

Juristic Application for Finance

Type of Entity
 CO CC Partnership Trust Club/Church Other
 If trust, no. Trustees ___ Any Trustee a juristic person? Y
 % Black owned ___ Co/CC/Trust Reg no _____
 Trading name _____
 Co/CC/Trust name (Reg Name) _____
 Tax no. _____ Vat no. _____
 Holding Company registration nr _____
 Holding Company name _____
 Address: (yrs ___ Months ___) _____
 Suburb _____ Postal Code _____
 Postal Address _____
 Suburb _____ Postal Code _____
 Landlords Details:
 Landlord's Name: _____
 Landlord Address: _____
 Suburb _____ Postal Code _____

Dealer Code _____
 Marketers Code _____

Registered Office Address: _____
 No years in Business ___ Nature of Business _____
 Tel no _____ Fax no _____
 e mail address _____

Authorised signatories as per resolution

Name	ID No	Designation

Banking Details: Banker's Name _____
 Branch _____ branch code _____
 A/C No: _____
 Name of Auditors/ bookkeepers: _____
 Auditor's contact person _____ Tel no _____
 Ann turnover: R _____ Net Asset val: _____

Indicate if prepared to guarantee facility / deal

Full Names & ID no of all Directors/Members/Partners/Trustees

Name	ID No	Y/N	%Share

Preious or Current Amounts owing to Financial Institutions:

Name	Acc no.	Instal Amount	Bal owing

Description of other Property registered in Company Name:
 Stand no. _____ Suburb _____
 Bondholder Name _____
 Bondholder Adress _____
 Purchase Price R _____ Date of Purchase _____
 Present value R _____ Outst valae - bond R _____

Foreign Controlled? Y N Percentage? % _____
 Contact Person _____ Designation _____

Transaction Type:
 Instalment Sale Lease Rental Term Loan
 Period _____ Months _____
 NACM Rate _____ %

Financial Details:

Selling Price (vat inc)	R _____
Extras Description _____	R _____
_____	R _____
_____	R _____
_____	R _____
Total of Extras	R _____
Sub Total	R _____
Insurance	R _____
Insurance	R _____
Insurance	R _____
Less Deposit / Initial Rental	R _____
Principal Debt	R _____
Trade Price R _____	Retail Price R _____
Residual / baloon Value R _____	
Initiation Fees to be finance Y <input type="checkbox"/> N <input type="checkbox"/>	

Do you require a Fuel & Maintenance Facility? Y N

Transaction Details:
 Supplier/ Dealer Name _____
 Dealer Tel No _____
 Contact Name: _____
 Tel No _____
 Goods Description _____

Insurance Company/ Broker: _____
 Policy No _____ Renewal Date _____
 Confirmed By _____ Tel no _____

I/We the undersigned hereby authorise this Credit Provider to contact my/our Brokers and or auditors and I/we authorise my/our brokers/auditors to disclose to this Credit Provider, detail and copies of my/our accounts and financial statements
 I/We the undersigned hereby consent to this Credit Provider making enquiries regarding my/our credit history with any credit bureau
 The Bankers/Auditors may disclose confidential information regarding my/our accounts and financial position to this Credit Provider and provide them with copies of my/our financial statements.
 I/We do not have applications pending for credit, nor open quotations as envisaged in section 92 of the National Credit Act.
 I/We confirm herewith that I/We are duly authorized to consent to the above.

SIGNATURE	NAME	DESIGNATION	DATE
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