

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 / C C Y Y
 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 DD / MM / 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 DD / MM / C C Y Y
 Have you been rehabilitated? Yes / No Date of rehabilitation DD / MM / 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 (Garnishing order)? Yes / No
 Are you currently under a 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 _____ Monthly _____	Balance _____ Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction <input type="checkbox"/> Yes / <input type="checkbox"/> No
2 Description _____ Monthly _____	Balance _____ Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Reduction <input type="checkbox"/> Yes / <input type="checkbox"/> No
3 Description _____ Monthly _____	Balance _____ 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 Account Type _____ Account No. _____ Monthly _____ Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____ Account Holder _____ Balance _____ Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No
2 Institution _____ Business <input type="checkbox"/> Yes / <input type="checkbox"/> No Account Type _____ Account No. _____ Monthly _____ Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____ Account Holder _____ Balance _____ Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No
3 Institution _____ Business <input type="checkbox"/> Yes / <input type="checkbox"/> No Account Type _____ Account No. _____ Monthly _____ Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____ Account Holder _____ Balance _____ Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No
4 Institution _____ Business <input type="checkbox"/> Yes / <input type="checkbox"/> No Account Type _____ Account No. _____ Monthly _____ Settle <input type="checkbox"/> Yes / <input type="checkbox"/> No	Branch _____ Account Holder _____ Balance _____ Reduction _____ Primary <input type="checkbox"/> Yes / <input type="checkbox"/> No

Monthly Income & Expenses – Main 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 – 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, in order to obtain mortgage loan finance for the property specified on this application form, on my behalf. I hereby consent to the Originator providing feedback to the estate agency concerned about the outcome of the mortgage loan finance application.

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 _____

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 / C C Y Y Date Passport Issued DD / MM / C C Y Y

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 Issue DD / MM / C C Y Y Date Work Contract Expires DD / MM / C C Y Y

Date Temp Permit Issue DD / MM / C C Y Y Date Permit Issue DD / MM / C C Y Y

Tax Obligation outside of RSA? Yes / No Nationality _____

Home Language _____ City of Birth _____

Country of Birth _____ Country of Marriage _____

Date of Birth DD / MM / C C Y Y 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

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Suburb _____ City _____ Postal Code _____

Province _____ Country _____

Employee Number _____ Start Date _____ D D / M M / C C Y Y

Occupation _____

PREVIOUS EMPLOYER DETAILS – Co-applicant

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SOLVENCY DETAILS – Co-applicant

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

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Credit Bureau Dispute Details _____

Consolidation amount _____

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

Debt Counsellor Name _____ Debt Counsellor Number _____

RETAIL ACCOUNTS – Co-applicant

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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 – C0-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

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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** _____

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 Description _____ Present Value _____
 Description _____ Present Value _____

OTHER

Description _____ Present Value _____
 Description _____ Present Value _____
 Description _____ Present Value _____

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LIABILITY DETAILS – Co-applicant

OVERDRAFT

Description _____ Amount Owing _____
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OTHER

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 Description _____ Amount Owing _____

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(A) Total Assets _____ (B) Total Liabilities _____ Net Asset Value _____

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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 _____

LOAN DETAILS

Cost Included with Bond? Yes / No

Initiation 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 Variable

Instalment 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 / No

Expected Date of Completion D D / M M / C C Y Y

NHBRC Number _____

PROPERTY & SELLER'S 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 Right

Property Usage Owner Occupied Holiday Home Rented Out Business Vacant

Type of Property Cluster Duet Sectional Title Duet Full Title Dwelling Sectional Title Small Holding

Vacant Land

Area 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

Land Area (m²) _____ Farm Name _____

Building Size (m²) _____

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 Tubes

Geyser 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. _____