|  |  |
| --- | --- |
| **AUCTION FINANCE PANTONE 2718** | **Email application back to:****deline@auctionfinance.co.za****, or** **fax to: 0866 426 038. A consultant will** **contact you within 24 hours with the** **outcome.****Kms : Retail:** |
| **GOODS DESCRIPTION** | NEW | YEAR: | MAKE/MODEL: | M&M CODE  |
| USED |
| DEALER  | TEL NO.  |
| F&I CONTACT PERSON **:**  | SALES PERSON | FAX NO: |
| CASH PRICE VAT INCL. | **R** | VATABLE EXTRAS VAT INCL. INSTALMENT LEASE CONSUMER LEASE  |
| ADD COVER | **R** | RADIO/TAPE | **R** | TERM/PERIOD |
| LICENCE/REG | **R** | NUMBER PLATES | **R** | RATE-LINKED |
| WARRANTY | **R** | EXTRAS | R | OTHER |  |
| DEPOSIT/TRADE IN | **R** | RWC | **R** | OTHER |  |
| PRINCIPLE DEBT | **R** |  |
| **PERSONAL DETAILS** | TITLE  | SURNAME  | ID No |
| FULL NAMES  | INITIALS | DEPENDANTS |
|  MALE FEMALE |  MARRIED ANC COP **Date married**  |  SINGLE WIDOWED DIVORCED |
| HOME ADDRESS  | PERIOD  |
| TEL(H | TEL(W | CELL  | FAX  | E-MAIL  |
| POSTAL ADDRESS  | CODE  |
| PREVIOUS ADDRESS  | PERIOD  |
| **SPOUSE NAMES** |  **SPOUSE TEL NO :** | SPOUSE ID  |
| **NEXT OF KIN – Name and address (NOT** **RESIDING WITH YOU)** |  | RELATIONSHIP  |
|  | TEL  |
| BOND DETAILS | **BOND HOLDER ( WHICH BANK)** | AMOUNT OUTSTANDING | **R** |
| PROPERTY VALUE **R**  | INSTALMENT | R  PM | PURCHASE PRICE | **R** |
| DATE PURCHASED |  | REGISTERED OWN NAME SPOUSE | RENTING | BOARDING | **R**  |
| **EMPLOYER DETAILS** |  | OCCUPATION |
| EMPLOYER  | TEL  | **YRS** | **MTS** |
| EMPLOYER ADDRESS  | PERIOD |   |   |
| SALARY DATE |  | **PREVIOUS EMPLOYER** |  | PERIOD |   |   |
| SPOUSE EMPLOYER  | PERIOD |  |  |
| TEL  | OCCUPATION  |
| **BANKING DETAILS - APPLICANT** |  |
| BANK NAME |   | BRANCH NAME |   | BRANCH CODE |  |
| NAME OF ACCOUNT HOLDER  | ACCOUNT NO.  |
|  CREDIT CARD CHEQUE TRANSMISSION CURRENT |
| TRADE REFERENCE | BRANCH | ACCOUNT No. | INSTALMENTS | PAID UP / CURRENT / TO BE SETTLED |
|  |  |  |  |  |
|  |  |  |  |  |
| APPLICANT INITIALS :  |  | SURNAME: |  |
| ID NUMBER: |  |
| **HOUSEHOLD INCOME DETAILS – APPLICANT (PER MONTH)** |  |
| BASIC SALARY | **R** | LESS TAX | **R**  |
| CAR ALLOWANCE | **R** | LESS MEDICAL AID, PENSION, ETC. | **R** |
| MONTHLY COMMISSION | **R** | LESS OTHER DEDUCTIONS FROM SALARY | **R** |
| INCOME OTHER THAN SALARY/WAGES | **R** |  | **R** |
| OTHER HOUSEHOLD INCOME: | **R** | **NET TAKE HOME PAY** | **R** |
| **APPLICANT’S EXPENSES PER MONTH:** |
| BOND PAYMENT / RENT | R  | RATES, WATER & ELECTRICITY | R  |
| VEHICLE INSTALMENTS (EXCLUDING THOSE TO BE SETTLED) | 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 / COSTSS PROVIDE DETAILS | R |
| **SUB TOTAL** | **R** | **TOTAL MONTHLY EXPENSES (B)** | **R** |
| **TOTAL HOUSEHOLD DISPOSABLE INCOME**  | **TOTAL INCOME (A) R - TOTAL EXPENSES (B) R**  | **R****Disposable Income** |
| ARE YOU CURRENTLY LIABLE AS: |  SURETY CO-DEBTOR 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 unfity 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Declaration by client:** I hereby grant the Credit Provider the right:1. to increase my Credit Limit once every year to accommodate any Value Added Products needed;
2. to authorise the Credit Provider to make enquiries about my credit record with any credit agency;
3. to obtain whatever information on me they might require to process this application.

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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_