

Individual Application for Finance

Applicant Type:Individual Applicant ☐ Sole Proprietor ☐ Surety/Co-Debtor ☐

ID/Passport No. _____

Citizenship SA ☐ Other ☐ (If not SA resident, state country of Residence)

Country of Residence _____ Permit Type _____

Permit No. _____ PermitExpDate ____/____/____ DD/MM/YY

Country Issued _____

Issue Date ____/____/____ DD/MM/YY Expiry Date ____/____/____ DD/MM/YY

Surety ID No. (If appli) _____

Transaction Type: Instalment Sale ☐ Lease ☐ Rental ☐**LangPref:** E ☐ A ☐ Other ☐ **EthnicGroup:** A ☐ B ☐ C ☐ W ☐**Applicant's Details:**

Title _____ Initials _____

Surname _____

First Name _____ Middle Name _____

Gender M ☐ F ☐ Graduate? Y ☐ N ☐

Trading as/ Name _____

Tax No. _____ VAT No. _____

HomeTelNo. (_____) _____ Cell No. _____

E-mail Address _____

Home Address: (Yrs____Mnths____) _____

Suburb _____ Postal Code _____

Postal Address:(If Different from Residential) _____

Suburb _____ Postal Code _____

Previous Home Address:(Yrs____Mnths____) _____

Suburb _____ Postal Code _____

Employment Details: (Yrs____Mnths____)

Name _____

Address _____

Suburb _____ Postal Code _____

BusTelNo.(_____) _____ Fax No.(_____) _____

Type of Industry _____ Employee No. _____

EmpCont No.(_____) _____ Occupation _____

Previous Employment Details:(Yrs____Mnths____)

Name _____

Address _____

Suburb _____ Postal Code _____

EmpCont No. (_____) _____ Occupation _____

Home Ownership:Do you own your Property? Y ☐ N ☐(If Yes) In your name? ☐ In your Spouse's? ☐ Both? ☐Property Type: House ☐ Townhouse ☐ Flat ☐

Erf Number _____ Suburb _____

Bond/Rental Payment per month: R _____

Bond Amount Outstanding: R _____

Purchase Price R _____

Current Value R _____

If a flexi/access bond, total facility granted? R _____

Bondholder Name _____

Know Your Client (KYC):Face to Face On-Site ☐Face to Face Off-Site ☐Remote-Other ☐**Dealer Code** _____

Originating Branch _____ Input Branch _____

Credit Provider Introducing Branch _____

Marketer's Code _____

Marketers Name _____

Marketer's ID No. _____ Fax No.(_____) _____

Lead Provider _____

Lead Provider ID No. _____

Marital Details: S ☐ M ☐ D ☐ W ☐ No. of Dependants _____Date Married ____/____/____ (DD/MM/YY) ANC ☐ COP ☐ OTHER ☐**Spouse's Details:** First Name _____

Surname _____ Income R _____

Spouses ID No./ DOB _____

Spouse Employer Name: _____**Spouse Employers Address:** _____

Suburb _____ Postal Code _____

Relative's Details: (Nearest Relative in SA not living with you)

Relationship _____ Relative's Tel No.(_____) _____

Surname _____

First Name _____

Relative's Address: _____

Suburb _____ Postal Code _____

Landlord's Details: (Name & Address of Landlord where goods will be kept)**Landlord's Name:** _____**Landlord Address:** _____

Suburb _____ Postal Code _____

Banking Details:**Account Type:** Cheque ☐ Savings ☐ Transmission ☐

Bank Name _____ Branch Code _____

Account No. _____

Account Holder Name _____

(If appl) Overdraft Bal: R _____ Limit: R _____

Credit Card Company _____

Credit Card Number _____

Cr.Facility Bal: Straight R _____ Budget R _____

Cr.Facility Limit: Straight R _____ Budget R _____

Existing &/or a previous Account with this Credit Provider:

Branch No. _____

Account No. _____

Account Name _____

Instalment Amount per month R _____

Number of Instalments _____

Current? ☐ Paid up? ☐ To be settled? ☐**Existing accounts with other Credit Provider?**

Name of Company _____

Account No _____

Instalment Amount per month - R _____

Current? ☐ Paid up? ☐ To be settled? ☐

Name of Company _____

Account No _____

Instalment Amount per month - R _____

Current? ☐ Paid up? ☐ To be settled? ☐

Individual Applicant ☐ Sole Proprietor ☐ Surety/Co-Debtor ☐		ID/Passport No. _____	
Transaction Details: Goods Description _____		Applicant's Income Details:	
Year Model _____ Salesman _____		Gross Remuneration R _____	
Dealer Name _____ Dealer Tel No. (_____) _____		Monthly Commission R _____	
Scheme Code _____ Buyline Code _____		Car Allowance included in Gross R _____	
M&M Code _____ Period of Contract (Mnths) _____		Net Take-home Pay R _____	
Special Requirements _____		Income other than Salary/Wages R _____	
Balloon Payment _____ % R _____		Source of Income _____	
Residual Value _____ % R _____		Total Monthly Income R _____	
Purpose of Goods: Business ☐ Private ☐ Taxi ☐ Commerce ☐		Applicant's Expenses per month:	
Payment Frequency: Month ☐ Bi-Ann ☐ Quart ☐ Annual ☐		Bond Payment / Rent R _____	
Payment Mode: Advance ☐ Arrears ☐ Cash ☐ DebitOrder ☐		Rates, Water and Electricity R _____	
		Vehicle Instalments (excluding those to be settled) R _____	
		Personal Loan Repayments R _____	
		Credit Card Repayments R _____	
		Furniture Accounts R _____	
		Clothing Accounts R _____	
		Overdraft Repayments R _____	
		Policy/ Insurance Repayments R _____	
		Telephone Payment R _____	
		Transport Costs R _____	
		Food and Entertainment R _____	
		Education Costs R _____	
		Maintenance R _____	
		Household Expenses R _____	
		Other R _____	
		Total Monthly Expenses R _____	
Applicant's Financial Details:		Applicant's Disposable Income R _____	
Proposed Rate _____ % Fixed ☐ Linked ☐		Date Remuneration Received: ____/____/____ DD/MM/YY	
Selling Price (VAT inclusive) R _____		Are you currently liable as: Surety ☐ Guarantor ☐ Co-debtor ☐	
Extras Description _____ R _____		Specify Details: _____	
_____ R _____		_____	
_____ R _____		_____	
Total of Extras R _____		_____	
Dealer VAPS Description _____ R _____		_____	
_____ R _____		_____	
Delivery Fee R _____		_____	
Initial Fuelling Charges R _____		_____	
License and Registration Costs R _____		_____	
Initiation Fees to be financed? Y ☐ N ☐		_____	
Less Deposit /Initial Rental R _____		_____	
Source of Deposit _____		_____	
Total R _____		_____	
Insurance-Bank VAPS			
InSale /Lease - Inside Act		Rental - Outside Act	
Credit Life Monthly ☐	Credit Life Monthly ☐ Term ☐	Service & Maintenance Term ☐	
Cover Plus Monthly ☐	Cover Plus Monthly ☐ Annual ☐ Term ☐	Extended Warranty Term ☐	
Extended Warranty Term ☐	Motor Comprehensive Monthly ☐ Annual ☐	Other _____ ☐	
Other _____ ☐	Courtesy Car Monthly ☐ Annual ☐		
Comprehensive Vehicle Insurance? Y ☐ N ☐ Policy No. _____ Monthly ☐ Annual ☐			
Existing Ins. Co Name _____ Tel No. (_____) _____ Broker Name _____ Tel No. (_____) _____			
I confirm that: -			
A. I am not a minor.			
B. I have never been declared mentally unfit by a court.			
C. I am not subject to an Administration Order.			
D. I do not have any current application pending for debt restructuring or alleviation.			
E. I do not have any current debt re-arrangement in existence.			
F. I have not previously applied for a debt re-arrangement.			
G. I am not under sequestration.			
H. I do not have applications pending for credit, nor open quotations as envisaged in section 92 of the National Credit Act.			
If any of the above is incorrect, state which and give details: _____			
I. I would like to be included in any Telemarketing Campaign.		Y ☐	N ☐
J. I would like to be included in any Marketing List that you may sell or distribute		Y ☐	N ☐
K. I would like to be included in any mass distribution of emails or SMS messages.		Y ☐	N ☐
I understand that I will be liable for a monthly service fee.			
I hereby consent to this Credit Provider making enquiries regarding my credit history with any credit bureau.			
I consent to this Credit Provider reporting the conclusion of any credit agreement with me to the National Loans Register in compliance with this Credit Provider's obligation under the National Credit Act.			
I hereby declare that the information provided by me is true and correct.			
Signature of Applicant _____		Date _____	