

**APPLICATION FORM – PRIVATE AND CONFIDENTIAL**

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PERSONAL INFORMATION						
TITLE:	FIRST NAMES:				SURNAME:	
INITIALS:	ID:				ETHNIC GROUP:	
PHYSICAL ADDRESS:						
PROVINCE:			CODE:	PERIOD AT ADDRESS:		
POSTAL ADDRESS:						
TELEPHONE H:			W:	C:		
EMAIL:						
MARITAL STATUS:	Married in Community	Married Antenuptual	Married Tribal	Single	Divorced	Widow/er

EMPLOYMENT						
Employer:				Employee nr:		
Employer address:						
Occupation:				Department:		
Start date:	Salary date:	Paid:		Monthly	Weekly	Fortnightly
Status:	Perman	Part time	Self Employed	Contract	Contract end date:	Open ended contract
Salary (HR) Person:				Salary HR Tel no:		

SPOUSE / PARTNER						
Title:	First Names:				Surname:	
ID:					Occupation:	
TELEPHONE H:			W:	C:		
Employer:				Gross salary:		

1. NEXT OF KIN (NOT LIVING AT THE SAME ADDRESS)						
Title:	First Names:				Surname:	
Contact nr:				Relationship:		
Physical Address:						

2. NEXT OF KIN (NOT LIVING AT THE SAME ADDRESS)						
Title:	First Names:				Surname:	
Contact nr:				Relationship:		
Physical Address:						

**AFFORDABILITY ASSESSMENT**

<b>Gross salary:</b>	<b>Nett salary:</b>	<b>Other income:</b>
<b>ONLY LIST THE MONTHLY PAYMENT/INSTALLMENT THAT YOU AS APPLICANT MUST PAY PER MONTH</b>		
<b>Personal loans:</b>	<b>Clothing accounts:</b>	<b>Car install:</b>
<b>Credit cards:</b>	<b>Furniture:</b>	<b>Home loans:</b>
<b>Phone contract:</b>	<b>Other phone exp:</b>	<b>Rent:</b>
<b>Municipal acc:</b>	<b>Electricity:</b>	<b>Groceries:</b>
<b>School fees:</b>	<b>Day care:</b>	<b>After school :</b>
<b>Transport/fuel:</b>	<b>Insurance:</b>	<b>Policies:</b>
<b>Other:</b>	<b>Other:</b>	<b>Other:</b>

<b>Do you have any garnish orders on your payslip?</b>	<b>Yes</b>	<b>No</b>	<b>If yes, how many?</b>					
<b>Do you have any Judgements on your payslip?</b>	<b>Yes</b>	<b>No</b>	<b>If yes, how many?</b>					
<b>Are you: Under Administration ?</b>	<b>Yes</b>	<b>No</b>	<b>Sequestration ?</b>	<b>Yes</b>	<b>No</b>	<b>Debt counselling ?</b>	<b>Yes</b>	<b>No</b>

**BANKING DETAILS**

<b>Name of bank:</b>	<b>Branch name:</b>
<b>Account holder:</b>	<b>Branch code:</b>
<b>Account nr:</b>	<b>Type of account: Savings    Cheque    Mzanzi</b>

I the undersigned, hereby confirm that all data contained on this application form were given freely and are true and correct to the best of my knowledge.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**PLEASE SUBMIT WITH APPLICATION**

**COPY OF ID & DRIVERS LICENCE,**

**PROOF OF RESIDENTS (not bankstatements , we need lease agreement or utility bill)**

**Proof of Employment (Latest Pay-Slip) (Self-Employed - Copy of CK Document)**

**3 Month's Bank-Statements (6 Months if Self-Employed)**

