurance costs (in a month)		Car	Total expenses (c)		
€		€		€	€		
Meals		Expenses for dependents		Other	Income (a) - Expenses (b) =		
€		€		€			
Phone		Clothing		Expenses for entertainment	€		
€		€		€	€		
I confirm that I have read the Bank's General Terms and Conditions and the Procedure for the processing of client data available on the Bank's website www.tbb.ee. I am aware of my rights in connection with data processing and transferring.							
I give my consent to the Bank and other persons belonging to the same group to send me financial propositions, newsletters and other advertising materials about their banking products.							
By signing this application I certify that all the information given above is correct and has a documentary evidence at Bank's request.							
Date "___" "___" y.		Signature _____					
When providing a false data, the Bank has the right to reject the loan application or terminate the existing agreement due to its breach.							
Filled by the Bank							
Application was accepted:							
Date "___" "___" y.		Bank representative's name _____		Bank representative's signature _____			
Bank's offices							
Vana-Viru office	Vana-Viru 7	15097	Tallinn	tel. (372) 6688 000	tel. (372) 6688 001		
Estonia blvd. Main office	Estonia blvd. 3/5	10043	Tallinn	tel. (372) 6688 060	tel. (372) 6688 065		
Narva office	Keresse 4	20304	Narva	tel. (372) 3324 146	tel. (372) 6688 056		