

CAIRNS | FINANCE

Specialists in lending

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B Mundy Pty Ltd atf Scott Smith Family Trust t/as

Cairns Finance ABN 70 538 583 179

Australian Credit Licence 415600

Loan Application

Mr / Mrs / Ms / Miss / Other	Mr / Mrs / Ms / Miss / Other
Surname: _____	Surname: _____
Given Names _____	Given Names _____
Date of Birth _____	Date of Birth _____
Marital Status: _____	Marital Status: _____
No. of dependants _____	No. of dependants _____
Age of dependants _____	Age of dependants _____
Drivers licence No: _____	Drivers licence No: _____
Issued by: _____ Exp Date: _____	Issued by: _____ Exp Date: _____
E-mail Address: _____	E-mail Address: _____
Home Address: _____	Home Address: _____
Postal Address _____	Postal Address: _____
Phone (H) _____	Phone (H) _____
(W) _____	(W) _____
(M) _____	(M) _____
(F) _____	(F) _____
Permanent Australian Resident: Yes / No	Permanent Australian Resident: Yes / No
Residential Status Own/Living with Relatives/ Renting / Supplied by Emp	Residential Status Own/Living with Relatives/ Renting / Supplied by Emp
Name of Owner/Agent _____	Name of Owner/Agent _____
Contact No: _____	Contact No: _____
Lived there since _____ Month _____ Year	Lived there since _____ Month _____ Year
Previous Addresses _____	Previous Addresses _____
Covering at least 3 years include dates moved in and out. _____	Covering at least 3 years include dates moved in and out _____
Employment Details	Employment Details
Full Time / Part time / self employed / other	Full Time / Part time / self employed / other
Employers Name: _____	Employers Name: _____
Occupation: _____	Occupation: _____
Commenced: _____	Commenced: _____
Previous Employment over 3 years (include start and finish dates) _____	_____

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Double click to open this page						
Assets - Details of what you own			Liabilities - Details of what you owe			
Real Estate			Home Loans		Monthly	
<u>Full Address (not PO Box)</u>	<u>Rent pm</u>	<u>Value</u>	<u>Lender</u>	<u>Repayments</u>	<u>Balance</u>	
	\$ -	\$ -		\$ -	\$ -	
	\$ -	\$ -		\$ -	\$ -	
	\$ -	\$ -		\$ -	\$ -	
	\$ -	\$ -		\$ -	\$ -	
	\$ -	\$ -		\$ -	\$ -	
	\$ -	\$ -		\$ -	\$ -	
	\$ -	\$ -		\$ -	\$ -	
Accounts			Personal Loan / Lease / HP / Chattel Mortgage			
<u>Bank</u>		<u>Balance</u>	<u>Lender</u>	<u>Repayments</u>	<u>Balance</u>	
		\$ -				
		\$ -		\$ -	\$ -	
		\$ -		\$ -	\$ -	
		\$ -		\$ -	\$ -	
Motor Vehicles			Business / Other Loans			
<u>Year</u>	<u>Make & Model</u>	<u>Value</u>			\$ -	
		\$ -			\$ -	
		\$ -			\$ -	
		\$ -			\$ -	
		\$ -			\$ -	
All other Assets			Credit / Store Cards			
		\$ -	<u>Issuer</u>	<u>Card Type</u>	<u>Limit</u>	<u>Balance</u>
		\$ -				\$ -
		\$ -				\$ -
		\$ -				\$ -
		\$ -				\$ -
		\$ -				\$ -
Home Contents Insurance			Other Debts - Provide Details			
					\$ -	
Superannuation					\$ -	
					\$ -	
Life Insurance Value					\$ -	
		\$ -			\$ -	
					\$ -	
					\$ -	
Total Assets		\$ -	Total Liabilities		\$ -	

I / We hereby certify that the above is a true and accurate account of my / our personal assets and liabilities

Name _____ Signed _____ Date _____

Name _____ Signed _____ Date _____

Monthly Income

Monthly Expenditure

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Salary	Gross	Net		Pre loan	Post loan
Applicant 1	\$	\$	Home loan/s	\$	\$
Applicant 2	\$	\$	Personal loan/s	\$	\$
Other Income	\$	\$	Credit/Store cards	\$	\$
			Other loans	\$	\$
	\$	\$	Other Debts	\$	\$
	\$	\$	Total loan repayments	\$	\$
	\$	\$	Rent	\$	\$
Rental Income	\$	\$	Insurance	\$	\$
Lease Term _____			School/child care fees	\$	\$
Self Employed Applicants			Electricity	\$	\$
			Telephone	\$	\$
Net Profit \$ _____ After Tax		\$	Medical Expenses	\$	\$
			Rates	\$	\$
			Car / Travel	\$	\$
Total NET income per month		\$	Food	\$	\$
Budget summary			Clothing	\$	\$
			Entertainment	\$	\$
			Subscriptions eg Pay TV	\$	\$
			Other	\$	\$
			Total Payments	\$	\$
Total Surplus funds	\$	\$			

Detailed Property Information

Type of External Walls _____ No of Bedrooms _____ Living Area/s _____
 Type of Roof material _____ No of Bathrooms _____ Pool _____
 Approx land size _____ Car accommodation _____ Other _____

Loan Request

New Loan / Loan Consolidation / Loan/Limit Increase A/c No: _____

Type of Loan

Security Offered

_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____

Reference

Have you ever had or are there now any judgments, attachments or legal proceeding against you Y/N

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If "yes" please give details _____

Details of nearest relative not living with you

Name: _____ Relationship _____ Phone No. _____

Address: _____

Other personal/business reference

Name: _____ Relationship _____ Phone No. _____

Name of Accountant: _____ Contact No: _____

Name of Solicitor: _____ Contact No: _____

Declaration and Authority

I declare that all details included within this application are true, complete and correct and have been provided to assist with obtaining of a Loan/Loan increase.

I declare that I/we have never committed any act of bankruptcy or entered into any composition or arrangement for the benefit of creditors.

I/we understand and confirm that a credit check may be undertaken as part of this application and that I/we have read and understand the Customer Consent.

I/we understand that credit provider may contact my/our employer, accountant, landlord/real estate agent and other referees provided to verify the details provide in this application.

Signed _____ Signed _____

Dated ____|____|____ Dated ____|____|____

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As part of our duty of care we believe it is important to also discuss various forms of Insurance to protect your assets.

General Insurance

Is this a new purchase? If so the property should be covered from the day of contract. For new constructions property will need to be under your own cover from the moment it has reached "Lock Up" stage.

Question: How much would it cost to rebuild a suitable home in today's market, given the high cost of construction? Does this amount also cover sheds/car ports etc.?

Cover required \$ _____ Approximate Age of Home _____

Are your home contents covered?

Question: How much would you need to replace your home contents? Cover required \$ _____

Any items to be listed separately: _____

Do you need Landlord insurance? Lease Term _____ Rental Income \$ _____

Are you insured for damages to your vehicle? Cover required \$ _____

Life, Permanent Disability/Critical Illness and Income protection

What life cover do you currently hold - is it at least enough to cover at least all of your debts?

Question: How would your family cope in the event of an accident or illness to you?

Question: How would you meet loan payments should you be unable to work due to injury or illness?

Question: Did you know that income protection may also be tax deductible?

Would you like to discuss insurance further - yes/no, if so what type is of interest?

Home, Contents, Landlord, Life, Permanent Disability/Critical Illness or Income Protection (circle the applicable cover).

If yes: when would be the best time and contact number for you.

Contact No. _____ Time _____ am/pm

Date of Birth - _____ = ____ / ____ / ____ Smoker/Non-Smoker (last 12 months)

Date of Birth- _____ = _____ Smoker/Non-Smoker (last 12 months)

Signed _____

Dated ____ / ____ / ____

If no: I confirm that Cairns Finance has discussed Insurance with me/us and we have decided that I/we do not wish further information and understand that as a result we may be at risk in doing so.

Signed _____

Dated ____ / ____ / ____

Should you also require it, we can also assist in business and rural insurance including plant and equipment, commercial property, public liability cover and various other forms of insurance.