# HR Department Application Form

## Car Scheme Application Form

# Cumbria Fire & Rescue Service

**Car Loan Scheme – Application Form**

I wish to apply for assistance to enable me to purchase a motor car for use in my official duties and submit the following particulars. In the event of financial assistance being granted to me, I am prepared to enter into agreement and pay the engineer’s inspection fee for a second hand car if required. See Car Loan Scheme Guidance for further information.

|  |  |  |  |
| --- | --- | --- | --- |
| Surname (Block Letters) |  | | Mr/Mrs/Miss/Ms (Delete as appropriate) |
| Forename(s) |  | CFRS Dept. |  |
| Home Address |  | | |
| Postcode |  | Employee No. |  |
| Position Held |  | Work Tel. No |  |
| Mobile Tel. No |  |  | |
| Travelling Allowance for which recognised i.e. Essential or Local Car User | | |  |

# Particulars of the car to be purchased

|  |  |  |  |
| --- | --- | --- | --- |
| Make |  | Mileage if second hand car |  |
| Model |  | | |
| Cubic Capacity |  | Registration No. |  |
| New or Second Hand |  | Date when first registered |  |
| Full Purchase Price  (price on the road, excluding insurance) | £ | Date to be delivered |  |
| From whom to be purchased |  | | |
| Address |  | | |

# Particulars of existing car:

|  |  |  |  |
| --- | --- | --- | --- |
| Do you have a car or have had a car until recently? | |  | |
| Make and C.C |  | Year of Make |  |
| Registration Number |  | Sale Price |  |
| Mileage |  | Date of Sale |  |
| To whom sold (or to be sold) | |  | |
| Address | |  | |

|  |  |
| --- | --- |
| Have you ever been granted a loan by CFRS previously? |  |
| Do you have a current Cumbria Fire & Rescue Service car loan? |  |
| How many miles have been run since the existing vehicle was purchased by you? |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Please state:** | |  | | |
| Amount of loan required | £ | Repayable over |  | Years |

**Signature of Applicant: \_ Authorised by: \_\_\_\_\_\_**

(Line Manager/Budget Holder)

**Print Name: \_ Print Name:**

**Date: Date:**

# FOR OFFICE USE

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Amount of Loan | Total Repayable | No. of Instalments | Monthly Amount | Payroll Notified By |
|  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Employee Number | | | | | | Loan No. | | | | Amount of Loan | | | | | | | Monthly | | | | | | | | | Interest Rt | | | No. | | 1st Deduction | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Principal | | | | | Interest | | | |  |  |  | Inst | | Month | | Year | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| FOR OFFICE USE ONLY | |
|  | |
| **CHECK LIST** | |
|  | REMARKS |
| ESSENTIAL USER |  |
| LOCAL CAR USER |  |
| ENGINEER’S REPORT –  IF REQUIRED |  |
| OUTSTANDING CCC CAR LOAN –  AMOUNT = £  LOAN NO = |  |
| VEHICLE AGE –  LOAN MUST BE REPAID WITHIN 8 YEARS OF  INITIAL REGISTRATION DATE |  |
| NOTES:- |  |