

Amount Required: \$..... Purpose of Loan: Term of Loan: Pymt Protection Insurance: Y / N

Mr/Mrs/Ms/Miss	(Surname)	(First Names)	Date of Birth	/	/
Former/Maiden Name				
Partners Details	(Surname)	(First Names)	Date of Birth	/	/
Mr/Mrs/Ms/Miss				
Relationship:	Married <input type="checkbox"/>	Single <input type="checkbox"/>	Divorced <input type="checkbox"/>	Separated <input type="checkbox"/>	Defacto <input type="checkbox"/> Widow <input type="checkbox"/>

ACCOMMODATION Own Home Buying Home Renting Board Board
Private Housing NZ (with parents) (with others)

Current Address: Time there yrs mths

Previous Addresses:
 1: Time there yrs mths
 2: Time there yrs mths
 3: Time there yrs mths

Home Phone: **Work Phone:**
Mobile: **Email:**

GUARANTOR:	(Surname)	(First Names)	Date of Birth	/	/
Mr/Mrs/Ms/Miss				Phone
Current Address				Occupation
.....					

PERSONAL CONTACTS:
 Brother/Sister (Surname) (First Names) Phone
 Close Relative Phone
 Address
 Other: (Surname) (First Names) Phone
 Address

EMPLOYMENT DETAILS: Income: Salary or Wages ACC Commission Self-Employed
 On Benefit: Benefit Type : WINZ No. [.....]

Current Employer: Occupation:
 Address: Phone:
 Length of Service: yrs months
 Previous Employer: Length of Service: yrs months
 Partners Employer: Occupation:
 Address: Length of Service: yrs months

HIRE PURCHASE ACCOUNTS			
Company.....	Wkly/Ftntly/Mthly Payment \$.....	Term	Current/Complete
Company.....	Wkly/Ftntly/Mthly Payment \$.....	Term	Current/Complete

CREDIT CARDS - VISA, MASTERCARD, FARMERS, ETC			
Company.....	Wkly/Ftntly/Mthly Payment \$.....	Term	Current/Complete
Company.....	Wkly/Ftntly/Mthly Payment \$.....	Term	Current/Complete
Company.....	Wkly/Ftntly/Mthly Payment \$.....	Term	Current/Complete
Company.....	Wkly/Ftntly/Mthly Payment \$.....	Term	Current/Complete

Will you pay by Automatic Payment or Direct Debit?	YES/NO	Extra charge if NO.
My Bank is	Branch	Account No

Have you ever been Bankrupt, or had money demanded from you by a debt collection agency, or by the Department of Courts? Yes No

Detail

Have you a criminal record? Yes No If yes, Detail:

How did you hear about FAIR CITY FINANCE? Press Personal Ref Return Business Star
Chch Advertiser Yellow Pages Chch Mail Radio Other

FINANCIAL DETAILS

Take Home Income (excl. overtime): per Wk/Ftnt/Mnth

Applicant's Income \$.....
Spouse's Income \$.....
Family Assistance \$.....
Other \$.....
\$.....

Please give details above of other income e.g. Overtime, Commission, etc.

Please give details of other commitments.

Commitments (per Wk/Ftnt/Mnth)

Rent/Mortgage/Rates/Ins. \$.....
Living/Food/Clothing/Power \$.....
Car \$.....
Hire Purchase \$.....
Other Loans \$.....
Court Fines \$.....
Kiwi Saver \$.....
\$.....

SECURITY OFFERED

Vehicles Chattels:

Make:

Model: Year:

Registration No:

Vehicle Insurance Branch:

Policy No: Value: \$ Property:

Contents Insurance Coy: Branch : Policy No:

Driver's Licence No*** (5a): Version No (5b): Learners / Restricted / Full

*** This is voluntary, although we will need some form of photo ID

YOUR FINANCIAL POSITION

Your Assets (Estimated Value) : **What you own -**

Home
Motor Vehicles
Other Substantial Assets
Bank Account/Investments
Life Insurance \$.....

Liabilities : **What you owe -**

Mortgages
Hire Purchase
Other Loans
Outstanding Debts \$.....
Net Worth \$.....

I/We declare that we own the goods listed in this application form. I/We certify that the particulars supplied above and overleaf are true, correct and complete.
I am/We are 18 years of age or over and I am/we are not an undischarged bankrupt.
I/We acknowledge and agree that Fair City Finance (referred to as 'FCF') may disclose to Veda Advantage any personal information about me/us that 'FCF' holds, including:
information contained in this application; my/our identification; amount of credit applied for; my payment history; payments which may have become overdue; advice that payments are no longer overdue; or any serious contract infringement which 'FCF' believes I/we have committed.
I/We agree and acknowledge that 'FCF' in assessing this application, any later request for a credit increase, and monitoring my/our credit status, may obtain from any agency personal and/or credit information about me/us including reports containing information about my/our commercial activities or commercial credit worthiness, and including information from the Ministry of Justice regarding unpaid fines and/or reparation.
I/We further agree and acknowledge that 'FCF' may give to and obtain from any third party, including any subsidiary or associate company of 'FCF', information about my/our personal or commercial credit arrangements including information about my/our credit worthiness, credit standing, credit history or credit capacity for the particular purpose for which the information is required and that any information given to Veda Advantage, or other credit reporting agency, may be used by them to provide their credit reporting service.
I/we understand that if all or any part of the information requested on this application form is not provided, the application for finance may be declined.
I/we confirm we have been given a copy of the disclosure statement as required under the Financial Advisers Act 2008.
The information provided on this form and any other information received about you will be held by FCF at their Head Office in Christchurch and may be accessed and corrected by you under the Privacy Act 1993. Information held by Veda Advantage may be accessed and corrected by you at PO Box 912012 Auckland 1142 or website www.mycreditfile.co.nz.

Date:/...../..... **Signature(s) of Applicant(s):**

Full Name(s) of Applicant(s):

Date:/...../..... **Signature(s) of Guarantor(s):**

Full Name(s) of Guarantor(s):