



Budget Account Application Form

SECTION A - PERSONAL DETAILS

First Applicant: _____	Second Applicant: <i>(if a joint account)</i> _____
Name: _____	Name: _____
Membership No: _____	Membership No: _____
Contact No: _____	Contact No: _____
Email: _____	Email: _____
PPS Number: _____	PPS Number: _____

SECTION B – BILL PAYMENT DETAILS

BILL TYPE	PAYEE e.g. AIB, ESB, SKY	PAYMENT METHOD e.g. DD	PAYMENT FREQUENCY e.g. Weekly, Monthly	ANNUAL COST €
Mortgage				
Rent				
Electricity				
Gas				
Fuel				
Broadband				
Telephone/Mobile Phone				
Landline				
TV <i>(Sky, Virgin etc.)</i>				
TV Licence				
Bin Charges				
Medical Insurance				
Car Insurance				
House Insurance				
Life Insurance				

<u>BILL TYPE</u>	<u>PAYEE</u> e.g. AIB, ESB, SKY	<u>PAYMENT METHOD</u> e.g. DD	<u>PAYMENT FREQUENCY</u> e.g. Weekly, Monthly	<u>ANNUAL COST €</u>
Property Tax				
Car Tax				
Education Fees				
Club Fees				
Other – Please Specify				
Total Cost:				€

SECTION C

Annual Subtotal:	€
Plus 5% Contingency:	€
Administration Fee:	€ 30.00
Annual Total:	€

Total to repay: € Weekly ☐ Fortnightly ☐ Monthly ☐

Method of payment: Payroll ☐ Direct Debit ☐

SECTION D DATA PROTECTION & DATA PRIVACY STATEMENT

The details provided in this application form together with any other information that is furnished to us in connection with this application will be retained and processed by First Tech Credit Union Ltd. in accordance with our Data Privacy Statement. Please take time to read this document which is available to you at www.firsttech.ie or in our branch.

I/we have read and agree to be bound by the terms & conditions for the operation of the Budget Account Facility.

Signature: _____ Date: _____

Signature: _____ Date: _____