

APPLICATION FOR FINANCE



| | | | | | | | |
|--|------------------------------------|---------------------------------------|--|-------------------------------------|---|---|-----------------------------------|
| GOODS DESCRIPTION | | NEW USED | MODEL | MAKE | M&M CODE <input type="text"/> | | |
| DEALER: HIDOSCAPE T /A BARBERTON FORD & MAZDA FSP NR. | | | | | TEL NO. 013 712 3070 | | |
| F&I CONTACT PERSON LIZELLE WOLMARANS | | | WESBANK DEALER CODE NEL / NEL00014290 | | FAX NO: 086 760 9430 | | |
| ID: 6802140428080 | | | MFC DEALER CODE | | EMAIL ADRES: Lizelle@barbertonford.co.za | | |
| CELL: 083 981 4823 | | | ABSA DEALER CODE 39351 | | | | |
| SALES EXECUTIVE _____ | | | | | | | |
| CASH PRICE VAT INCL. | R | VATABLE EXTRAS VAT INCL. | | <input type="checkbox"/> INSTALMENT | <input type="checkbox"/> LEASE | <input type="checkbox"/> CONSUMER LEASE | |
| SERVICE & DELIVERY | R | | R | TERM/PERIOD | | | |
| LICENCE/REG | R | | R | RATE- LINKED / FIXED | | | |
| | R | | R | CREDITLIFE | MONTHLY | | |
| | R | | R | COVERPLUS | MONTHLY | | |
| DEPOSIT/TRADE IN | R | | R | | | | |
| PRINCIPLE DEBT | R | BALLOON % | | BALLOON AMOUNT | R | | |
| PERSONAL DETAILS | TITLE | SURNAME | | ID No. | | | |
| FULL NAMES | | | INITIALS | DATE MARRIED | | | |
| <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 | <input type="checkbox"/> DIVORCED |
| HOME ADDRESS | | | | | PERIOD | | |
| TEL(H) | TEL(W) | CELL | FAX | E-MAIL | | | |
| POSTAL ADDRESS | | | | | CODE | | |
| PREVIOUS ADDRESS | | | | | PERIOD | | |
| EMPLOYER DETAILS | RACE - BLACK WHITE COLOURED INDIAN | | OCCUPATION | | | | |
| EMPLOYER | TEL | | YRS | MTS | | | |
| EMPLOYER ADDRESS | | | | | PERIOD | | |
| SALARY DATE | PREVIOUS EMPLOYER | PERIOD | | | | | |
| SPOUSE NAMES | SPOUSE ID | | | | | | |
| SPOUSE EMPLOYER | | | | | PERIOD | | |
| TEL | OCCUPATION | | | | | | |
| NEXT OF KIN - NAME & SURNAME | RELATIONSHIP | | | | | | |
| ADDRESS | | | | TEL | | | |
| BOND DETAILS | BOND HOLDER | | | AMOUNT OUTSTANDING | R | | |
| PROPERTY VALUE R | INSTALMENT | R | PM | PURCHASE PRICE | R | | |
| DATE PURCHASED | REGISTERED | <input type="checkbox"/> OWN NAME | <input type="checkbox"/> SPOUSE | RENTING | BOARDING | R | |
| BANKING DETAILS - APPLICANT | | | | | | | |
| 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 | | | | |

Signature _____

Date _____

| | | | |
|---|---|---|--------------------------|
| APPLICANT INITIALS : | | SURNAME: | |
| ID NUMBER: | | | |
| HOUSEHOLD INCOME DETAILS – APPLICANT (PER MONTH) | | | |
| BASIC SALARY (Gross) | R | LESS TAX | R |
| CAR ALLOWANCE (Gross) | R | LESS MEDICAL AID, PENSION, ETC. | R |
| MONTHLY COMMISSION (Gross) | R | LESS OTHER DEDUCTIONS FROM SALARY | R |
| INCOME OTHER THAN SALARY/WAGES (Gross) | R | | R |
| OTHER HOUSEHOLD INCOME (Gross) Specify : | R | NET TAKE HOME PAY (A) | R |
| HOUSEHOLD'S EXPENSES PER MONTH: | | | |
| BOND PAYMENT / RENT | R | RATES, WATER & ELECTRICITY | R |
| VEHICLE INSTALMENTS (EXCLUDING THOSE TO BE SETTLED NOW) | 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 REGULAR PAYMENTS / COSTS PROVIDE DETAILS | R |
| | R | | |
| SUB TOTAL | R | TOTAL MONTHLY EXPENSES (B) | R |
| TOTAL HOUSEHOLD DISPOSABLE INCOME | | | Disposable Income |
| TOTAL INCOME (A) R _____ - TOTAL EXPENSES (B) R _____ = | | | R |
| ARE YOU CURRENTLY LIABLE AS: | <input type="checkbox"/> SURETY <input type="checkbox"/> CO-DEBTOR <input type="checkbox"/> GUARANTOR | | |
| SPECIFY DETAILS OF DEBT: | | | |
| IF YOU HAVE SIGNED SURETY OR CO-DEBTOR PLEASE INDICATE THE FULL AMOUNT OUTSTANDING ON THE ACCOUNT/S | | | R |
| I confirm that: | | | |
| A. I am not a minor. | | | |
| B. I have never been declared mentally unfty 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. | | | |
| I. The information provided by me in this application is true and correct. | | | |
| If any of the above is incorrect give details: _____ | | | |
| Declaration by client: | | | |
| I hereby grant the Credit Provider the right: | | | |
| i) to be included in any Telemarketing Campaign | | | YES / NO |
| ii) to be included in any Marketing List that you may sell or distribute | | | YES / NO |
| iii) to be included in any mass distribution of e-mails or SMS messages | | | YES / NO |
| I understand that I will be liable for a monthly service fee. | | | |
| I hereby consent of 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. | | | |

Signature _____

Date _____