

# EBS CERTIFICATE OF INCOME

# EBS

Private and Confidential

The information received will be treated as confidential and only for use by EBS d.a.c. and its subsidiaries. Please complete in Block capitals and use black pen to complete. On completion, please give this Certificate to your employee who should then include it with their Loan application.

Name of Employee	<input type="text"/>			
PPS:	<input type="text"/>			
Job Description	<input type="text"/>			
Name of Company/Organisation	<input type="text"/>			
Business Registered Address	<input type="text"/>			
	<input type="text"/>			
Location/Address of Employment	<input type="text"/>			
Does the employee's current role allow for remote working	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Date Employment Commenced	<input type="text"/>			
Is Employment	Permanent <input type="checkbox"/>	Contract <input type="checkbox"/>		
If Contract, term of contract	<input type="text"/>	Expiry Date	<input type="text"/>	
Is Employment full time/part time	<input type="text"/>			
Currently on Probation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Date Probation Ends <input type="text"/>	
Currency of Salary	EUR <input type="checkbox"/>	GBP <input type="checkbox"/>	USD <input type="checkbox"/>	Other (please specify) <input type="text"/>

	Current	Guaranteed
Annual Basic	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Car Allowance	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Shift Allowance	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Overtime Actual/Estimated	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Bonus	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Commission	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other (please specify)	<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Where non guaranteed income is part of remuneration structure please complete the below table.

	Last Year	2 Years Ago	3 Years Ago
Annual Total Guaranteed Income	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>
Annual Total non-Guaranteed Income	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>

\*If the income is performance related, made up of any non-basic (e.g. shift /overtime etc.) or contract income, we require 3 years most recent statement of earnings from the employee e.g. Employment Detail Summary (formerly P60).

Payment Frequency	<input type="text"/>		
Is Employee Subject to Salary Scale	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If YES Please State Maximum € <input type="text"/>
Is Employment Pensionable?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Monthly Pension/Levy Deduction € <input type="text"/>

Company Stamp

If company stamp is not available please provide a short letter on official company headed paper confirming no company stamp available and salary cert details are correct. Both letter and salary cert should be signed by the same individual.

Signature

I certify that the above information is correct.

BLOCK CAPITALS

Phone Number

Extension

Position Held

Date Signed