

# APPLICATION FORM

PLEASE NOTE: All bold fields are compulsory and must be completed.

## FOR INTERNAL USE ONLY

Business \_\_\_\_\_ Consultant \_\_\_\_\_  
Lead Agent \_\_\_\_\_ Lead Agency \_\_\_\_\_  
Administrator \_\_\_\_\_ Date Received \_\_\_\_\_  
Bank of Submission  ABSA  FNB  Nedbank  Standard Bank  Investec  RMB  HIP  
Manual Bank(s) of Submission \_\_\_\_\_

## APPLICATION DETAILS

Loan Type  New Loan  Switch from other institution  Further Loan  Further Building Loan  
Application Type  Individual  Joint  Multiple Applicants  Public Company  Private Company  Trust  
 Closed Corporation  Incorporated Company  Estate Late Client  Club  Sole Proprietor  Schools  
 Partnership  Non Profit Organisation and Friendly Societies  State Owned Company  
Suretyship  Yes /  No  
Transfer Attorney \_\_\_\_\_ Transfer Attorney Tel. No. \_\_\_\_\_  
Bond Attorney \_\_\_\_\_ Bond Attorney Tel. No. \_\_\_\_\_

## COMPANY DETAILS – Complete when application type is Private Company / CC / Trust / Public Company

Company Name \_\_\_\_\_ Correspondence Language: \_\_\_\_\_  
Registration Number: \_\_\_\_\_ Registration Date: \_\_\_\_\_  
Country of Registration: \_\_\_\_\_ Business Nature: \_\_\_\_\_  
Physical Address: \_\_\_\_\_ Postal Address: \_\_\_\_\_  
Suburb \_\_\_\_\_ Suburb \_\_\_\_\_  
City \_\_\_\_\_ Postal Code \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_  
Province \_\_\_\_\_ Province \_\_\_\_\_  
Country \_\_\_\_\_ Country \_\_\_\_\_  
Postal Address same as Physical?  Yes /  No  
Company Tel. No. \_\_\_\_\_ Company Fax No. \_\_\_\_\_  
Financial Year End: \_\_\_\_\_ Enterprise TurnOver: \_\_\_\_\_

## SENIOR CONTROLLER

ID Type  Book of Life / ID  Passport ID No. / Passport No. \_\_\_\_\_  
Title  Mr.  Mrs.  Miss  Ms.  Dr.  Prof.  Rev. Gender  Male  Female  
Home Language \_\_\_\_\_ Surname \_\_\_\_\_  
First Name(s) \_\_\_\_\_ Country of Birth \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
 SA Citizen  Permanent/Resident /  Temporary Resident  Working in SA  
Occupational Status  Contract Worker  Full-time Employee  Home Executive  Part-time Employee  
 Retired / Pensioner  Self-employed (Non-professional)  Self-employed (Professional)  
 Student / Scholar  Temp Employed  Unemployed  
Occupation Level  Unskilled Worker  Semi-skilled Worker  Skilled Worker  Junior Position  Supervisor  
 Management  Senior Management  
Home Phone No \_\_\_\_\_ Cellphone No \_\_\_\_\_  
Email Address \_\_\_\_\_  
Preferred Method of Contact  SMS  Email  Post  
Residential Status  Border  Living with Parents  Tenant  Owner  Other  
Residential Address Occupation Date \_\_\_\_\_  
Physical Address \_\_\_\_\_ Postal Address (If different to Physical) \_\_\_\_\_  
Suburb \_\_\_\_\_ Suburb \_\_\_\_\_  
City \_\_\_\_\_ Postal Code \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_  
Province \_\_\_\_\_ Province \_\_\_\_\_  
Country \_\_\_\_\_ Country \_\_\_\_\_

**PERSONAL DETAILS – Main Applicant**

Surname \_\_\_\_\_ First Name(s) \_\_\_\_\_

Title  Mr.  Mrs.  Miss  Ms.  Dr.  Prof.  Rev.

Ethnic Group  Asian  Black  Coloured  White No. of Dependants \_\_\_\_\_

ID Type  Book of Life / ID  Passport SA Citizen  Yes /  No

ID No. / Passport No. \_\_\_\_\_ Permanent SA Resident  Yes /  No

Date Passport Expires DD / MM / CCYY Date Passport Issued DD / MM / CCYY

Permanent Resident Country \_\_\_\_\_ Country Permit Issued \_\_\_\_\_

Type of Permit  Study Permit  Work Permit \_\_\_\_\_ Are you a first time home buyer  Yes /  No

Date Work Contract Issued DD / MM / CCYY Date Work Contract Expires DD / MM / CCYY

Date Temp Permit Issued DD / MM / CCYY Date Permit Issued DD / MM / CCYY

Tax Obligation outside of RSA?  Yes /  No Nationality \_\_\_\_\_

Tax Number \_\_\_\_\_ Country Tax Code was Issued \_\_\_\_\_

If No Tax Number is Available Please State Reason \_\_\_\_\_

Is the Applicant a Senior Controller?  Yes /  No

Home Language \_\_\_\_\_ City of Birth \_\_\_\_\_

Country of Birth \_\_\_\_\_ Country of Marriage \_\_\_\_\_

Date of Birth DD / MM / CCYY Gender  Male  Female

Have you smoked any form of tobacco in the last year  Yes /  No

Highest Qualification  School Leaver – Pre Grade 10  School Leaver – Grade 10  School Leaver – Grade 12  Certificate 24 Months  
 Diploma 1 Year  Diploma 2 Years  Diploma 3 Years  Degree 3 & 3+ Years  
 Post Graduate Diploma 12 Months  Honours  Doctorate  Masters  Incomplete

Marital Status  Single  Married  Separated  Divorced  Widow(er)

Marital Contract  ANC with Accrual  ANC without Accrual  Community of Property  None

**CONTACT DETAILS – Main Applicant**

Home Tel. No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_

Work Tel. No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Email Address \_\_\_\_\_

Physical Address \_\_\_\_\_ Postal Address (If different to Physical) \_\_\_\_\_

Suburb \_\_\_\_\_ Suburb \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Province \_\_\_\_\_ Province \_\_\_\_\_

Country \_\_\_\_\_ Country \_\_\_\_\_

Residential Status  Border  Living with Parents  Tenant  Owner  Other

Occupied Since DD / MM / CCYY

Preferred Method of Contact  SMS  Email  Post Correspondence Language  Afrikaans  English

**EMPLOYMENT DETAILS – Main Applicant**

Occupational Status  Contract Worker  Full-time Employee  Home Executive  Part-time Employee  
 Retired / Pensioner  Self-employed (Non-professional)  Self-employed (Professional)  
 Student / Scholar  Temp Employed  Unemployed

Occupation Level  Unskilled Worker  Semi-skilled Worker  Skilled Worker  Junior Position  Supervisor  
 Management  Senior Management

Employment Sector  Agriculture  Armed Forces  Catering & Entertainment  Civil Service  Communication  
 Construction  Education  Finance  Health  Industrial  I.T.  Legal Profession  
 Media  Nature Reserves  Sales & Marketing  Science  Security  Transportation  
 Welfare  Other

Source of Income  Salary  Government Grant  Inheritance  Investments  Pension Policy  Retirement Annuity  
 Donation / Gift  Other

Salary Frequency  Daily  Weekly  Bi-weekly  Monthly  Other

Application coincide with job change  Yes /  No

Employer Name \_\_\_\_\_ How long has your employer been operating? \_\_\_\_\_ (Years)

Employer Address \_\_\_\_\_

Suburb \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Province \_\_\_\_\_ Country \_\_\_\_\_

Employee Number \_\_\_\_\_ Start Date \_\_\_\_\_ D D / M M / C C Y Y

Occupation \_\_\_\_\_

### PREVIOUS EMPLOYER DETAILS – Main Applicant

Field is required if applicant is employed for less than 3 years at current employer

Previous Employer \_\_\_\_\_ Previous Period Employed: \_\_\_\_\_ Years \_\_\_\_\_ Months

### SOLVENCY DETAILS – Main Applicant

Have you been declared insolvent?  Yes /  No Date of insolvency \_\_\_\_\_ D D / M M / C C Y Y

Have you been rehabilitated?  Yes /  No Date of rehabilitation \_\_\_\_\_ D D / M M / C C Y Y

Have you ever had a dispute with the credit bureau?  Yes /  No Have you ever had a judgement?  Yes /  No

Credit Bureau Dispute Details \_\_\_\_\_

Consolidation amount \_\_\_\_\_

Have you ever been under an administration order?  Yes /  No

Are you currently under an administration order (Garnishee order)?  Yes /  No

Are you currently under debt review / in debt counselling?  Yes /  No

Do you currently have a debt arrangement in place?  Yes /  No

Debt Counsellor Name \_\_\_\_\_ Debt Counsellor Number \_\_\_\_\_

### RETAIL ACCOUNTS – Main Applicant

1 Description _____	Balance _____		
Monthly _____	Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction <input type="checkbox"/> Yes / <input type="checkbox"/> No	
2 Description _____	Balance _____		
Monthly _____	Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction <input type="checkbox"/> Yes / <input type="checkbox"/> No	
3 Description _____	Balance _____		
Monthly _____	Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction <input type="checkbox"/> Yes / <input type="checkbox"/> No	

**BANK DETAILS – Main Applicant**

1	Institution _____	Business	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____
	Account Type _____			Account Holder _____
	Account No. _____			Balance _____
	Monthly _____	Settle	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No
2	Institution _____	Business	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____
	Account Type _____			Account Holder _____
	Account No. _____			Balance _____
	Monthly _____	Settle	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No
3	Institution _____	Business	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____
	Account Type _____			Account Holder _____
	Account No. _____			Balance _____
	Monthly _____	Settle	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No
4	Institution _____	Business	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____
	Account Type _____			Account Holder _____
	Account No. _____			Balance _____
	Monthly _____	Settle	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No

**Monthly Income & Expenses – Main Applicant**

<b>Monthly Income</b>		<b>Other Monthly Expenses Amount</b>	
Basic Salary / Wage	_____	Assurance (Life, Retirement Annuities)	_____
Cash Allowance	_____	Cellphone	_____
Average Commissions	_____	Clothing	_____
Investments	_____	Domestic Wages	_____
Interest Income	_____	Donations	_____
Rental Income	_____	Education	_____
Housing Subsidy	_____	Entertainment	_____
Average Overtime	_____	Groceries	_____
Monthly Car Allowance	_____	Home Maintenance / Garden Service	_____
Travel Allowance	_____	Insurance and Funeral Policies	_____
Entertainment	_____	Investments (Unit Trusts, Endowments)	_____
Income from Sureties	_____	Levies	_____
Maintenance / Alimony Income	_____	M-Net, DSTV and TV License	_____
Future Rental Income	_____	Maintenance / Alimony	_____
Other – specify _____	_____	Medical	_____
<i>Total Income</i>	_____	Petrol and Car Maintenance	_____
		Property Rental Expenses	_____
<b>Salary Deductions Amount</b>		Rates and Taxes	_____
Income Tax – PAYE / SITE	_____	Rental	_____
Pension	_____	Security	_____
U.I.F	_____	Telephone and ISP	_____
Medical Aid	_____	Timeshare	_____
Other Deductions	_____	Water and Lights	_____
<i>Sub-total Deductions</i>	_____	Other	_____
		<b>Total Expenses</b>	_____
<b>Total Income</b>	_____	<b>Total Expenses</b>	_____
		<b>Surplus / Shortage</b>	_____

**ASSET DETAILS – Main Applicant**

**FIXED PROPERTY - Legal Property Description, Stand No, Suburb**

Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_

**VEHICLES - Make, Model, Year**

Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_

**INVESTMENTS - Description of Unit Trust, Shares etc**

Description \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Present Value \_\_\_\_\_

**OTHER**

Description \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Present Value \_\_\_\_\_

*(A) Total Assets* \_\_\_\_\_

**LIABILITY DETAILS – Main Applicant**

**OVERDRAFT**

Description \_\_\_\_\_ Amount Owing \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_

**OTHER**

Description \_\_\_\_\_ Amount Owing \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_

*(B) Total Liabilities* \_\_\_\_\_

*(A) Total Assets* \_\_\_\_\_ *(B) Total Liabilities* \_\_\_\_\_ *Net Asset Value* \_\_\_\_\_

**DECLARATION – Main Applicant**

I hereby appoint the Originator as my sole agent and on my behalf to submit to all banks in line with the requirements as discussed, in order to obtain mortgage loan finance for the property specified on this application form.

I hereby consent to the Originator using, storing and sharing my personal information (as set out on this form) with companies within its group and with registered credit providers as well as its service providers. I further agree to receive information about other products and services that the Originator thinks may be of interest to me. I acknowledge that I have the right to opt-out of such future communications.

The advantages of putting down a deposit when financing a home has been discussed with me.

I/we hold no other citizenships and residencies for local and international tax purposes, other than those disclosed in this application form and will inform the lender in writing of any change of this status within 30 days of the change of status.

I warrant that all the information I supplied is to the best of my knowledge and believe true and correct in all material respects. I am not aware of any other information which, should it become known to the Bank, would affect the consideration of my application in any way. I agree that the Bank may provide any information pertaining to the Loan applied for to the Originator during the application process. I hereby authorise the Bank to have access to my credit bureau records and to furnish and/or to disclose any information arising from any agreement entered into with the Bank to any such credit bureaus.

Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

**CONSENT FORM***Consent to electronically obtain account statements from financial institutions*

Name of account holder (you)\* \_\_\_\_\_

\*One account holder per consent form

Identity/Passport/Registration Number \_\_\_\_\_

Absa Bank Ltd, Nedbank Ltd and Standard Bank Ltd (the banks) work with each other and other financial institutions to fight, amongst other crimes, home loan application fraud. In these dealings, the banks ensure that all personal and financial information about clients are protected and kept strictly confidential.

For the purpose of assessing the home loan application that [Source name] will submit on your behalf to any or all of the banks in the name of \_\_\_\_\_, the banks need your consent to obtain your bank statement(s) directly for your account(s) held at other financial institutions (as specified below). The financial institutions involved will exchange no further information than the bank statements you have authorised and these will be safeguarded and not used for any other purposes. Bank account statements obtained will also be limited to the period necessary to assess the home loan application.

Your signature below confirms that the banks have your consent to obtain bank statement(s) on the following account(s) (that show your account transaction history) and if there is a problem with the electronic retrieval of some or all of the required bank statements for any reason, the banks will contact you to provide physical copies:

**Account 1:**

Name of bank/institution \_\_\_\_\_

Account type/ description \_\_\_\_\_

Branch name \_\_\_\_\_ Branch number/universal number \_\_\_\_\_

Account number \_\_\_\_\_

**Account 2:**

Name of bank/institution \_\_\_\_\_

Account type/ description \_\_\_\_\_

Branch name \_\_\_\_\_ Branch number/universal number \_\_\_\_\_

Account number \_\_\_\_\_

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

If account is in the name of a legal entity:

Name of signatory/ies \_\_\_\_\_

Capacity of signatory/ies \_\_\_\_\_

**LOAN DETAILS**Cost Included with Bond?  Yes /  NoInitiation Fee Payment  Add to Principal Debts  Client Payment  From the Proceeds of a Loan  Waiver (Bank Waivers Fee)

Bond Costs \_\_\_\_\_ Transfer Costs \_\_\_\_\_

**Loan Details by Bank**

	Loan Amount / Extn. Amount	Loan term (Months)
ABSA		
FNB		
Nedbank		
Standard Bank		
Investec		
RMB		
HIP		

Registration Amount \_\_\_\_\_

Rate Type  Fixed  VariableInstalment Method  Debit Order  Salary Stop Order

Repayment Day \_\_\_\_\_

Source of Deposit \_\_\_\_\_

Deposit Cash Component Amount \_\_\_\_\_

Legal Notice Type  Registered  Mail Hand Delivered**SECURITY DETAILS**Are you offering additional security?  Yes /  No**LIFE INSURANCE DETAILS**Do you have sufficient life cover to cover the value of this home loan?  Yes /  No**BUILDER DETAILS – Complete when loan type is building loan or new development.**

Developer Name \_\_\_\_\_

New Development  Yes /  No

Contractor Name \_\_\_\_\_

Contractor Tel. No. \_\_\_\_\_

Contractor Cellphone No. \_\_\_\_\_

Contract Amount \_\_\_\_\_

Is Land Paid For?  Yes /  NoExpected Date of Completion    D D / M M / C C Y Y

NHBC Number \_\_\_\_\_

**PROPERTY & SELLER DETAILS**

Company Name \_\_\_\_\_

Company Registration No. \_\_\_\_\_

Seller ID Number \_\_\_\_\_

Seller Name \_\_\_\_\_

Seller Tel. No. \_\_\_\_\_

Seller Cellphone No. \_\_\_\_\_

Is the property currently bonded?  Yes /  No

Bondholder Institution \_\_\_\_\_

Branch \_\_\_\_\_

Bond Account No. \_\_\_\_\_

Erf No. \_\_\_\_\_ Portion No. \_\_\_\_\_

Portion Details \_\_\_\_\_

Street No. \_\_\_\_\_ Street Name \_\_\_\_\_

Suburb \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Province \_\_\_\_\_

Purchase Date    D D / M M / C C Y Y

Purchase Amount \_\_\_\_\_

Ownership Type  Freehold  Leasehold  Real RightProperty Usage  Owner Occupied  Holiday Home  Rented Out  Business  VacantType of Property  Cluster  Duet Sectional Title  Duet Full Title  Dwelling  Sectional Title  Small Holding Vacant LandArea Type  Land/Farm  Business Park/Central/Business Hub/Hotel/Hospital  Caravan Park/Golf Course/Zoo/Leisure Park/Stadium Military Base  Housing Estate  Industrial Park/Area/Plant/Commercial Airfield  Mining Facilities Residential Suburb  Small Holding/Farm

Is the property a Development?  Yes /  No

Farm Name \_\_\_\_\_

Land Area (m<sup>2</sup>) \_\_\_\_\_Building Size (m<sup>2</sup>) \_\_\_\_\_Type of Roof  Standard  Thatch

Who can be contacted for the Valuation of the property?

Full Name \_\_\_\_\_

Tel. No. \_\_\_\_\_

Cellphone No. \_\_\_\_\_

Access control type  None  Sentry  Boomed  Gate  Electronic Access**GEYSER DETAILS**Heat Source  Electric  Gas  Heat Pump  Induction  Solar Panels  Solar TubesGeyser Location  Inside Roof  Outside Roof**SECTIONAL TITLE DETAILS – Complete when type of property is cluster or sectional title**Has Sectional Title Register Been Opened?  Yes /  No

Complex Name \_\_\_\_\_

Complex Street Name \_\_\_\_\_ Complex Suburb \_\_\_\_\_

Complex No. \_\_\_\_\_ Sectional Title Unit No. (Plans) \_\_\_\_\_ Door No. \_\_\_\_\_

Parking Bay No. \_\_\_\_\_ Garage Bay No. \_\_\_\_\_

Managing Agent Details \_\_\_\_\_

Managing Agent Tel. No. \_\_\_\_\_ Alternative Contact No. \_\_\_\_\_



**PERSONAL DETAILS – Co-Applicant**

Surname \_\_\_\_\_ First Name(s) \_\_\_\_\_

Title  Mr.  Mrs.  Miss  Ms.  Dr.  Prof.  Rev.

Ethnic Group  Asian  Black  Coloured  White No. of Dependants \_\_\_\_\_

ID Type  Book of Life / ID  Passport SA Citizen  Yes /  No

ID No. / Passport No. \_\_\_\_\_ Permanent SA Resident  Yes /  No

Date Passport Expires DD / MM / CCYY Date Passport Issued DD / MM / CCYY

Permanent Resident Country \_\_\_\_\_ Country Permit Issued \_\_\_\_\_

Type of Permit  Study Permit  Work Permit \_\_\_\_\_ Are you a first time home buyer  Yes /  No

Date Work Contract Issued DD / MM / CCYY Date Work Contract Expires DD / MM / CCYY

Date Temp Permit Issued DD / MM / CCYY Date Permit Issued DD / MM / CCYY

Tax Obligation outside of RSA?  Yes /  No Nationality \_\_\_\_\_

Tax Number \_\_\_\_\_ Country Tax Code was Issued \_\_\_\_\_

If No Tax Number is Available Please State Reason \_\_\_\_\_

Is the Applicant a Senior Controller?  Yes /  No

Home Language \_\_\_\_\_ City of Birth \_\_\_\_\_

Country of Birth \_\_\_\_\_ Country of Marriage \_\_\_\_\_

Date of Birth DD / MM / CCYY Gender  Male  Female

Have you smoked any form of tobacco in the last year  Yes /  No

Highest Qualification  School Leaver – Pre Grade 10  School Leaver – Grade 10  School Leaver – Grade 12  Certificate 24 Months  
 Diploma 1 Year  Diploma 2 Years  Diploma 3 Years  Degree 3 & 3+ Years  
 Post Graduate Diploma 12 Months  Honours  Doctorate  Masters  Incomplete

Marital Status  Single  Married  Separated  Divorced  Widow(er)

Marital Contract  ANC with Accrual  ANC without Accrual  Community of Property  None

**CONTACT DETAILS – Co-Applicant**

Home Tel. No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_

Work Tel. No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Email Address \_\_\_\_\_

Physical Address \_\_\_\_\_ Postal Address (If different to Physical) \_\_\_\_\_

Suburb \_\_\_\_\_ Suburb \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Province \_\_\_\_\_ Province \_\_\_\_\_

Country \_\_\_\_\_ Country \_\_\_\_\_

Residential Status  Border  Living with Parents  Tenant  Owner  Other

Occupied Since DD / MM / CCYY

Preferred Method of Contact  SMS  Email  Post Correspondence Language  Afrikaans  English

**EMPLOYMENT DETAILS – Co-Applicant**

Occupational Status  Contract Worker  Full-time Employee  Home Executive  Part-time Employee  
 Retired / Pensioner  Self-employed (Non-professional)  Self-employed (Professional)  
 Student / Scholar  Temp Employed  Unemployed

Occupation Level  Unskilled Worker  Semi-skilled Worker  Skilled Worker  Junior Position  Supervisor  
 Management  Senior Management

Employment Sector  Agriculture  Armed Forces  Catering & Entertainment  Civil Service  Communication  
 Construction  Education  Finance  Health  Industrial  I.T.  Legal Profession  
 Media  Nature Reserves  Sales & Marketing  Science  Security  Transportation  
 Welfare  Other

Source of Income  Salary  Government Grant  Inheritance  Investments  Pension Policy  Retirement Annuity  
 Donation / Gift  Other

Salary Frequency  Daily  Weekly  Bi-weekly  Monthly  Other

Application coincide with job change  Yes /  No

Employer Name \_\_\_\_\_ How long has your employer been operating? \_\_\_\_\_ (Years)

Employer Address \_\_\_\_\_

Suburb \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Province \_\_\_\_\_ Country \_\_\_\_\_

Employee Number \_\_\_\_\_ Start Date \_\_\_\_\_ D D / M M / C C Y Y

Occupation \_\_\_\_\_

**PREVIOUS EMPLOYER DETAILS – Co-Applicant**

Field is required if applicant is employed for less than 3 years at current employer

Previous Employer \_\_\_\_\_ Previous Period Employed: \_\_\_\_\_ Years \_\_\_\_\_ Months

**SOLVENCY DETAILS – Co-Applicant**

Have you been declared insolvent?  Yes /  No Date of insolvency \_\_\_\_\_ D D / M M / C C Y Y

Have you been rehabilitated?  Yes /  No Date of rehabilitation \_\_\_\_\_ D D / M M / C C Y Y

Have you ever had a dispute with the credit bureau?  Yes /  No Have you ever had a judgement?  Yes /  No

Credit Bureau Dispute Details \_\_\_\_\_

Consolidation amount \_\_\_\_\_

Have you ever been under an administration order?  Yes /  No

Are you currently under an administration order (Garnishee order)?  Yes /  No

Are you currently under debt review / in debt counselling?  Yes /  No

Do you currently have a debt arrangement in place?  Yes /  No

Debt Counsellor Name \_\_\_\_\_ Debt Counsellor Number \_\_\_\_\_

**RETAIL ACCOUNTS – Co-Applicant**

1 Description _____	Balance _____		
Monthly _____	Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction <input type="checkbox"/> Yes / <input type="checkbox"/> No	
2 Description _____	Balance _____		
Monthly _____	Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction <input type="checkbox"/> Yes / <input type="checkbox"/> No	
3 Description _____	Balance _____		
Monthly _____	Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction <input type="checkbox"/> Yes / <input type="checkbox"/> No	

**BANK DETAILS – Co-Applicant**

1	Institution _____	Business	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____
	Account Type _____			Account Holder _____
	Account No. _____			Balance _____
	Monthly _____	Settle	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No
2	Institution _____	Business	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____
	Account Type _____			Account Holder _____
	Account No. _____			Balance _____
	Monthly _____	Settle	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No
3	Institution _____	Business	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____
	Account Type _____			Account Holder _____
	Account No. _____			Balance _____
	Monthly _____	Settle	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No
4	Institution _____	Business	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____
	Account Type _____			Account Holder _____
	Account No. _____			Balance _____
	Monthly _____	Settle	<input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No

**Monthly Income & Expenses – Co-Applicant**

**Monthly Income**

Basic Salary / Wage \_\_\_\_\_

Cash Allowance \_\_\_\_\_

Average Commissions \_\_\_\_\_

Investments \_\_\_\_\_

Interest Income \_\_\_\_\_

Rental Income \_\_\_\_\_

Housing Subsidy \_\_\_\_\_

Average Overtime \_\_\_\_\_

Monthly Car Allowance \_\_\_\_\_

Travel Allowance \_\_\_\_\_

Entertainment \_\_\_\_\_

Income from Sureties \_\_\_\_\_

Maintenance / Alimony Income \_\_\_\_\_

Future Rental Income \_\_\_\_\_

Other – specify \_\_\_\_\_

*Total Income* \_\_\_\_\_

**Salary Deductions Amount**

Income Tax – PAYE / SITE \_\_\_\_\_

Pension \_\_\_\_\_

U.I.F \_\_\_\_\_

Medical Aid \_\_\_\_\_

Other Deductions \_\_\_\_\_

*Sub-total Deductions* \_\_\_\_\_

**Other Monthly Expenses Amount**

Assurance (Life, Retirement Annuities) \_\_\_\_\_

Cellphone \_\_\_\_\_

Clothing \_\_\_\_\_

Domestic Wages \_\_\_\_\_

Donations \_\_\_\_\_

Education \_\_\_\_\_

Entertainment \_\_\_\_\_

Groceries \_\_\_\_\_

Home Maintenance / Garden Service \_\_\_\_\_

Insurance and Funeral Policies \_\_\_\_\_

Investments (Unit Trusts, Endowments) \_\_\_\_\_

Levies \_\_\_\_\_

M-Net, DSTV and TV License \_\_\_\_\_

Maintenance / Alimony \_\_\_\_\_

Medical \_\_\_\_\_

Petrol and Car Maintenance \_\_\_\_\_

Property Rental Expenses \_\_\_\_\_

Rates and Taxes \_\_\_\_\_

Rental \_\_\_\_\_

Security \_\_\_\_\_

Telephone and ISP \_\_\_\_\_

Timeshare \_\_\_\_\_

Water and Lights \_\_\_\_\_

Other \_\_\_\_\_

*Total Expenses* \_\_\_\_\_

**Total Income** \_\_\_\_\_ **Total Expenses** \_\_\_\_\_ **Surplus / Shortage** \_\_\_\_\_

**ASSET DETAILS – Co-Applicant**

**FIXED PROPERTY - Legal Property Description, Stand No, Suburb**

Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_

**VEHICLES - Make, Model, Year**

Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_ Present Value \_\_\_\_\_

**INVESTMENTS - Description of Unit Trust, Shares etc**

Description \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Present Value \_\_\_\_\_

**OTHER**

Description \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Present Value \_\_\_\_\_  
 Description \_\_\_\_\_ Present Value \_\_\_\_\_

(A) Total Assets \_\_\_\_\_

**LIABILITY DETAILS – Co-Applicant**

**OVERDRAFT**

Description \_\_\_\_\_ Amount Owing \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_

**OTHER**

Description \_\_\_\_\_ Amount Owing \_\_\_\_\_  
 Description \_\_\_\_\_ Amount Owing \_\_\_\_\_

(B) Total Liabilities \_\_\_\_\_

(A) Total Assets \_\_\_\_\_ (B) Total Liabilities \_\_\_\_\_ Net Asset Value \_\_\_\_\_

**DECLARATION – Co-Applicant**

I hereby appoint the Originator as my sole agent and on my behalf to submit to all banks in line with the requirements as discussed, in order to obtain mortgage loan finance for the property specified on this application form.

I hereby consent to the Originator using, storing and sharing my personal information (as set out on this form) with companies within its group and with registered credit providers as well as its service providers. I further agree to receive information about other products and services that the Originator thinks may be of interest to me. I acknowledge that I have the right to opt-out of such future communications.

The advantages of putting down a deposit when financing a home has been discussed with me.

I/we hold no other citizenships and residencies for local and international tax purposes, other than those disclosed in this application form and will inform the lender in writing of any change of this status within 30 days of the change of status.

I warrant that all the information I supplied is to the best of my knowledge and believe true and correct in all material respects. I am not aware of any other information which, should it become known to the Bank, would affect the consideration of my application in any way. I agree that the Bank may provide any information pertaining to the Loan applied for to the Originator during the application process. I hereby authorise the Bank to have access to my credit bureau records and to furnish and/or to disclose any information arising from any agreement entered into with the Bank to any such credit bureaus.

Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

**CONSENT FORM***Consent to electronically obtain account statements from financial institutions*

Name of account holder (you)\* \_\_\_\_\_

\*One account holder per consent form

Identity/Passport/Registration Number \_\_\_\_\_

Absa Bank Ltd, Nedbank Ltd and Standard Bank Ltd (the banks) work with each other and other financial institutions to fight, amongst other crimes, home loan application fraud. In these dealings, the banks ensure that all personal and financial information about clients are protected and kept strictly confidential.

For the purpose of assessing the home loan application that [Source name] will submit on your behalf to any or all of the banks in the name of \_\_\_\_\_, the banks need your consent to obtain your bank statement(s) directly for your account(s) held at other financial institutions (as specified below). The financial institutions involved will exchange no further information than the bank statements you have authorised and these will be safeguarded and not used for any other purposes. Bank account statements obtained will also be limited to the period necessary to assess the home loan application.

Your signature below confirms that the banks have your consent to obtain bank statement(s) on the following account(s) (that show your account transaction history) and if there is a problem with the electronic retrieval of some or all of the required bank statements for any reason, the banks will contact you to provide physical copies:

**Account 1:**

Name of bank/institution \_\_\_\_\_

Account type/ description \_\_\_\_\_

Branch name \_\_\_\_\_ Branch number/universal number \_\_\_\_\_

Account number \_\_\_\_\_

**Account 2:**

Name of bank/institution \_\_\_\_\_

Account type/ description \_\_\_\_\_

Branch name \_\_\_\_\_ Branch number/universal number \_\_\_\_\_

Account number \_\_\_\_\_

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

If account is in the name of a legal entity:

Name of signatory/ies \_\_\_\_\_

Capacity of signatory/ies \_\_\_\_\_