

## Applicant Details

The applicant's details must be completed by all parties.

## Balance Sheet

Have you completed all details of your assets, liabilities and income?

## Privacy Statement

Have you read and understood the privacy consent information?

Have you signed the privacy consent?

## Checklist

Have you:

- Completed the applicant's details in full?
- Completed the balance sheet in full?
- Chosen your required insurance?
- Signed the privacy consent form?
- Attached all the supporting documents (recent payslip to start the process) as requested?

230 Clarence Street, Sydney, NSW 2000, Fax (02) 9286 0380

328 King Street, Newcastle, NSW 2300, Fax (02) 4926 3540

125 Baylis Street, Wagga Wagga, NSW 2650, Fax (02) 6921 3692

Level 1, 128 Exhibition Street, Melbourne, VIC 3000, Fax (03) 9654 0451

Shop 4/201 Howick Street, Bathurst, NSW 2795, Fax (02) 6331 7454

12-14 Wenworth Street, Parramatta, NSW 2150, Fax (02) 9286 0331

Elizabeth Street, Liverpool Hospital, Liverpool, NSW 2170, Fax (02) 9286 0371

Cnr. Conway and Carrington Sts, Lismore NSW 2480, Fax (02) 9286 0387

Detention Centre, Anzac Parade, Malabar, NSW 2036, Fax (02) 9311 1592

You can also FAX your loan on the above numbers or  
PHONE 1300 364 400!

## Need Help?

If you need help to complete any of these forms please call 1300 364 400 between 9.00 am and 5.00 pm, Monday to Friday.

## APPLICANTS DETAILS

**PLEASE PRINT CLEARLY**

Member number(s)  Amount required \$

Purpose of loan

How did you hear about our loans?

Why did you choose our loan product?

Personal Loan       Mortgage       Overdraft - Cheque Book

	FIRST BORROWER	SECOND BORROWER (if joint borrowers)
Preferred Title <i>(Please tick)</i>	[ ] Mr [ ] Mrs [ ] Miss [ ] Ms [ ] Other	[ ] Mr [ ] Mrs [ ] Miss [ ] Ms [ ] Other
Given Names	Marital Status [ ] S [ ] M [ ] W [ ] D	Marital Status [ ] S [ ] M [ ] W [ ] D
Surname		
Date of Birth	/ / Male Female Age of dependants	/ / Male Female Age of dependants
Residential Address	[ ] Owner/Buyer [ ] Renting [ ] Boarding	[ ] Owner/Buyer [ ] Renting [ ] Boarding
Previous Address (if less than 3 years)	State Postcode Years in residence [ ] Owner/Buyer [ ] Renting [ ] Boarding	State Postcode Years in residence [ ] Owner/Buyer [ ] Renting [ ] Boarding
Postal Address ('as above' if same as residential)	State Postcode Years in residence	State Postcode Years in residence
Telephone	Work Home	Work Home
Email	Mobile	Mobile
Drivers Licence No.	Exp	Exp
Name and address of nearest relative not living with you	Name Current Address	Name Current Address
Current Employment	Phone Relationship to you	Phone Relationship to you
Position Title	Name of Company	Name of Company
Position Held	Address	Address
Previous Employment (if less than 3 years)	Phone Years in Service	Phone Years in Service
	[ ] Permanent [ ] Casual [ ] Part-time	[ ] Permanent [ ] Casual [ ] Part-time
	Years in Service	Years in Service
	Position	Position
	Years in Service	Years in Service
	Position	Position

## BALANCE SHEET

### ASSETS

Value of your home	\$	<input type="text"/>
Furniture (insured value)	\$	<input type="text"/>
Motor Vehicle	\$	<input type="text"/>
Savings/Investments	\$	<input type="text"/>
Savings/Investments	\$	<input type="text"/>
Other (please specify)	\$	<input type="text"/>
Other (please specify)	\$	<input type="text"/>
<b>TOTAL ASSETS</b>	\$	<input type="text"/>

### LIABILITIES

	Name of Company	Balance Owning	Expenditure (Monthly)
Mortgage/Rent/Board	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Personal Loan	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other Loans	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Credit Card	<input type="text"/>		
Limit	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Credit Card	<input type="text"/>		
Limit	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Store Account Limit	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Living Expenses Estimate*		\$ <input type="text"/>	
<b>TOTAL</b>		\$ <input type="text"/>	\$ <input type="text"/> (A)

\* To assist you with this figure please refer to the Living Expenses Estimate Worksheet attached.

### ASSET PROTECTION

Month home and contents insurance due	<input type="text"/>
Current home and contents provider	<input type="text"/>
Motor Vehicle year and make	<input type="text"/>
Motor Vehicle model and reg. no.	<input type="text"/>
Month car insurance due	<input type="text"/>
Superannuation	<input type="text"/>
Other insurances	<input type="text"/>

### INCOME MONTHLY (APPLICANT 1)

Your gross salary	\$	<input type="text"/>
Other (please specify)	\$	<input type="text"/>
Other (please specify)	\$	<input type="text"/>
Total income	\$	<input type="text"/>
Less expenditure (A)	\$	<input type="text"/>
Balance remaining	\$	<input type="text"/>

### INCOME MONTHLY (APPLICANT 2)

Your gross salary	\$	<input type="text"/>
Other (please specify)	\$	<input type="text"/>
Other (please specify)	\$	<input type="text"/>
Total income	\$	<input type="text"/>
Less expenditure (A)	\$	<input type="text"/>
Balance remaining	\$	<input type="text"/>

You will be required to provide details of all your income to avoid processing delays.

### JOINT BORROWINGS/GUARANTEES

If you have existing joint borrowings with any other person, or have given any guarantees for any other person, please provide the details of that person below:

Full name	<input type="text"/>	Address	<input type="text"/>
Type of loan	<input type="checkbox"/> Joint Borrowings <input type="checkbox"/> Guarantee	Amount	\$ <input type="text"/>
Financial Institution	<input type="text"/>	Repayment (monthly)	\$ <input type="text"/>
Additional Card Holder	<input type="text"/>	Date of Birth	<input type="text"/>
Signature	<input type="text"/>		

Have you ever been bankrupt or had a summons served against you?  Yes  No (If Yes, please provide details on a separate sheet.)

## CONSUMER CREDIT INSURANCE

SGE Credit Union offers insurance to members who wish to protect their loan repayments against sickness, accident, unemployment or death. Insurance is recommended by SGE for your benefit. Please tick the appropriate box to indicate your Consumer Credit needs.

Yes I would like to take advantage of all the Consumer Credit Insurances available to me

	Type of cover	1st borrower	2nd borrower
Yes, I would like	Disability	<input type="checkbox"/>	<input type="checkbox"/>
Yes, I would like	Disability & Involuntary Unemployment	<input type="checkbox"/>	<input type="checkbox"/>
Yes, I would like	Disability, Involuntary Unemployment & Life	<input type="checkbox"/>	<input type="checkbox"/>
Yes, I would like	Disability, Involuntary Unemployment, Life & Trauma	<input type="checkbox"/>	<input type="checkbox"/>
Yes, I would like	Disability & Life	<input type="checkbox"/>	<input type="checkbox"/>
Yes, I would like	Disability, Life & Trauma	<input type="checkbox"/>	<input type="checkbox"/>
Yes, I would like	Life	<input type="checkbox"/>	<input type="checkbox"/>
Yes, I would like	Life & Trauma	<input type="checkbox"/>	<input type="checkbox"/>

No I do not require Consumer Credit Insurance. I acknowledge that should I be disabled or unemployed during the term of the loan, I will be responsible for repayment of the loan. I understand that, in the event of my death, my estate will remain liable to repay any outstanding debt, as well as any prior loan that has been consolidated into this contract.

Signature (1st Borrower)

Signature (2nd Borrower)

Terms and conditions available on application. Normal lending criteria applies. Fees and charges apply. 11/04

### PLEASE READ CAREFULLY. PRIVATE PROTECTION OF INFORMATION (CONSUMER CREDIT) IMPORTANT NOTICE TO APPLICANTS FOR CREDIT (SECTION 18E(8)(C) PRIVACY ACT 1988)

The Credit Union may give information about you to a credit reporting agency, but only limited kinds of information allowed by this Privacy Act 1988 (Commonwealth). This includes:

STATEMENT BY APPLICANT(S) FOR CREDIT (Please read carefully before signing. When more than 1 applicant, each applicant to sign).

- identity particulars - this only includes your name, sex, date of birth, current known address, two immediately previous addresses, your current or last known employer, and your drivers licence number;
  - the fact that the Credit Union is a credit provider to you;
  - payments overdue for at least 60 days, when the Credit Union has taken steps to recover;
  - advice that payments are no longer overdue;
  - cheques for an amount greater than \$100, drawn by you which have been dishonoured more than once;
  - the opinion of the Credit Union that you have committed a serious credit infringement;
  - when the credit provided to you has been discharged
1. Purpose of credit: The credit I am applying for is  wholly or primarily for a domestic, family or household purpose,  for another purpose.
  2. Giving information to a Credit reporting Agency (Section 18 E(8)(c) Privacy Act 1988: The credit Union has informed me that it may give certain personal information about me to a credit reporting agency. I understand that the Credit Union can only give limited kinds of information which are set out in the Privacy Act 1988 and examples of which are listed above.
  3. Exchanging Information with other Credit Providers (Section 18N (1)(b) Privacy Act 1988). I agree to the Credit Union checking personal information about me with any credit provider named in my credit application and with other credit providers that may be named in a credit report issued by a reporting agency, for any of the following purposes:
    - to assess my credit worthiness
    - to assess an application by me for credit
    - to help me avoid defaulting on my credit obligations
    - to notify a default by me
    - the collection of overdue payments.
 I understand that this information can include any information about my credit worthiness, credit standing, credit history or credit capacity that credit providers are allowed to give or receive from each other under the Privacy Act 1988.
  4. Access to Commercial Credit Information (Section 18L (4) Privacy act 1988) For the purpose of assessing my application for credit, I consent to the Credit Union obtaining a report containing information about my commercial activities or commercial credit worthiness, from a business which provides information about a commercial credit worthiness of persons.
  5. Access to Consumer Credit Information for a Commercial Credit Application (Section 18K (1) (b) Privacy Act 1988) If my application is for commercial credit, I consent to the Credit Union, in order to assess my application, obtaining from a credit report about me containing consumer credit information.

Signature of Applicant

Signature of Co-applicant

## LIVING EXPENSES ESTIMATE WORKSHEET

Here is a sample of living expenses. Please use this as a guide.

Please write the grand total on the loan application form under “balances” and “liabilities”.

Staples	\$ per month	Services	\$ per month	Other	\$ per month
Groceries	\$	Water	\$	School expenses	\$
Meat	\$	Gas	\$	Holidays	\$
Fruits & Vegetables	\$	Electricity	\$	Subscriptions and club/gym memberships	\$
<b>Transport</b>		Council Rates	\$	Sports equipment	\$
Petrol	\$	Strata Fees	\$	Clothing	\$
Rego and Insurance	\$	Property repairs and maintenance	\$	Donations	\$
Tyres and Repairs	\$			Hobbies	\$
Commuting fares and tolls	\$			Gifts	\$
<b>Entertainment</b>		<b>Insurances</b>		Day Care	\$
Cable TV	\$	House and contents	\$		
ISP subscription	\$	Life	\$		
Movies	\$	Private Health	\$		
Fast Food	\$	Income Protection	\$		
Eating out	\$	Medical and dental gap	\$		
		Medications	\$		
				<b>GRAND TOTAL</b>	\$