

INCOME DETAILS

Name	Type of Income	Gross or After Tax	Weekley / Ftnly / Mthly / Annual	Amount \$	Office Use Per Mth
TOTAL INCOME					

EXPENSE DETAILS

Type	Applicant 1	Applicant 2	Office Use Per Mth
Rent / Mortgage / Board	W / F / M	W / F / M	
Living Expenses	W / F / M	W / F / M	
Child Expenses	W / F / M	W / F / M	
Motor Vehicle Expenses	W / F / M	W / F / M	
Other Mortgages	W / F / M	W / F / M	
Credit Card	W / F / M	W / F / M	
Loans -	W / F / M	W / F / M	
	W / F / M	W / F / M	
	W / F / M	W / F / M	
This Application	W / F / M	W / F / M	
TOTAL EXPENSES			

MONTHLY UNCOMMITTED INCOME Office Use Only	(Income Less Expenses)	\$
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ASSETS & LIABILITES

	ASSET – VALUE		LIABILITIES	
	APPLICANT 1	APPLICANT 2	APPLICANT 1	APPLICANT 2
Cash on Hand				
Furnisher – Home Contents				
Residential Home				
Other Properties – List Address				
Motor Vehicles – List year, make and model				
Investments				
Credit Cards – Liability is the Limit				
TOTALS				
NET ASSETS (AFTER LIABILITIES)				

Other Pertinent Information – MUST BE FILLED IN

Have you ever had any paid or unpaid defaults listed by a credit reporting company, been Bankrupt, insolvent or assigned your estate? Default/Bankruptcy Reason: _____	Yes / No	
Do you understand that by making this application you are giving us Verbal permission to conduct credit checks on yourself?	Yes / No	
Are you an Australian Citizen or Permanent Resident	Yes / No	
If No – What is the date your Visa Expires:		
If there is a Co-Borrower	- Will Co-borrower be contributing to Repayments	Yes / No
	- Will the Co-Borrower be gaining use of the goods?	Yes / No
	- Has the co-borrower given us their Privacy Consent?	Yes / No

Accountant

Name	Contact Name
Address	Phone No:

Bankers

Branch

Account Type

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Insurance Company

No Claim Bonus %

Phone No

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Business Reference – Name & Address

Phone No:

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Personal Reference – Name & Address

Phone No:

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Nearest Relative – Name & Address

Name:	Relationship	
Address:	Phone No.	

I, _____ Certify that _____ Produced Licence No:

_____ State: _____ for the purposes of Identification relating to the finance application with Elderslie Finance, I have viewed the licence/s and am satisfied as to the identity (ies).

I, _____ Certify that _____ Produced Licence No:

_____ State: _____ for the purposes of Identification relating to the finance application with Elderslie Finance, I have viewed the licence/s and am satisfied as to the identity (ies).

Signature of certifying person

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I/We warrant in relation to the above information, that the particulars are true, complete and correct in every detail and have been made to Elderslie Finance /Australian Credit Acceptance to enable it to determine whether or not to approve the application and authorise Elderslie Finance/Australian Credit Acceptance to obtain such information concerning this application from any source as they may require. I/We understand that we have the right to withdraw this application prior to acceptance by Elderslie Finance/Australian Credit Acceptance. I/We also consent to direct marketing by Australian Credit Acceptance and all agents/agencies that it represents. I/we warrant that I/we have not been known by any other name other than stated in our application

SIGNATURE OF APPLICANT	DATE
1)	

SIGNATURE OF APPLICANT	DATE
2)	