

Novated Lease Application



Submit

Please complete, sign, date and return this form to your Easi consultant along with copies of:

your drivers license

a recent payslip

a recent payslip belonging to your spouse/partner/de facto (if applicable)

your rates notice or your current residential agreement

Personal Details

Title	Full Name

DOB (DD/MM/YYYY)	Drivers Licence Number

Marital Status	Single	De facto	Married	Separated	Number of Dependants

Current Home Address	Postcode

How long have you been at this address?

If less than 5 years; Previous Address	Postcode

How long have you been at this address?

In regards to your current address; are you:

Mortgage Renting Other If other please specify:

Citizenship Status	Primary Email Address

Daytime Phone Number	Mobile Phone Number	Alternative Email Address

Employment Details

Employer	Employer Phone Number

Job Title	Length of Employment

Employer Full Address	Postcode

Employment Details Continued

If you have been with your current employer for less than five years please specify previous employer:

Previous Employer		
<input type="text"/>		
Job Title	Employer Phone Number	Length of Employment (YY/MM)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Full Address		Postcode
<input type="text"/>		<input type="text"/>

References

Must not be someone who resides at the same address as you.

Reference 1:

Full Name	Phone Number
<input type="text"/>	<input type="text"/>
Full Address	Postcode
<input type="text"/>	<input type="text"/>

Reference 2:

Full Name	Phone Number
<input type="text"/>	<input type="text"/>
Full Address	Postcode
<input type="text"/>	<input type="text"/>

Financial Details

Please provide details as **monthly**, after-tax.

Applicants Monthly Income	\$	<input type="text"/>
Spouse/Partner/De facto Monthly Income (Please provide payslip)	\$	<input type="text"/>
Monthly Rental Income*	\$	<input type="text"/>
Other Monthly Income (Specify Type)*		<input type="text"/>
	\$	<input type="text"/>
	\$	<input type="text"/>
	\$	<input type="text"/>
	\$	<input type="text"/>
	\$	<input type="text"/>
Total Monthly Income	\$	<input type="text"/>

*Proof of additional income may be required.

Assets

Savings/Cash in Bank	\$	<input type="text"/>
Primary Residence Value	\$	<input type="text"/>
Other House/Land Value	\$	<input type="text"/>
Motor Vehicles	\$	<input type="text"/>
Household Effects	\$	<input type="text"/>
Other Assets (Specify Type)		<input type="text"/>
	\$	<input type="text"/>
	\$	<input type="text"/>
	\$	<input type="text"/>
	\$	<input type="text"/>
Total Assets	\$	<input type="text"/>

Liability Statement

Financial Institution (Include Account Type)	Balance Owing	Minimum Monthly Repayment
Mortgage(s) - specify home or investment loan	\$	\$
	\$	\$
	\$	\$
Rent/Board (if applicable)		\$

Financial Institution	Credit Limit	Balance Owing	Minimum Monthly Repayment
Credit Cards	\$	\$	\$
	\$	\$	\$
Personal & Other Loans		\$	\$
		\$	\$
Monthly Living Expenses (e.g. food, entertainment, bills, insurance, etc.)			\$

Other Monthly Expenses	Description	Value
		\$
		\$
	Total	\$

Declaration

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

Signed		Date (DD/MM/YYYY)

Please sign forms by hand, digital signatures not accepted.