

CLIENT INFORMATION SHEET - Main & Co-Applicant

PERSONAL DETAILS

Applicant 1

Title Mr Mrs Ms Miss Dr
 Prof Rev Adv

First Names _____
Surname _____
ID/Passport No. _____
Date of Birth _____

Gender Male Female

Marital Status Single Married ANC (with Accrual)
 Married ANC (without Accrual)
 Married COP Divorced
 Widowed Other _____

Ethnic Group African Asian Coloured
 White Indian

City of Birth _____

No of Dependants _____
Country of Marriage _____
Country of Birth _____

Current Residential Status Owner Tenant
Boarder Living with Parents Other _____

Are you a First Time Home Buyer? Yes No

Are you a Smoker? Yes No

Highest Level of Education Matric Diploma
Degree Certificate Honours Masters
Doctorate Pre-grade 12

Nationality _____

SA Citizen Yes No

SARS Income Tax Number _____

Do you have a tax obligation outside of South Africa?
Yes No

If Yes:
Foreign Tax Number _____
Foreign Tax Country _____

Applicant 2

Title Mr Mrs Ms Miss Dr
 Prof Rev Adv

First Names _____
Surname _____
ID/Passport No. _____
Date of Birth _____

Gender Male Female

Marital Status Single Married ANC (with Accrual)
 Married ANC (without Accrual)
 Married COP Divorced
 Widowed Other _____

Ethnic Group African Asian Coloured
 White Indian

City of Birth _____

No of Dependants _____
Country of Marriage _____
Country of Birth _____

Current Residential Status Owner Tenant
Boarder Living with Parents Other _____

Are you a First Time Home Buyer? Yes No

Are you a Smoker? Yes No

Highest Level of Education Matric Diploma
Degree Certificate Honours Masters
Doctorate Pre-grade 12

Nationality _____

SA Citizen Yes No

SARS Income Tax Number _____

Do you have a tax obligation outside of South Africa?
Yes No

If Yes:
Foreign Tax Number _____
Foreign Tax Country _____

CONTACT DETAILS

Cellphone No. _____
Work Phone No. _____
E-Mail Address _____
Residential Address _____

Postal Address (if different) _____

Date at Current Residential Address _____

Cellphone No. _____
Work Phone No. _____
E-Mail Address _____
Residential Address _____

Postal Address (if different) _____

Date at Current Residential Address _____

SOLVENCY DETAILS

Have you been declared Insolvent? Yes No
If Yes, Date of Insolvency _____

Have you been Rehabilitated? Yes No
If Yes, Date of Rehabilitation _____

Have you been declared Insolvent? Yes No
If Yes, Date of Insolvency _____

Have you been Rehabilitated? Yes No
If Yes, Date of Rehabilitation _____

SOLVENCY DETAILS

Applicant 1

Have you ever had a dispute with the Credit Bureau?

Yes No

Have you ever had a Judgement? Yes No

Have you ever been under Administration order?

Yes No

Are you currently under Debt Review/in Debt Counselling?

Yes No

Do you currently have a debt arrangement in place?

Yes No

Applicant 2

Have you ever had a dispute with the Credit Bureau?

Yes No

Have you ever had a Judgement? Yes No

Have you ever been under Administration order?

Yes No

Are you currently under Debt Review/in Debt Counselling?

Yes No

Do you currently have a debt arrangement in place?

Yes No

EMPLOYMENT DETAILS

Employment Status

Full Time Employed Self-Employed Contract Worker
Retired/Pensioner Home Executive

Occupation _____

Employer Name _____

Employer Physical Address _____

Period Employed at Current Employer _____

Previous Employment (if less than 3 years at current employment and it is not your first job)

Previous Employer Name _____

Previous Employment Occupation _____

Previous Employment Period _____

Employment Status

Full Time Employed Self-Employed Contract Worker
Retired/Pensioner Home Executive

Occupation _____

Employer Name _____

Employer Physical Address _____

Period Employed at Current Employer _____

Previous Employment (if less than 3 years at current employment and it is not your first job)

Previous Employer Name _____

Previous Employment Occupation _____

Previous Employment Period _____

PRIMARY BANK ACCOUNT

Bank _____

Branch Name _____

Account No. _____

Account Type Cheque Savings

Account Holder _____

Bank _____

Branch Name _____

Account No. _____

Account Type Cheque Savings

Account Holder _____

LIVING EXPENSES (EXCLUDING CONTRACTUAL DEBT)

Assurance (Life, Retirement Annuities) _____

Cellphone _____

Domestic Wages _____

Education _____

Groceries _____

Insurance & Funeral Policies _____

DSTV, Netflix, Showmax etc _____

Maintenance _____

Medical (if not a salary deduction) _____

Petrol & Transport _____

Rates & Taxes/Levies _____

Rental (exclude if this payment will fall away) _____

Security _____

Telephone & ISP/WiFi _____

Water & Lights _____

Other (specify) _____

Total Living Expenses _____

Assurance (Life, Retirement Annuities) _____

Cellphone _____

Domestic Wages _____

Education _____

Groceries _____

Insurance & Funeral Policies _____

DSTV, Netflix, Showmax etc _____

Maintenance _____

Medical (if not a salary deduction) _____

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Other (specify) _____

Total Living Expenses _____