



Vehicle Solutions

for bank declined clients

APPLICATION FORM

PERSONAL DETAILS

Title:					Language:		
Surname:					ID Number:		
Full Name:					Driver Licence (Code & Issue date):		
Home Tel Number:					Cellular Number:		
Work Tel Number:					Home Address:		
Marital Status:	Single	Married	Divorced	Widowed	Suburb and City:		
Email Address:					Postal Code:		
Fax Number:					Where parked overnight:		
Spouse Name:					Spouse ID:		
Cellular Number:					Work Tel Number:		

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Surname:			Full Names:		
Address:			Tel Number:		
			Relationship:		

EMPLOYER DETAILS

Employer:			Tel Number:		
Employer Address:			Salary Date:		
Employer Website:			Period employed:	Y / M	
Occupation:			Previous Employer:		
Spouse Employer:			Tel Number:		
Occupation:			Period employed:	Y / M	

BANKING DETAILS

Details Required	Applicant	Bond (if any)	Credit Card (if any)
Account Name:			
Bank:			
Account Number:			
Reference:			

INSURANCE INFORMATION

Vehicle usage:	Private	Business	No Claims Bonus:	Yes	No
Existing Insurance:	Yes	No	IF YES: No of Years:		
IF YES:			(Please provide proof)		
Over 3 years?	Yes	No			
IF YES:					
Name of Insurer:			IF NO: Details of any claims/losses/accidents in the last 3 years:		
Number of years:					

This done and signed at _____ on this the _____ day of _____ 20_____.

APPLICANT

DATE

PLEASE SUBMIT WITH APPLICATION

Copy of ID & Driver's Licence:

Proof of Residence:

3 Months Bank Statements:

Last Salary Advice: