

## APPLICATION FOR INSTALMENT FINANCE-PG1

GOODS DESCRIPTION	NEW USED	MODEL	MAKE	M&M CODE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
DEALER/SUPPLIER	<b>Auto Unique</b>						TEL NO.	<b>012 – 348 2016 / 7</b>				
F&I CONTACT PERSON					SALES PERSON			FAX NO.	<b>012 – 348 9945</b>			
CASH PRICE VAT INCL.					VARIABLE EXTRAS VAT INCL.	<input type="checkbox"/> INSTALMENT	<input type="checkbox"/> LEASE	<input type="checkbox"/> RENTAL	<input type="checkbox"/> OTHER			
ADD COVER					RADIO/TAPE			TERM				
LICENCE/REG					NUMBER PLATES			RATE				
CREDIT LIFE					WARRANTY	<input type="checkbox"/> ADVANCE	<input type="checkbox"/> ARREARS					
DEPOSIT/TRADE IN					OTHER			RESIDUAL				
FINANCABLE AMOUNT	R				OTHER			INSTALMENT	R			
<b>PERSONAL DETAILS</b>	TITLE	SURNAME				ID NO.						
FULL NAMES						INITIALS		DEPENDANTS				
<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE	MARRIED	<input type="checkbox"/> ANC	<input type="checkbox"/> COP	<input type="checkbox"/> SINGLE	<input type="checkbox"/> WIDOWED		DATE MARRIED				
HOME ADDRESS								PERIOD				
TEL(H)	TEL(W)		CELL		FAX		E-MAIL					
POSTAL ADDRESS									CODE			
PREVIOUS ADDRESS									PERIOD			
SPOUSE NAMES						SPOUSE ID						
NEXT OF KIN								RELATIONSHIP				
ADDRESS								TEL				
<b>BOND DETAILS</b>	BOND HOLDER						AMOUNT OUTSTANDING					
PROPERTY VALUE	R		INSTALMENT	R		/M		PURCHASE PRICE				
DATE PURCHASED			REGISTERED	<input type="checkbox"/> OWN NAME	<input type="checkbox"/> SPOUSE		RENTING	R				
<b>EMPLOYER DETAILS</b>	EMPLOYER						OCCUPATION					
EMPLOYER ADDRESS						TEL		NO. OF YEARS				
SALARY DATE			PREVIOUS EMPLOYER				NO. OF YEARS					
SPOUSE EMPLOYER								NO. OF YEARS				
TEL						OCCUPATION						
<b>BANK DETAILS</b>	BANK NAME			BRANCH NAME			BRANCH CODE					
NAME OF ACCOUNT HOLDER						ACCOUNT NO.						
<input type="checkbox"/> CREDIT CARD	<input type="checkbox"/> SAVINGS	<input type="checkbox"/> TRANSMISSION	<input type="checkbox"/> CURRENT									
<b>TRADE REFERENCE</b>	BRANCH		ACCOUNT NO.		INSTALMENTS		PAID UP/CURRENT/TO BE SETTLED					
<b>ETHNIC GROUP</b>		<input type="checkbox"/> AFRICAN <input type="checkbox"/> COLOURED <input type="checkbox"/> INDIAN <input type="checkbox"/> WHITE										
<b>LANGUAGE PREFERENCE</b>		<input type="checkbox"/> ENGLISH (PRIMARY) <input type="checkbox"/> AFRIKAANS (FOR AN EXPLANATORY VERSION)										
		<input type="checkbox"/> ZULU (FOR AN EXPLANATORY VERSION) <input type="checkbox"/> SOTHO (FOR AN EXPLANATORY VERSION)										

Signature \_\_\_\_\_ Date \_\_\_\_\_

# APPLICATION FOR INSTALMENT FINANCE-PG2

APPLICANT INITIALS:		SURNAME:	
ID NR:			

## PERSONAL APPLICATION FORM

SALARY DETAILS	OWN	SPOUSE
BASIC MONTHLY (EXCL CAR ALLOWANCE)	R	R
CAR ALLOWANCE	R	R
TOTAL SALARY (BASIC & CAR ALLOWANCE)	R	R
MONTHLY COMMISSION	R	R
NET TAKE HOME PAY	R	R
INCOME OTHER THAN SALARY/WAGES**	R	R
SOURCES OF OTHER INCOME**		
TOTAL MONTHLY HOUSEHOLD INCOME (NET SALARY & OTHER)	R	

## HOUSEHOLD'S EXPENSES PER MONTH:

BOND PAYMENT / RENT	R	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 HOUSEHOLD EXPENSES	R		
HOUSEHOLD SURPLUS/DISPOSABLE INCOME	R		

ARE YOU CURRENTLY LIABLE AS:       SURETY       GUARANTOR       CO-DEBTOR

SPECIFY DETAILS:

IF YOU HAVE SIGNED SURETY OR CO-DEBTOR PLEASE INDICATE THE FULL AMOUNT OUTSTANDING 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 give details: \_\_\_\_\_

Declaration by Client:

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

I hereby grant the Credit Provider the right to increase my Credit Limit once every year to accommodate any Value Added Products needed and requested by me.      

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 application. I also give consent to the Credit Provider to share my payment behaviour with any credit agency.      

I hereby declare that all of the above information is true and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_