



WESTERN UNITED CREDIT UNION

Co-operative Society Limited

#40 Fitt Street, Woodbrook 170209, Port of Spain, Trinidad W. I.

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WESCU CONSENT CLAUSE

I/We warrant and confirm the information given herein is true and correct and I/We understand it is being used to determine My/Our credit responsibility. I/We further confirm that no information, which might affect the Western United Credit Union Co-operative Society Limited in making a well-informed decision in the overall loan process, has been withheld.

I/We hereby authorize and give consent to the Western United Credit Union Co-operative Society Limited, in receiving and exchanging any financial and other information which it may have in its possession about Me/Us with any of its subsidiaries, agents, third party assignees, other financial institutions, Credit Bureaus or other person of Corporation or with whom I/We may have or propose to have financial dealings from time to time.

In addition, I/We also give Western United Credit Union Co-operative Society Limited, permission to obtain any credit report on my/our financial position from time to time throughout the duration of any loans being held with the organization. I/We indemnify the Western United Credit Union Co-operative Society Limited against any loss, claims, damages, liabilities, actions and proceedings, legal and or other expense which may be directly and reasonably incurred as a consequence of the disclosure of the financial information.

My/Our deposit account may be charged with the monthly payments as they mature and I/We agree to pay your customary assessment for any notices of overdue installments.

Member's Name (IN BLOCK LETTERS):

Co-maker's Name:

Member's Account #:

Loans Officer Name:

Member's Signature:

Co-maker's Signature:

Member's ID#:

Loans Officer Signature:

Transaction Consent Date:
