



APPLICATION FOR INSTALMENT FINANCE - PG1

DEPOSIT / TRADE IN:

PERSONAL DETAILS:		TITLE:	SURNAME:	ID:
FULL NAMES:		INITIALS:		DEPENDENTS:
MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	MARRIED <input type="checkbox"/>	ANC <input type="checkbox"/>	COP <input type="checkbox"/>
			SINGLE <input type="checkbox"/>	WIDOWED <input type="checkbox"/>
HOME ADDRESS:				PERIOD:
TEL (H):				TEL(W):
FAX:		E-MAIL:		CELL:
POSTAL ADDRESS:				CODE:
				PERIOD:
NEXT OF KIN – STAYING WITH YOU:				RELATIONSHIP:
ADDRESS:				TEL:

BOND DETAILS	BOND HOLDER <input type="checkbox"/> YES <input type="checkbox"/> NO	AMOUNT OUTSTANDING:
PROPERTY VALUE R	INSTALMENT R /M	PURCHASE PRICE:
DATE PURCHASED:	REGISTERED <input type="checkbox"/> OWN NAME <input type="checkbox"/> SPOUSE <input type="checkbox"/>	RENTING R

EMPLOYER DETAILS:	EMPLOYER:	OCCUPATION:
EMPLOYER ADDRESS:	TEL:	NO. OF YEARS:
SALARY DATE:		

BANK DETAILS	BANK NAME:	BRANCH NAME:	BRANCH CODE:
NAME OF ACCOUNT HOLDER:		ACCOUNT NUMBER:	
<input type="checkbox"/> SAVINGS <input type="checkbox"/> CREDIT CARD			

ETHNIC GROUP:	<input type="checkbox"/> AFRICAN <input type="checkbox"/> COLOURED <input type="checkbox"/> INDIAN <input type="checkbox"/> WHITE
LANGUAGE REFERENCE:	<input type="checkbox"/> ENGLISH (PRIMARY) <input type="checkbox"/> AFRIKAANS (FOR EXPLANATORY VERSION)

PERSONAL APPLICATION FORM	
SALARY DETAILS	OWN
BASIC MONTHLY (EXL CAR ALLOWANCE)	R
MONTHLY COMMISSION	R
NET TAKE HOME PAY	R
INCOME OTHER THAN SALARY / WAGES**	R
SOURCE OF OTHER INCOME	R
TOTAL MONTHLY HOUSEHOLD INCOME (NET SALARY & OTHER)	R

SIGNATURE: _____ DATE: _____



APPLICATION FOR INSTALMENT FINANCE – PG2

HOUSEHOLD EXPENSE PER MONTH

	R	RATES, WATER AND ELECTRICITY	R
BOND PAYMENT / RENT	R	PERSONAL LOAN PAYMENTS	R
VEHICLE INSTALMENTS (EXCLUDING THOSE TO BE SETTLED)	R	FURNITURE ACCOUNTS	R
CREDIT CARD PAYMENTS	R	OVERDRAFT PAYMENTS	R
CLOTHING ACCOUNTS	R	TELEPHONE PAYMENTS	R
POLICY / INSURANCE REPAYMENTS	R	FOOD AND ENTERTAINMENT	R
TRANSPORT COSTS	R	MAINTENANCE	R
EDUCATION COSTS	R	OTHER	R
TOTAL MONTHLY HOUSEHOLD EXPENSES	R		
HOUSEHOLD SURPLUS / DISPOSABLE INCOME	R		

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 hereby grant the Credit Provider the right to communicate with me through electronic/written media or verbally in order to make available to me, their product offering

Y N

I hereby give consent to the Credit Provider to make enquiries about my credit record with any credit agency and to obtain whatever information on me they might require to process application. I also give consent to the Credit Provider to share my payment behaviour with any credit agency. I hereby give consent to the Credit Provider to make enquiries about my credit record with any credit agency and to obtain whatever information on me they might require to process the credit application and / or application for insurance. I hereby declare that all the above information is true and correct.

Signature: _____ Date: _____