



Fax Number	
Email Address	

Individual Application

Individual Applicant	<input type="checkbox"/>	Sole Proprietor	<input type="checkbox"/>	Surety/Guarantor	<input type="checkbox"/>
Instalment Sale	<input type="checkbox"/>	Lease	<input type="checkbox"/>	Rental	<input type="checkbox"/>
New	<input type="checkbox"/>	Used	<input type="checkbox"/>	CustomDrive	<input type="checkbox"/>
Co-Debtor	<input type="checkbox"/>	Surety ID (if applicable)	<input type="checkbox"/>		<input type="checkbox"/>

Personal Details												
Title		Surname					Dealer Code					
Initials		First Name					Originating Branch					
Middle Name/s						Input Branch						
ID/Passport				Tax No.			Marketer					
New ID				VAT No.			Marketer's ID					
Citizenship		SA		Other			Home No			Lead Provider		
Trading as						Lead Provider ID						
Permit No.			Cell No				Tenant					
Permit Type			Email				Lodger					
Expiry date			Gender	M	F	Married	Divorced	Single	Widowed			
Issued Date			Graduate?	Y	N	Date Married		ANC	COP	Other		
Country of Issue						Driver License						
Country of Res.			Language	E	A	Other	Ethnic Group	A	B	C	W	
Home Address								Period	Y	M		
Postal Address								Postal				
Previous Address								Period	Y	M		
Employment Details												
Employer's Name					Phone			Cont. No				
Address								Postal				
Industry Type			Employee No.			Occupation			Period	Y	M	
Previous Employer								Period	Y	M		
Spouse's Details												
Spouse Name/Surname							ID			DOB		
Relative's Details												
Relationship			Phone			Surname			First Name			
Address								Postal				
Home Ownership												
Own Property?		Y	N	In your Name?		In Your Spouse's?		Both?	House	Townhouse	Flat	
Bond/Rental PM			R	Purchase Price			R	If Flexi/Access Bond, Total Facility R				
Bond Outstanding			R	Current Val.			R	Erf No.				
Bond Holder Name												
Banking Details												
Account Type		Cheque	Savings	Transmission		Branch Code			Account No.			
Bank Name						Account Holders Name						
Existing accounts with other Credit Provider/Financial Institutions												
Company Name			Account No.		Monthly Ins.		Current	Paid Up	To be Settled			

Name		Address				Postal	
Income Details (Proof of all declared income will be required)							
Salary Date		Payment Date			Amount		
Applicants Basic Salary excl Car Allow. & Commission etc.					R		
+ Car Allowance					R		
+ Regular Income Other than Salary/Shift Allowance/Overtime etc.					R		
+ Monthly Commission					R		
Total Monthly Income					R		
- UIF					R		
- Medical Aid					R		
- Pension					R		
- PAYE					R		
- Other Monthly Payroll Deductions					R		
Total Monthly Payroll Deductions					R		
Net Take Home Pay					R		
+ Other Source of Income – Maintenance or Rent only					R		
**Total Monthly Expenses					R		
Applicants Disposable Income					R		
Spouses Net Income					R		
Total Household Expenses							
Bond Payment/Rent		R		Policy/Insurance Repayments		R	
Rates, Water, Electricity		R		Telephone & Cell Phone Payments		R	
Vehicle Instalments (Excluding those to be settled)		R		Transport Costs Train/Taxi/Bus etc.		R	
Personal Loan Repayments		R		Transport Costs Petrol/Diesel etc.		R	
Credit Card Repayments		R		Food and Entertainment		R	
Furniture Accounts		R		Education Costs		R	
Clothing Accounts		R		Maintenance		R	
Overdraft Repayments		R		Household Expenses		R	
		R		Other Expenses not Listed above		R	
** Total Monthly Expenses		R		Are you liable as:		Surety	
				Guarantor		Co-Debtor	
Specify Details of liability							
Insurance-Bank VAPS Instalment Sale/Lease Inside the NCA							
Credit Life		Monthly					
Cover Plus		Monthly					
Extended Warranty		Term					
Other							
Insurance-Bank VAPS Rental – Outside the NCA							
Credit Life		Monthly		Term		Service & Maintenance	
Cover Plus		Monthly		Annual		Term	
Motor Comprehensive		Monthly		Annual			
Other							

Comprehensive Vehicle Insurance												
Insurance Company Name								Phone				
Policy No.								Monthly		Annual		
Broker Name								Phone				
Transaction Details												
Goods Description												
Year Model			M&M Code				Dealer Name Kulu Motors.					
Scheme Code			Buy line Code				Dealer Phone 021 506-7920					
Purpose of Goods Business			Private		Taxi		Commerce		Salesman			
Contract Period (Mths)			Payment Frequency (Mths)			Bi-annual			Quarterly		Monthly	
Payment Mode Advance			Arrears		Cash		Debit Order		Special Requirements			
Balloon Payment	%	Balloon Payment			R			Odometer Km's				
Residual Value	%	Residual Payment			R			Initiation Fees to be Financed		Y	N	
Proposed Rate	%	Fixed		Linked		Take a Break Month						
TOW BAR	R	WARRANTY			R			Selling Price (VAT Inclusive)		R		
Extras	R	SMART			R			Initial Fuelling Charges		R		
Extras	R	X-SURE TYRES			R			Licence and Registration Costs		R 2295		
Extras	R	Motor One			R			Admin fee		R 1095		
Extras	R	CANOPY			R			Number Plates		R 295		
Total Extras	R	Total VAPs			R			Other		R		
Source of Deposit								Less Deposit / Initial Rental		R		
								Amount Financed		R		
Know Your Customer												
Face to Face on-Site			Face to Face Off-Site				Remote Other					

I confirm that:

- (a) **I do not have applications pending for credit, nor open quotations as envisaged in section 92 of the National Credit Act.**
- (b) I am not a minor. -
- (c) A court has never declared me mentally unfit.
- (d) I am not subject to an Administration Order.
- (e) I do not have any current application pending for debt restructuring or alleviation.
- (f) I do not have any current debt re-arrangement in existence.
- (g) I have not previously applied for a debt re-arrangement.
- (h) I am not under sequestration.

I understand that I will be liable for a monthly service fee.

I hereby consent to this Credit Provider making enquiries regarding my credit history with any credit bureau.

I consent to this Credit Provider reporting the conclusion of any credit agreement with me to the National Loans Register in compliance with this Credit Provider's obligation under the National Credit Act.

I hereby declare that the information provided by me is true and correct.

Signature of Applicant _____

Date _____