

Applicant Information Form

Please fill in as much information as you can in below fields to best of your knowledge. This will help us in finding best possible options for your loan services.

Loan Amount Sought:

Purchase Price or Property Value:

	APPLICANT 1	APPLICANT 2
Title: (please select)	<input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Ms <input type="radio"/> Dr	<input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Ms <input type="radio"/> Dr
First and middle names:		
Surname:		
Marital status:	<input type="radio"/> Married <input type="radio"/> Single <input type="radio"/> De-Facto <input type="radio"/> Separated	<input type="radio"/> Married <input type="radio"/> Single <input type="radio"/> De-Facto <input type="radio"/> Separated
Residential status:	<input type="radio"/> Australian Citizen <input type="radio"/> Permanent Resident <input type="radio"/> Temporary Resident <input type="radio"/> Visitor	<input type="radio"/> Australian Citizen <input type="radio"/> Permanent Resident <input type="radio"/> Temporary Resident <input type="radio"/> Visitor
Date of birth:		
Drivers licence:	No: _____ State: _____ Expiry Date: _____	No: _____ State: _____ Expiry Date: _____

CURRENT RESIDENTIAL ADDRESS (If less than 3 years, add additional addresses)

Address:		
How long have you been at this address:	Years _____ Months _____	Years _____ Months _____
Contact phone numbers:	Home: _____ Work: _____ Mobile: _____ Fax: _____	Home: _____ Work: _____ Mobile: _____ Fax: _____
Email address:		
Status:	<input type="radio"/> Owner <input type="radio"/> Renting <input type="radio"/> Boarding <input type="radio"/> Living with parents <input type="radio"/> Owner with mortgage	<input type="radio"/> Owner <input type="radio"/> Renting <input type="radio"/> Boarding <input type="radio"/> Living with parents <input type="radio"/> Owner with mortgage
If renting, landlord's details and phone number:		
Previous address details:		

EMPLOYMENT (If less than 3 years, add additional employers)

Employer's name (in full):		
Time with current employer:	Years _____ Months _____	Years _____ Months _____
Status:	<input type="radio"/> Full-time <input type="radio"/> Permanent part-time <input type="radio"/> Casual <input type="radio"/> Self-employed	<input type="radio"/> Full-time <input type="radio"/> Permanent part-time <input type="radio"/> Casual <input type="radio"/> Self-employed
Occupation/Job title:		
Current employer address:		
Contact details:	Name _____ Phone number _____	Name _____ Phone number _____

Income – gross annual salary (before tax):	\$	\$
Gross overtime/penalties (before tax):	\$	\$
Other income – pensions, FTB (P.A. before tax):	\$	\$
Previous employer's details (if less than 3 years in current job)		

ASSETS

Properties owned

	Property 1	Property 2
Address:		
Value:		
In the name of:	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2

Savings account and term deposits

Financial institution:						
Account type:						
In the name of:	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2
Balance:						

Motor vehicles

	Vehicle 1	Vehicle 2	Vehicle 3
Make and model:			
Year built:			
In the name of:	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2
Value:			

Household items

Home contents insured value:	
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Other assets

Value of Super, boat, shares etc:			
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LIABILITIES: MORTGAGES

	Mortgage 1	Mortgage 2	Mortgage 3
Name of financial institution:			
Original loan amount:			
Account number:			
In the name of:	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2
Amount currently owing:			
Minimum monthly repayment:			

OTHER LOANS

	Loan 1	Loan 2	Loan 3
Name of financial institution:			
Original loan amount:			
Account type:			
In the name of:	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1 <input type="radio"/> Applicant 2
Amount currently owing:			
Monthly repayment:			
Is loan being paid out?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

CREDIT CARDS

	Card 1	Card 2	Card 3	Card 4
Name of financial institution:				
Credit limit:				
Amount currently owing:				
Type of card (Visa, Mastercard, Amex):				