

ENQUIRY SUMMARY - CALL 1300 949 227

Date:

INDIVIDUAL 1:

Mr / Mrs / Ms / Miss Surname _____ Given names _____

Date of birth ____ / ____ / ____ Age (yrs) _____ Mothers maiden name _____

Marital Status _____ Email address _____

No of dependent children _____ Ages _____ Work Ph _____ Mobile _____

Residential Address _____

Postcode _____ Years there _____ Home phone _____ Fax _____

Previous address (If less than 2 years at current) _____

Postcode _____ Years there _____

Australian citizen Resident Non Resident

Current living arrangements: Owned/buying Renting Living with relative Other

Postal address _____ Postcode _____

Drivers Licence No _____ Expiry Date _____

INDIVIDUAL 2:

Mr / Mrs / Ms / Miss Surname _____ Given names _____

Date of birth ____ / ____ / ____ Age (yrs) _____ Mothers maiden name _____

Marital Status _____ Email address _____

No of dependent children _____ Ages _____ Work Ph _____ Mobile _____

Residential Address _____

Postcode _____ Years there _____ Home phone _____ Fax _____

Previous address (If less than 2 years at current) _____

Postcode _____ Years there _____

Australian citizen Resident Non Resident

Current living arrangements: Owned/buying Renting Living with relative Other

Postal address _____ Postcode _____

Drivers Licence No _____ Expiry Date _____

EMPLOYMENT

To be completed by Persons 1 & 2

Full name of **Person 1**

Full name of **Person 2**

Employment Details – Person 1

Give details of your main job only. Attach details of additional jobs.

The title of my job is:

Self employed?

 Yes No

My employment is:

<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Temporary
<input type="checkbox"/> Casual	<input type="checkbox"/> Unemployed	<input type="checkbox"/> Social Security Recipient
<input type="checkbox"/> Student	<input type="checkbox"/> Home duties	<input type="checkbox"/> Family business
<input type="checkbox"/> Retired	<input type="checkbox"/> Other	<input type="text"/>

Employer's name

Employer's address

<input type="text"/>	
<input type="text"/>	Postcode <input type="text"/>
Country (if not Australia) <input type="text"/>	

Contact name

Contact number

 ()

Work phone number Time at current employment

 ()

From / /

Accountant's Details – Person 1

Accountant's name (leave blank if you do not have an accountant)

Accountant's address

<input type="text"/>	
<input type="text"/>	Postcode <input type="text"/>

Accountant's phone number

 ()

Accountant's fax number

 ()

Employment Details – Person 2

Give details of your main job only. Attach details of additional jobs.

The title of my job is:

Self employed?

 Yes No

My employment is:

<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Temporary
<input type="checkbox"/> Casual	<input type="checkbox"/> Unemployed	<input type="checkbox"/> Social Security Recipient
<input type="checkbox"/> Student	<input type="checkbox"/> Home duties	<input type="checkbox"/> Family business
<input type="checkbox"/> Retired	<input type="checkbox"/> Other	<input type="text"/>

Employer's name

Employer's address

<input type="text"/>	
<input type="text"/>	Postcode <input type="text"/>
Country (if not Australia) <input type="text"/>	

Contact name

Contact number

 ()

Work phone number Time at current employment

 ()

From / /

Accountant's Details – Person 2

Accountant's name (leave blank if you do not have an accountant)

Accountant's address

<input type="text"/>	
<input type="text"/>	Postcode <input type="text"/>

Accountant's phone number

 ()

Accountant's fax number

 ()

EMPLOYMENT & INCOME (CONTINUED):**Current Income Details - Person 1****Gross Annual Income**

\$ (If self-employed, transfer figure from Self-Employed Worksheet)

MY MONTHLY INCOME (money you receive) \$ per month

Wage or salary AFTER tax	\$
Social security - <small>specify type</small>	\$
Private pension	\$
Interest income	\$
Other income - <small>specify type</small> (e.g. Bonus Director's Fees, Dividends etc)	\$

MY MONTHLY EXPENSES (money you spend – \$ per month do not include loan repayments)

Absolute Basic Expenses (eg groceries, transport, petrol, utilities, rates, clothing)	\$
Education Expenses	\$
Childcare Fees	\$
Child Maintenance/Alimony	\$
Insurance (including car, CTP, building contents, health, income protection)	\$
Mobile Phone / Internet / Pay TV	\$
Other (e.g. holidays, entertainment, gym membership, cleaning or gardening services)	\$

Previous Employment Details – Person 1

- Complete if you have worked for your current employer for less than 3 years. Give details of your main job only.
- FULL 3 YEARS HISTORY of previous employment must be provided.

Previous job title: Self employed? Yes No

My previous employment was:

<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Temporary	<input type="checkbox"/> Casual
<input type="checkbox"/> Unemployed	<input type="checkbox"/> Social Security Recipient	<input type="checkbox"/> Student	
<input type="checkbox"/> Home duties	<input type="checkbox"/> Retired	<input type="checkbox"/> Family business	
<input type="checkbox"/> Other	<input type="text"/>		

Previous Employer's name

Previous Employer's address

<input type="text"/>	
<input type="text"/>	Postcode <input type="text"/>
Country (if not Australia) <input type="text"/>	

Time there

From / / To / /

Current Income Details - Person 2**Gross Annual Income**

\$ (If self-employed, transfer figure from Self-Employed Worksheet)

MY MONTHLY INCOME (money you receive) \$ per month

Wage or salary AFTER tax	\$
Social security - <small>specify type</small>	\$
Private pension	\$
Interest income	\$
Other income - <small>specify type</small> (e.g. Bonus Director's Fees, Dividends etc)	\$

MY MONTHLY EXPENSES (money you spend – \$ per month do not include loan repayments)

Absolute Basic Expenses (eg groceries, transport, petrol, utilities, rates, clothing)	\$
Education Expenses	\$
Childcare Fees	\$
Child Maintenance/Alimony	\$
Insurance (including car, CTP, building contents, health, income protection)	\$
Mobile Phone / Internet / Pay TV	\$
Other (e.g. holidays, entertainment, gym membership, cleaning or gardening services)	\$

Previous Employment Details – Person 2

- Complete if you have worked for your current employer for less than 3 years. Give details of your main job only.
- FULL 3 YEARS HISTORY of previous employment must be provided.

Previous job title: Self employed? Yes No

My previous employment was:

<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Temporary	<input type="checkbox"/> Casual
<input type="checkbox"/> Unemployed	<input type="checkbox"/> Social Security Recipient	<input type="checkbox"/> Student	
<input type="checkbox"/> Home duties	<input type="checkbox"/> Retired	<input type="checkbox"/> Family business	
<input type="checkbox"/> Other	<input type="text"/>		

Previous Employer's name

Previous Employer's address

<input type="text"/>	
<input type="text"/>	Postcode <input type="text"/>
Country (if not Australia) <input type="text"/>	

Time there

From / / To / /

ASSETS (WHAT I OWN) - ALL PEOPLE

Complete for ALL people applying for the loan

List all assets individually or jointly owned – attach details if there is insufficient space

My real estate property assets are: (do not include properties being purchased with this transaction)

Address of the property	Property description e.g. house, unit, etc	Situation	Property ownership %	Market value	Property used as security?
Property 1		<input type="checkbox"/> Owner occupied <input type="checkbox"/> Rented - specify monthly rent \$	Person 1 % Person 2 % Other %	\$	<input type="checkbox"/> Y <input type="checkbox"/> N
Property 2		<input type="checkbox"/> Owner occupied <input type="checkbox"/> Rented - specify monthly rent \$	Person 1 % Person 2 % Other %	\$	<input type="checkbox"/> Y <input type="checkbox"/> N
Property 3		<input type="checkbox"/> Owner occupied <input type="checkbox"/> Rented - specify monthly rent \$	Person 1 % Person 2 % Other %	\$	<input type="checkbox"/> Y <input type="checkbox"/> N

* Other – please attach a list describing the arrangement, including the percentage of ownership.

My cheque, savings, term deposit and other accounts are:

Name of institution e.g. name of bank, building society, etc	Account type e.g. cheque, savings, etc	Owner	Current balance
		<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$
		<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$
		<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$
		<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$

My investments, including superannuation, life insurance, shares, unit trusts, etc are:

Name of institution e.g. name of super fund, insurance company, etc	Investment type e.g. super, insurance, shares, etc	Owner	Current cash balance
		<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$
		<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$
		<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$

My motor vehicles are:

Make and model	Year built	Owner	Market value
		<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$
		<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$

My other assets, including household items and personal effects, cash, boats, tools of trade, etc are:

Brief description of other assets Do not provide a detailed list of assets	Owner	Market value
Personal effects and household items (including furniture, electrical goods, clothing, jewellery, etc)	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$
	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$
	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2	\$

LIABILITIES (WHAT I OWE) – ALL PEOPLE

Complete for ALL people applying for the loan

List all liabilities whether individually or jointly liable – Attach details if there is insufficient space

My housing loans, overdrafts and other loans (including those for my business/company) that are secured by mortgages are:

Address of security property	Name of lender and account number	Interest rate per annum	Monthly repayment left	Borrower	Debt to be cleared (C) or reduced (R) or not clearing (N) with the requested loan	Amount to be repaid with this loan	Amount owing or limit (whichever is greater)	New amount owing or limit (whichever is greater)
		%	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		%	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		%	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		%	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		%	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$

My credit cards, store cards, unsecured overdrafts, etc are:

Include details of credit cards, store cards, etc even if you have a nil balance

Name of lender e.g. name of bank, store, etc	Credit type e.g. MasterCard, Visa etc	Credit limit	Monthly repayment left (Office Use)	Borrower	Debt to be cleared (C) or reduced (R) or not clearing (N) with the requested loan	Amount to be repaid with this loan	Amount owing	New amount owing or limit (whichever is greater)
		\$	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		\$	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		\$	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		\$	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		\$	\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$

LIABILITIES (WHAT I OWE) – ALL PEOPLE (CONTINUED)

My other loans, including personal loans, vehicle leases, hire purchase, commercial bill, contingent liabilities etc are:

Name of lender e.g. name of bank, store, etc	Credit type e.g. personal loan, lease, HP, etc	Monthly repayment left	Borrower	Debt to be cleared (C) or reduced (R) or not clearing (N) with the requested loan	Amount to be repaid with this loan	Amount owing	New amount owing
		\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
		\$	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$

My other liabilities, including provisional taxation, HECS, guarantees on loans/leases, etc are:

Brief description of other liabilities	Debtor/ Guarantor	Debt to be cleared (C) or reduced (R) or not clearing (N) with the requested loan	Amount to be repaid with this loan	Amount owing	New amount owing
	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$
	<input type="checkbox"/> Person 1 <input type="checkbox"/> Person 2		\$	\$	\$

LOAN DETAILS:

Funds Required: \$ _____ LVR: _____ % Property Value: \$ _____
Purchase: 0/0 Invest Refinance Other
First Home Buyer Yes No Defaults Late Payments

APPLICATION CHECKLIST:

- PAYG Earners Last 2 most recent payslips showing YTD
- PAYG Earners most recent NOA (Notice of assessment / Payment summary)
- Last 6 months loans statements for all loans being refinanced
- Last 6 months Credit card statements being refinanced
- Copy of most recent rates notice of security being offered
- Copy of any savings account held (Most Recent)
- Copy of Drivers licence and passport for all applicants
- Self-employed applicants , Last 2 years financial statements / tax returns and NOA /summary

NOTES: