

MAIN APPLICANT DETAILS

TO BE COMPLETED IN FULL BY CLIENT

Surname

Names

INCOME AND EXPENSES - MAIN APPLICANT

INCOME: FOR OFFICE USE

Basic Salary	R	Pension	R
Housing allowance	R	Rental Income	R
Vehicle allowance	R	Commission	R
Cell allowance	R	Overtime	R
Service allowance	R	Investments	R
Shift allowance	R		
Other income	R		
Other income	R		
Other income	R		
Nett Profit	R		

As per Financials for self employed

Gross Income R (A)

SALARY DEDUCTIONS: FOR OFFICE USE

Tax/PAYE/Site	R	UIF	R
Medical Aid	R	Pension	R
Other	R		
Other	R		
Other	R		
Other	R		
Total Salary Deductions			R (B)
Nett Income (A) minus (B)			R (C)

OTHER EXPENSES: TO BE COMPLETED IN FULL BY CLIENT

Rent/Bond	R	Water & Lights	R
Rates & Taxes	R	Levies	R
Life Insurance	R	Insurance	R
Car Installment	R	Credit Card	R
Loan Repayments	R	Store Accounts	R
Telephone	R	Petrol / Taxi / Transport Costs	R
Domestic	R	Groceries	R
Education	R	Mnet/DSTV	R
Entertainment	R	Maintenance	R
Security System	R	Clothing	R
Other	R		
Other	R		
Other	R		

Total Expenses R (D)

(C) MINUS (D) R

ASSETS & LIABILITIES - MAIN APPLICANT

Asset	Description	Amount/Value
Fixed Property		R
Vehicle		R
Investment 1		R
2		R
Other (specify)		R
Other (specify)		R

Liabilities	Institution	Amount/Instalment	Outstanding balance
Home loan		R	R
HP Facility (Vehicle)		R	R
Overdraft		R	R
Credit cards		R	R
Personal Loans		R	R
Revolving credit		R	R
Other (specify)		R	R
Other (specify)		R	R
Other (specify)		R	R

ADDITIONAL CLIENT DETAIL

Are you a South African Citizen	YES	NO	Are you a Permanent Res	YES	NO
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If Non-Resident

Country passport was issued in		Date of expiry	
Date passport issued		Nationality	
Passport Number		Perm Residence Number	

Solvency Status (IF YES TO ANY OF BELOW PLEASE PROVIDE DETAILS)

Have you ever been declared insolvent	YES	NO
Ever been in arrears on any of your Accounts	YES	NO
Date of rehabilitation?		Not applicable
Ever had a dispute with Credit Bureau?	YES	NO
Ever had a judgement?	YES / NO	DON'T KNOW
Ever been under an administration order?	YES	NO
Are you currently under administration order?	YES	NO
Are you currently under debt review?	YES	NO
Name of Debt Counselor and contact number		
Do you currently have arrear arrangement in place?	YES	NO

Client/s signature: _____

Date: _____

CO-APPLICANT DETAILS

TO BE COMPLETED IN FULL BY CLIENT

Surname

Names

INCOME AND EXPENSES - CO-APPLICANT

INCOME: FOR OFFICE USE

Basic Salary	R	Pension	R
Housing allowance	R	Rental Income	R
Vehicle allowance	R	Commission	R
Cell allowance	R	Overtime	R
Service allowance	R	Investments	R
Shift allowance	R		
Other income	R		
Other income	R		
Other income	R		
Nett Profit	R		

As per Financials for self employed

Gross Income R **(A)**

SALARY DEDUCTIONS: FOR OFFICE USE

Tax/PAYE/Site	R	UIF	R
Medical Aid	R	Pension	R
Other	R		
Other	R		
Other	R		
Other	R		
Total Salary Deductions			R (B)
Nett Income (A) minus (B)			R (C)

OTHER EXPENSES: TO BE COMPLETED IN FULL BY CLIENT

Rent/Bond	R	Water & Lights	R
Rates & Taxes	R	Levies	R
Life Insurance	R	Insurance	R
Car Installment	R	Credit Card	R
Loan Repayments	R	Store Accounts	R
Telephone	R	Petrol / Taxi / Transport Costs	R
Domestic	R	Groceries	R
Education	R	Mnet/DSTV	R
Entertainment	R	Maintenance	R
Security System	R	Clothing	R
Other	R		
Other	R		
Other	R		

Total Expenses R **(D)**

(C) MINUS (D) **R**

ASSETS & LIABILITIES - CO-APPLICANT

Asset	Description	Amount/Value
Fixed Property		R
Vehicle		R
Investment 1		R
	2	R
Other (specify)		R
Other (specify)		R

Liabilities	Institution	Amount/Instalment	Outstanding balance
Home loan		R	R
HP Facility (Vehicle)		R	R
Overdraft		R	R
Credit cards		R	R
Personal Loans		R	R
Revolving credit		R	R
Other (specify)		R	R
Other (specify)		R	R
Other (specify)		R	R

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Date: _____