

CLIENT APPLICATION FORM

Transaction Details:		
Date: / /	Supplier: Phone:	Broker: Phone:

Applicant Details:			
Entity Type: Company <input type="checkbox"/> Business <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Trader <input type="checkbox"/>			
ABN:	ACN:	How long have you been operating this business? Years: Months:	
Company Name:			
Contact Name:			
Street:			
Suburb:	State:	Postcode:	
Phone:	Fax:		
Mob:	Email address:		
Industry Type:	Insurance Co:	Policy #:	Expiry Date: / /
Trade Reference 1: Company:		Contact:	Phone:
Trade Reference 2: Company:		Contact:	Phone:
Additional/Background information:			

Partners / Directors / Shareholders / Guarantors:			
1. Name:		2. Name:	
Home Address:		Home Address:	
Suburb:	State:	Postcode:	
Suburb:	State:	Postcode:	
Home Value: \$	Mortgage: \$		
Home Value: \$	Mortgage: \$		
Drivers Licence #:	Expiry Date: / /	Drivers Licence #:	Expiry Date: / /
DOB: / /	Country of Birth:	DOB: / /	Country of Birth:

Privacy Act Declaration and Authorisation to release financial information:

I/we hereby certify that the information provided is true. Under the privacy act 1988, I/we authorize Northern Managed Finance ABN 43 125 018 582 (NMF) to collect and provide to credit reporting agencies personal information and to seek consumer credit reference reports to assess this application. You authorise the Recipients to give and obtain from other credit providers information about your credit worthiness, credit standing, credit history or credit capacity. I/we acknowledge that the credit applied for may be provided by another credit provider and in such cases NMF may disclose personal information to such credit providers for the purposes of assessing this application. If you would like to know more about the personal information which the Recipients hold about you or the Recipients handling of personal information about you please contact NMF on (02) 9251 2700.

Renter / Guarantor Signature:

Renter / Guarantor Signature:

X

X

Print Name: _____

Print Name: _____

Date: _____

Date: _____

This application form does not constitute a contract. NMF will contact you to discuss this facility.



CONFIDENTIAL

STATEMENT OF FINANCIAL POSITION

As at ____/____/____

Full Name(s): _____

LIABILITIES	\$	ASSETS	\$
MORTGAGE LOANS		LAND & BUILDINGS	
OTHER LOANS		FURNITURE	
		MOTOR VEHICLE(S)	
OTHER LIABILITIES (Details)		CASH ON HAND OR BANK	
		DEPOSITS PAID	
		INVESTMENTS	
		OTHER ASSETS (Details)	
BANK OVERDRAFT			
BANK, BRANCH			
BANKCARD			
TOTAL LIABILITIES	\$	TOTAL ASSETS	\$
		Less TOTAL LIABILITIES	\$
		SURPLUS	\$

I / We declare that the foregoing information is true and correct and that I/we am/are not (an) undischarged bankrupt(s) and that there are no outstanding judgements or claims against me/us.

Signature _____ Date _____

Signature _____ Date _____

