

APPLICATION FORM

Company Details

Date:

Company Name:

ABN:

Contact:

Telephone:

Work

Direct

Facsimile:

Fax

Mobile:

E-mail address:

Company Address:

Suburb

State

Post/c

Nature of Business:

Date Est.:

Purpose of Finance:

Cost Price:

Deposit:

Amount to be Financed:

No. of years:

Residual:

Bankers:

Credit References:

Trade References:

1. _____ *Ph:* _____

2. _____ *Ph:* _____

3. _____ *Ph:* _____

Solicitor:

Ph:

Accountants or Auditors:

Ph:

Each Director to complete:

1.	<i>Surname:</i>		<i>Firstname:</i>	
	<i>Address:</i>			
	<i>D.O.B:</i>		<i>No. of Dependents:</i>	
	<i>Drivers' Licence No:</i>			
	<i>Current Employer:</i>			
	<i>Occupation:</i>			
	<i>Qualifications:</i>			
	<i>Date Commenced :</i>			
	<i>Previous Address:</i>			
	<i>Time at present address:</i>		<i>Home value:</i>	
	<i>Mortgage With:</i>			
	<i>Balance Owing:</i>		<i>Monthly Payments:</i>	
	<i>If renting:</i>			
	<i>Name of Agent:</i>		<i>Monthly Payments:</i>	

2	<i>Surname:</i>		<i>Firstname:</i>	
	<i>Address:</i>			
	<i>D.O.B:</i>		<i>No. of Dependents:</i>	
	<i>Drivers' Licence No:</i>			
	<i>Current Employer:</i>			
	<i>Occupation:</i>			
	<i>Qualifications:</i>			
	<i>Date Commenced :</i>			
	<i>Previous Address:</i>			
	<i>Time at present address:</i>		<i>Home value:</i>	
	<i>Mortgage With:</i>			
	<i>Balance Owing:</i>		<i>Monthly Payments:</i>	
	<i>If renting:</i>			
	<i>Name of Agent:</i>		<i>Monthly Payments:</i>	

Personal Assets and Liabilities

As at / /200

Liabilities	\$	Assets	\$
Bank Loan		Cash on hand & at Bank:	
		Value of Business:	
Mortgage:		Home:	
		Investment Property:	
		Furniture & fixtures:	
Credit Cards		Vehicle	
Car Finance:		Shares	
<i>monthly payments:</i>		Superannuation:	
Other:		Other	
Total Liabilities:		Total Assets:	
		Less Total Liabilities:	
		Surplus:	
Credit Card Limit			
Life Insurance & Income Protection			
Bankers:			