



Finance Application

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F& I - Zoe Jordan
Tel: 011-465-2354

Salesman: _____

Year: _____ Retail: _____ Make: _____ Model: _____ M&M : _____ Km: _____ Term: _____ Rate: _____ RV %: _____ RV: R _____	Selling Price R _____ On road cost R _____ Warranty R _____ Body Care R _____ Tracker R _____ Smash & Grab R _____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Extras:</th> <th style="width:50%;">Extra's</th> </tr> <tr> <td>R _____</td> <td>R _____</td> </tr> <tr> <td>R _____</td> <td>R _____</td> </tr> <tr> <td>R _____</td> <td>R _____</td> </tr> <tr> <td>R _____</td> <td>R _____</td> </tr> </table>	Extras:	Extra's	R _____	R _____	R _____	R _____	R _____	R _____	R _____	R _____	Vehicle details																				
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<input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> ISA <input type="checkbox"/> Lease <input type="checkbox"/> Rental		Initiation fees to be financed <input type="checkbox"/> Yes <input type="checkbox"/> No	Deposit R _____ Source of dep _____																														
Personal Details Ethnic Group: <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Coloured <input type="checkbox"/> White <input type="checkbox"/> Other Surname: _____ Title: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female First Names: _____ Dependants: _____ ID number: _____ Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> COP <input type="checkbox"/> ANC <input type="checkbox"/> Divorced <input type="checkbox"/> Tribal law <input type="checkbox"/> Co-habiting Email: _____ Marital Date: _____ Spouse name _____ Spouse wrk tel: _____ Spouse ID #: _____ Time at employer: _____ Spouse Employer _____ Empl address : _____			Contact numbers: Cell: _____ H : _____ W: _____ F: _____		Personal Details																												
Residence <input type="checkbox"/> Owner <input type="checkbox"/> Boarder <input type="checkbox"/> Tenant <input type="checkbox"/> Living with parents <input type="checkbox"/> Other _____ If owner: <input type="checkbox"/> In your name <input type="checkbox"/> In spouse name <input type="checkbox"/> Both <input type="checkbox"/> House <input type="checkbox"/> Flat <input type="checkbox"/> Twnhse Bond Bank: <input type="checkbox"/> ABSA <input type="checkbox"/> FNB <input type="checkbox"/> Ned <input type="checkbox"/> Standard <input type="checkbox"/> Other : _____ Property value _____ Bond Value: R _____			Address: _____ _____ Suburb _____ Code : _____ Period at address: _____ Postal Add: _____ _____ Suburb _____ Code : _____			Previous Address: _____ _____ Suburb _____ Code : _____ Period at add _____	Residential																										
Relative Details (NOT RESIDING WITH CLIENT) Full names: _____ Tel: _____ Address : _____ Relationship: _____			Insurance Quotes <input type="checkbox"/> Lock up garage <input type="checkbox"/> Behind locked gates <input type="checkbox"/> Complex <input type="checkbox"/> 24hr security <input type="checkbox"/> Reglr drvr <input type="checkbox"/> Private use <input type="checkbox"/> Busines Use NCB _____ Insurer: _____ Drvs issued: _____ Drvs obtained: _____ Code: _____ Prev accident: _____ Car security: _____		Next of Kin																												
Current Employer: _____ Emply # _____ Industry : _____ Occupation: _____ <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired Current Add: _____ _____ Suburb _____ Code : _____ Period _____			Prev Employer: _____ Occupation : _____ Period _____			Employment & Income																											
INCOME DETAILS: Gross Salary R _____ (total income before any deductions) Car Allowance R _____ included in gross Commission R _____ Average Overtime R _____ Average Other R _____ Source: _____ Net income R _____			<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="4">FOR OFFICE USE ONLY</th> </tr> </thead> <tbody> <tr> <td style="width:25%;">MFC</td> <td style="width:25%;">APPROVE</td> <td style="width:25%;">DECLINE</td> <td style="width:25%;"></td> </tr> <tr> <td>WES</td> <td>APPROVE</td> <td>DECLINE</td> <td></td> </tr> <tr> <td>ABSA</td> <td>APPROVE</td> <td>DECLINE</td> <td></td> </tr> <tr> <td>NED</td> <td>APPROVE</td> <td>DECLINE</td> <td></td> </tr> <tr> <td>STD</td> <td>APPROVE</td> <td>DECLINE</td> <td></td> </tr> <tr> <td>BMW</td> <td>APPROVE</td> <td>DECLINE</td> <td></td> </tr> </tbody> </table>		FOR OFFICE USE ONLY				MFC	APPROVE	DECLINE		WES	APPROVE	DECLINE		ABSA	APPROVE	DECLINE		NED	APPROVE	DECLINE		STD	APPROVE	DECLINE		BMW	APPROVE	DECLINE		Initial
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Client Name: _____ Id number: _____

Debit order details: Account holder: _____ Cheque Savings Transmission
Bank : _____ **Account #** _____ **Branch cd:** _____ **Br Name:** _____

2nd account (if applicable) Account holder: _____ Cheque Savings Transmission
Bank : _____ **Account #** _____ **Branch cd:** _____ **Br Name:** _____

Credit card 1: Bank: _____ Str Bal: R _____ Str Lim: R _____ Bud Bal: R _____ Bud Lim: R _____

Finance Acc: Bank: _____ Detail: _____ Balance: R: _____ Settling Yes No
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 Finance Acc: Bank: _____ Detail: _____ Balance: R: _____ Settling Yes No

Banking

Expences: **MINIMUM PAYMENTS MADE TO THE FOLLOWING:**

Loan Repayments R _____
Vehicle repayments (not settling) R _____
Insurance Payments R _____
Municipal Payments R _____
Rent / Bond Payments R _____
Credit Card Payments R _____
Furniture accounts R _____
Clothing accounts R _____
Overdraft repayments R _____
Security Payments R _____
Cell phone / Airtime R _____
Transport costs R _____
Food / Entertainment R _____
Education Costs R _____
Maintenance R _____
Household Expenses R _____
Other payments R _____
TOTAL R _____

Net income carried forward R _____
LESS Total Expences R _____
Disposable Income R _____

Are you currently liable as :
 Surety
 Guarantor
 Co-debtor
 Details: _____

Disposable income calculations

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 Administrator Order.
 D. I do not have any current applications 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 _____

We will not disclose any personal information to any unauthorised party.
 I. I would like to be included in any Telemarketing Campaign. Yes No
 J. I would like to be included in any Marketing list that you may sell or distribute. Yes No
 K. I would like to be included in any mass distribution of emails or SMS messages. Yes No

I understand that I will be liable for a monthly service fee.
 I hereby consent to all Credit Providers making enquiries regarding my credit history with any bureau.
 I consent to all Credit Providers reporting the conclusion of any credit agreement with me to the National Loans Register in compliance with all 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: _____

Deposits to be paid via bank cheque or transfers.

Under no circumstances do we accept cash on the premises.