

CREDIT APPLICATION FORM

Amount Required	Business Name
Principal Trading Name	
Principal Business Address	Registered Address
Company Type Public <input type="checkbox"/> Private <input type="checkbox"/> Other <input type="checkbox"/>	SIC Code
Ultimate Owners	
1)	2)
3)	4)
Tel/Fax	Date Business Established
Bankers	No. Employees
Principle Website	
Primary Business Activity	

PLEASE ALSO PROVIDE:

- Last 3 years financials (balance sheet/ profit and loss)
- Details of Vehicle Fleet (vehicle type, age, whether financed or owned)

CREDIT APPLICATION FORM

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Please return this application by email or fax along with the following documents:

Drivers Licence

Recent Payslip

Rates notice or Rental Agreement

PERSONAL DETAILS

Title	Surname	Given Name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
D.O.B	No. of Dependents	Marital Status
<input type="text"/>	<input type="text"/>	Single <input type="checkbox"/> Defacto <input type="checkbox"/> Married <input type="checkbox"/>
Current Home Address	Suburb	State
<input type="text"/>	<input type="text"/>	<input type="text"/>
Postcode	How long have you been at this address?	If less than 2 year; previous address
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Postcode	How long have you been at this address?	
<input type="text"/>	<input type="text"/>	
Marital Status		
Mortgage <input type="checkbox"/>	Renting <input type="checkbox"/>	Other (please specify) <input type="text"/>
Citizenship Status	Home Phone	Mobile
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email	Drivers Licence Number	
<input type="text"/>	<input type="text"/>	

REFERENCES

REFERENCE 1

Name
<input type="text"/>
Phone
<input type="text"/>
Location
<input type="text"/>

REFERENCE 2

Name
<input type="text"/>
Phone
<input type="text"/>
Location
<input type="text"/>

Accountant (if applicable)

Company Name	Name	Phone Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

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FINANCIAL DETAILS

MONTHLY INCOME (AFTER TAX)

Applicant Income	Spouse/Partner/Defacto Income
\$	\$
Rental Income	
\$	
Other:	
\$	
Total Monthly Income	
\$	

MONTHLY EXPENDITURE

Mortgage Payments	Rental Payments
\$	\$
Other Loan Payments	Monthly Living Expenditure
\$	\$
Child Support Payments	
\$	
Total Monthly Expenditure	
\$	

ASSETS

Primary Residence (VALUE)	Other House/Land
\$	\$
Motor Vehicles	Household Effects
\$	\$
Cash In Bank	
\$	
Other:	
\$	
Total Assets	
\$	

LIABILITIES

Mortgage (Primary Residence)	Credit Card Limit
\$	\$
Bank	Other Loan Amount
\$	\$
Other:	
\$	
Other:	
\$	
Total Monthly Liabilities	
\$	

Details of Other Loans (if applicable)

Loan	Financial Institution	Loan Amount
		\$
Loan	Financial Institution	Loan Amount
		\$

Primary Bank	Branch	Account Type
Mortgager/Landlord		Landlord Phone

I declare that the information provided is true and accurate to the best of my knowledge

Signed	Date