

R=		M=	
<b>GOODS DESCRIPTION</b>		MODEL	MAKE
USED		M&M CODE <input type="text"/>	
DEALER		TEL NO.	
F&I CONTACT PERSON		SALES PERSON	
		FAX NO: <b>011 794 1197</b>	
CASH PRICE VAT INCL.	R	VARIABLE EXTRAS VAT INCL.	<input checked="" type="checkbox"/> INSTALMENT <input type="checkbox"/> LEASE <input type="checkbox"/> CONSUMER LEASE
ADD COVER	R	RADIO/TAPE	R
LICENCE/REG	R	Cartrack	R
WARRANTY	R	ON ROAD CHARGES	R
DEPOSIT/TRADE IN	R	All-in-one	R
PRINCIPLE DEBT	R		
<b>PERSONAL DETAILS</b>		TITLE	SURNAME
FULL NAMES		INITIALS	DEPENDANTS
<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	MARRIED <input type="checkbox"/> ANC <input type="checkbox"/> COP	<input type="checkbox"/> SINGLE	<input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED
HOME ADDRESS		PERIOD	
TEL(H)	TEL(W)	CELL	FAX
POSTAL ADDRESS		E-MAIL	
PREVIOUS ADDRESS		CODE	
PREVIOUS ADDRESS		PERIOD	
<b>SPOUSE NAMES</b>		SPOUSE ID	
<b>NEXT OF KIN – name &amp; surname OF FAMILY MEMBER</b>		RELATIONSHIP	
ADDRESS		TEL	
<b>BOND DETAILS</b>		BOND HOLDER	AMOUNT OUTSTANDING
PROPERTY VALUE R	INSTALMENT	R	PM
DATE PURCHASED	REGISTERED <input type="checkbox"/> OWN NAME <input type="checkbox"/> SPOUSE	RENTING	BOARDING
<b>EMPLOYER DETAILS</b>		OCCUPATION	
EMPLOYER	TEL	YRS	MTS
EMPLOYER ADDRESS		PERIOD	
SALARY DATE	PREVIOUS EMPLOYER	PERIOD	
SPOUSE EMPLOYER		PERIOD	
TEL	OCCUPATION		
<b>BANKING DETAILS – APPLICANT</b>			
BANK NAME	BRANCH NAME	BRANCH CODE	
NAME OF ACCOUNT HOLDER		ACCOUNT NO.	
<input type="checkbox"/> CREDIT CARD	<input type="checkbox"/> SAVINGS	<input type="checkbox"/> TRANSMISSION	<input type="checkbox"/> CURRENT
<b>TRADE REFERENCE</b>	BRANCH	ACCOUNT No.	INSTALMENTS
			PAID UP / CURRENT / TO BE SETTLED
LANGUAGE PREFERENCE <input type="checkbox"/> ENGLISH (PRIMARY) <input type="checkbox"/> AFRIKAANS (FOR AN EXPLANATORY VERSION)			

Signature \_\_\_\_\_

Date \_\_\_\_\_

## APPLICATION FOR FINANCE – P2P

APPLICANT INITIALS :		SURNAME:	
ID NUMBER:			
<b>HOUSEHOLD INCOME DETAILS – APPLICANT (PER MONTH)</b>			
BASIC SALARY (Gross)	R	LESS TAX	R
CAR ALLOWANCE (Gross)	R	LESS MEDICAL AID, PENSION, ETC.	R
MONTHLY COMMISSION (Gross)	R	LESS OTHER DEDUCTIONS FROM SALARY	R
INCOME OTHER THAN SALARY/WAGES (Gross)	R		R
OTHER HOUSEHOLD INCOME (Gross) Specify :	R	<b>NETT TAKE HOME PAY (A)</b>	<b>R</b>
<b>HOUSEHOLD'S EXPENSES PER MONTH:</b>			
BOND PAYMENT / RENT	R	RATES, WATER & ELECTRICITY	R
VEHICLE INSTALMENTS (EXCLUDING THOSE TO BE SETTLED NOW)	R	PERSONAL LOAN REPAYMENTS	R
CREDIT CARD REPAYMENTS	R	FURNITURE ACCOUNTS	R
CLOTHING ACCOUNTS	R	OVERDRAFT REPAYMENTS	R
POLICY / INSURANCE REPAYMENTS	R	TELEPHONE PAYMENT	R
TRANSPORT COSTS	R	FOOD AND ENTERTAINMENT	R
EDUCATION COSTS	R	MAINTENANCE	R
HOUSEHOLD EXPENSES	R	OTHER REGULAR PAYMENTS / COSTS PROVIDE DETAILS	R
	R		
<b>SUB TOTAL</b>	<b>R</b>	<b>TOTAL MONTHLY EXPENSES (B)</b>	<b>R</b>
<b>TOTAL HOUSEHOLD DISPOSABLE INCOME</b>		<b>TOTAL INCOME (A) R _____ - TOTAL EXPENSES (B) R _____ =</b>	<b>R</b> <small>Disposable Income</small>
ARE YOU CURRENTLY LIABLE AS:	<input type="checkbox"/> SURETY <input type="checkbox"/> CO-DEBTOR <input type="checkbox"/> GUARANTOR		
SPECIFY DETAILS OF DEBT:			
IF YOU HAVE SIGNED SURETY OR CO-DEBTOR PLEASE INDICATE THE FULL AMOUNT OUTSTANDING ON THE ACCOUNT/S			R
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 administration order. D. I do not have any current application 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. I. The information provided by me in this application is true and correct.			
If any of the above is incorrect give details: _____			
<b>Declaration by client:</b>			
I hereby grant the Credit Provider the right:			
i) to increase my Credit Limit once every year to accommodate any Value Added Products needed;			
ii) to authorise the Credit Provider to make enquiries about my credit record with any credit agency;			
iii) to obtain whatever information on me they might require to process this application.			
iv) I further grant whytradeinsurance the permission to utilize the information on this application and make enquiries about my credit record in order to obtain insurance quotations.			
I understand that I will be liable for a monthly service fee.			
I also authorise the Credit Provider to share my payment behaviour with any credit agency and the National Loans Register.			

Signature \_\_\_\_\_

Date \_\_\_\_\_