

FlexiLoan APPLICATION FORM

Amount Requested	\$
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APPLICANT DETAILS

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<input type="checkbox"/> Other _____
Last Name		First Name(s)			
Street Address					
Suburb		City			
Home Phone		Fax		Mobile	
Email		Date of Birth	/	/	
Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced/Separated	<input type="checkbox"/> Defacto	<input type="checkbox"/> Other _____
Where did you hear about Chequers Finance?					
Purpose of Loan?		Number of Dependants			

RESIDENTIAL DETAILS

Time at Current Address	Years	Months			
Do you Rent?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you Board?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Buying your Home?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Weekly Rent/Board/Mortgage Payments	\$				
Landlord's Name					
Landlord's Phone Number		Mobile			
Landlord's Address					
Your Previous Address					
Time at Previous Address	Years	Months			

EMPLOYMENT DETAILS

Company Name		Work Phone		
Supervisor's Name				
Street Address				
Time with Employer	Years	Months		
Basis of Employment	<input type="checkbox"/> Full time	<input type="checkbox"/> Part time	<input type="checkbox"/> Casual	<input type="checkbox"/> Other: _____
Hours per Week		Your Position		

TWO NEAREST RELATIVES NOT LIVING WITH YOU

Contact 1		Relationship	
Street Address			
Suburb		City	
Home Phone		Work Phone	Mobile
Contact 2		Relationship	
Street Address			
Suburb		City	
Home Phone		Work Phone	Mobile

MOTOR VEHICLE

Do you Own or are you Purchasing a Motor Vehicle?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Make		Model		Year	
Registration Number				Colour	
Finance Company				Monthly Repayments	\$

OTHER ITEMS ON HIRE PURCHASE / TIME PAYMENT

Description		Purchased From		Monthly Repayments	\$
Description		Purchased From		Monthly Repayments	\$
Description		Purchased From		Monthly Repayments	\$
Description		Purchased From		Monthly Repayments	\$

DECLARATION & PRIVACY WAIVER

Please read carefully before signing

1. **Purpose of Credit** – No part of the amount of credit for which I am applying will be used to pay amounts owing to Chequers Finance or any related entity under another credit contract.
2. Pursuant to the **Privacy Act 1993** the following has been brought to my attention:
 - a. This application collects personal information about me;
 - b. The information is being collected to evaluate or process the application for credit sought by me;
 - c. The intended recipients of the information are Chequers Finance;
 - d. The information will be held by Chequers Finance. You may view your file by contacting your local Chequers Finance branch or Chequers Finance Head Office at 137 Alexandra Street, Hamilton
 - e. You have a right to access and correct this information, subject to the provisions of the Privacy Act 1993;
 - f. Failure to provide the information requested may result in this application for credit being declined or rejected.
3. **Privacy Waiver**
I authorise Chequers Finance to contact my employer, landlord, accountant, bank, other credit providers, credit reporting agencies, or any other source, to obtain, check and exchange (both now and in the future) such personal, financial and commercial information & references about me as is necessary for the purposes of considering this application, the protection and administration of any credit arising out of this application, and to assist in the enforcement of any agreement between me and Chequers Finance.
4. I understand that this is an application only and that Chequers Finance is not obliged to provide me with credit. I also understand that it is company policy not to divulge (a) the reasons why an application for credit may be declined and (b) the process by which credit applications are assessed.
5. I understand that any costs incurred by Chequers Finance to collect any outstanding monies I may owe will have to be paid by me, and that Chequers Finance will, if necessary, use debt collection agencies and/or initiate legal proceedings to collect monies I may owe (including Late Payment Fees) and that any cost incurred by Chequers Finance in such actions will also be payable by me.

X

Signature of Applicant(s)

Date:

DIRECT DEBIT AUTHORITY FORMS

If your loan is approved, we must first receive signed Direct Debit Authority forms from you before we can send your loan proceeds to you.

Please sign each of the following Direct Debit Authority forms and post or courier them to our Head Office at:

By Post

Chequers Finance
P.O. Box 19140
Hamilton

By Courier

Chequers Finance
Caro House
137 Alexandra Street
Hamilton

Please:

- **DO NOT FAX** the Direct Debit Authority forms! The banks will only accept them with original signatures.
- Sign the forms only – this will make it easier for us to help you in future if you change banks or your authority is inadvertently cancelled for any reason.

