

CAPITAL ASSIST APPLICATION FORM**CONTACT INFORMATION****Name****Email****Telephone****Address****FUNDING DETAILS****Purpose of loan****Details of properties offered as security and the value of each. (Use additional sheets if required)****Total amount of loan requested:****Lenth of Term for which it will be required.**

Source of repayment:

BORROWER DETAILS

Borrower name

Borrower type

☐ Sole Trader

☐ Partnership

☐ Limited liability company

☐ Limited liability partnership

Date business started

Dated.....

Signed.....

Signed.....

Please sign and post this form to:

CAPITAL ASSIST, 3 Canal Street, Monaghan, Co. Monaghan. H18 H732
