

Are you a public official in a position of authority?

Yes No

Yes No

Are you related to or associated with a public official in a position of authority?

Yes No

Yes No

What is the nature of the relationship or association?

Name and surname of public official in a position of authority that you are related or associated with.

Section B: Contact Details **Primary Applicant** **Co-applicant / Surety**

Home number
Cellphone number
Work number
E-mail address
Fax number
Home language
Language for correspondence

Residential Address

Street
Suburb
City
Country
Period at current address

 Postal code

Years Months

Same as primary applicant Yes No

 Postal code

Years Months

Postal Address

Same as residential address?
Street / PO Box
Suburb
City
Country
Legal notice delivery method

Yes No

 Postal code

Hand delivered Registered mail

Yes No

 Postal code

Contact and Address Details for Future Legal Correspondence (Only to be completed if different to postal address)

Street / PO Box
Suburb
City
Country

 Postal code

Street / PO Box

Suburb

City Postal Code

Country

Section C: Employment Details **Primary Applicant** **Co-applicant / Surety**

Occupation Status

Full-time employed Part-time employed
 Self-employed Temporary employed
 Home Executive Unemployed
 Pensioner

Occupation Status

Full-time employed Part-time employed
 Self-employed Temporary employed
 Home Executive Unemployed
 Pensioner

Occupational Level

Senior Management Skilled worker Junior position
 Management Semi-skilled
 Supervisor Unskilled

Occupational level

Senior Management Skilled worker Junior position
 Management Semi-skilled
 Supervisor Unskilled

Employment Details (Employed Only)

Nature of occupation

Employer Name

Company registration no

Employee number

Employment Period Years Months

Employer Contact Number

Street

Suburb

City

Country

Postal code

Percentage of income derived from own business (if any)

Are you a shareholder of your employer's business? Yes No

Percentage shareholding (if yes)

Do you work in South Africa? Yes No

Does this purchase coincide with a job change? Yes No

Were you previously employed? Yes No

Nature of occupation

Employer Name

Company registration no

Employee number

Employment Period Years Months

Employer Contact Number

Street

Suburb

City

Country

Postal code

Percentage of income derived from own business (if any)

Are you a shareholder of your employer's business? Yes No

Percentage shareholding (if yes)

Do you work in South Africa? Yes No

Does this purchase coincide with a job change? Yes No

Were you previously employed? Yes No

Previous Employment Details (Two Most Recent) **Primary Applicant** **Co-applicant / Surety**

Previous employer

Duration Years Months

Previous employer

Duration Years Months

Previous employer

Duration Years Months

Previous employer

Duration Years Months

| Section D: Credit History | Primary Applicant | Co-applicant / Surety |
|--|--|--|
| Are you currently under Administration? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Were you ever under Administration? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Has a judgement ever been taken against you? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Are you currently under debt review? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Debt counsellor name | <input type="text"/> | <input type="text"/> |
| Debt counsellor phone number | <input type="text"/> | <input type="text"/> |
| Are you currently under any debt re-arrangement? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Have you ever been declared insolvent? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Date of insolvency (dd/mm/yyyy) | <input type="text"/> | <input type="text"/> |
| If rehabilitated, date (dd/mm/yyyy) | <input type="text"/> | <input type="text"/> |
| Are you aware of any adverse credit listings? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If yes, specify | <input type="text"/> | <input type="text"/> |
| Are you currently in a credit bureau dispute? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

| Existing Suretyships | Primary Applicant | Co-applicant / Surety |
|---|--|--|
| Are you bound by any surety agreements? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If yes, specify amount* | <input type="text"/> | <input type="text"/> |
| Are you currently paying this account? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Monthly Instalment | <input type="text"/> | <input type="text"/> |
| Details of suretyship | <input type="text"/> | <input type="text"/> |
| Will you be settling this account/debt? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| New Instalment (only capture if Instalment / payment will be reduced) | <input type="text"/> | <input type="text"/> |
| Surety in favour of | <input type="text"/> | <input type="text"/> |
| * If bound by multiple surety agreements then combine the values. | | |

| Section E: Loan and Debit Order Details | | |
|---|--|---|
| Erf number / Section number | <input type="text"/> | Home Loan Instalment Debit Order Details |
| Street / Complex | <input type="text"/> | Bank Name <input type="text"/> |
| Suburb | <input type="text"/> | Bank Account No. <input type="text"/> |
| New Loan / Further Loan Amount Required | R <input type="text"/> | Preferred debit order date <input type="text"/> |
| Amount to be registered | R <input type="text"/> | |
| Do you require an additional amount to be registered for solar energy? (Solar finance offering only available from FNB) | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Solar energy loan amount required (Min R50k, max 15% purchase price) | R <input type="text"/> | |

Section F: Monthly Income, Deductions and Expenses

| Monthly Income | Primary Applicant | Co-applicant / Surety | Primary Applicant | Co-applicant / Surety |
|--------------------------|------------------------|------------------------|----------------------------------|------------------------|
| Gross salary | R <input type="text"/> | R <input type="text"/> | Entertainment allowance | R <input type="text"/> |
| Average commission | R <input type="text"/> | R <input type="text"/> | Income from sureties | R <input type="text"/> |
| Investment income | R <input type="text"/> | R <input type="text"/> | Housing subsidy | R <input type="text"/> |
| Rental income | R <input type="text"/> | R <input type="text"/> | Maintenance/ alimony | R <input type="text"/> |
| Car allowance | R <input type="text"/> | R <input type="text"/> | Average overtime (past 6 months) | R <input type="text"/> |
| Travel allowance | R <input type="text"/> | R <input type="text"/> | | |
| Other income description | | R <input type="text"/> | Co-applicant / Surety | |
| Other income description | | R <input type="text"/> | R <input type="text"/> | |
| Total income | | R <input type="text"/> | Total income | |
| | | R <input type="text"/> | R <input type="text"/> | |

| Monthly Deductions | Primary Applicant | Co-applicant / Surety | Primary Applicant | Co-applicant / Surety |
|--------------------------------|------------------------|------------------------|-------------------------|------------------------|
| Tax (PAYE/SITE) | R <input type="text"/> | R <input type="text"/> | UIF | R <input type="text"/> |
| Pension | R <input type="text"/> | R <input type="text"/> | Medical Aid | R <input type="text"/> |
| Other deductions description | | R <input type="text"/> | Co-applicant / Surety | |
| Other deductions description | | R <input type="text"/> | R <input type="text"/> | |
| Total deductions | | R <input type="text"/> | Total deductions | |
| | | R <input type="text"/> | R <input type="text"/> | |
| Income after deductions | | R <input type="text"/> | | |

| Monthly Expenses | Primary Applicant | Co-applicant / Surety | Primary Applicant | Co-applicant / Surety |
|--|------------------------|------------------------|---|------------------------|
| Rental (only if ongoing) | R <input type="text"/> | R <input type="text"/> | Transport, petrol and car maintenance | R <input type="text"/> |
| Maintenance / Alimony | R <input type="text"/> | R <input type="text"/> | Education | R <input type="text"/> |
| Rates and taxes / Levies | R <input type="text"/> | R <input type="text"/> | Medical (excl. medical aid salary deductions) | R <input type="text"/> |
| Water and electricity | R <input type="text"/> | R <input type="text"/> | Cellphone / data | R <input type="text"/> |
| Assurance (life, retirement annuities, insurance and funeral policies) | R <input type="text"/> | R <input type="text"/> | DSTV, Netflix etc | R <input type="text"/> |
| Groceries | R <input type="text"/> | R <input type="text"/> | Security | R <input type="text"/> |
| Other expenses description | | R <input type="text"/> | Co-applicant / Surety | |
| Other expenses description | | R <input type="text"/> | R <input type="text"/> | |

| | | | | | | | |
|-----------------------|----------------------|-------------------------------------|----------------------|-----------------------|----------------------|-------------------------------------|----------------------|
| Total expenses | <input type="text"/> | Net surplus income / deficit | <input type="text"/> | Total expenses | <input type="text"/> | Net surplus income / deficit | <input type="text"/> |
|-----------------------|----------------------|-------------------------------------|----------------------|-----------------------|----------------------|-------------------------------------|----------------------|

| | | | |
|--------------------------|----------------------|------------------------------|----------------------|
| Signed Primary applicant | <input type="text"/> | Signed Co-applicant / Surety | <input type="text"/> |
| Date (dd/mm/yyyy) | <input type="text"/> | Date (dd/mm/yyyy) | <input type="text"/> |

Section G: Primary Transactional Bank Account Details And Contractual Expenses

Primary Applicant **Co-applicant / Surety**

Bank / Financial Institution

Branch

Account type (only cheque or savings)

Account holder name

Is this account in the name of the Legal Entity? Yes No

Business bank account? Yes No

Account number

Balance Debit (-) Credit (+)

Bank / Financial Institution

Branch

Account type (only cheque or savings)

Account holder name

Is this account in the name of the Legal Entity? Yes No

Business bank account? Yes No

Account number

Balance Debit (-) Credit (+)

For FNB, RMB and Standard Bank Primary Banked Customers Only: Your Bank has requested the opportunity to consider your home loan application first for a period of time. I consent to this arrangement: Yes No Yes No

Home Loans **Primary Applicant** **Co-applicant / Surety**

| | Account 1 | Account 2 |
|--|--|--|
| Bank / Financial Institution | <input type="text"/> | <input type="text"/> |
| Branch | <input type="text"/> | <input type="text"/> |
| Account holder name | <input type="text"/> | <input type="text"/> |
| Outstanding balance | <input type="text"/> | <input type="text"/> |
| Monthly installment/ Minimum payment | <input type="text"/> | <input type="text"/> |
| Are you selling the existing property? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| New installment (if reduced) | <input type="text"/> | <input type="text"/> |

| | Account 1 | Account 2 |
|--|--|--|
| Bank / Financial Institution | <input type="text"/> | <input type="text"/> |
| Branch | <input type="text"/> | <input type="text"/> |
| Account holder name | <input type="text"/> | <input type="text"/> |
| Outstanding balance | <input type="text"/> | <input type="text"/> |
| Monthly installment/ Minimum payment | <input type="text"/> | <input type="text"/> |
| Are you selling the existing property? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| New installment (if reduced) | <input type="text"/> | <input type="text"/> |

Other Bank / Finance Account Details (eg. credit cards, vehicle finance, personal loans) - Primary Applicant

| Bank / Financial Institution | Account type | Current Balance | Monthly Payment | Will this account be settled? | Is this a Business account? | Is this a Legal Entity account? |
|------------------------------|----------------------|----------------------|----------------------|--|--|--|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Co-applicant / Surety

| Bank / Financial Institution | Account type | Current Balance | Monthly Payment | Will this account be settled? | Is this a Business account? | Is this a Legal Entity account? |
|------------------------------|----------------------|----------------------|----------------------|--|--|--|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Retail Accounts **Primary Applicant** **Co-applicant / Surety**

| Name of Retail Store | Current Balance | Monthly Payment | Will this account be settled? |
|----------------------|----------------------|----------------------|--|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

| Name of Retail Store | Current Balance | Monthly Payment | Will this account be settled? |
|----------------------|----------------------|----------------------|--|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

