

Customer Information Form

Please fill this form out and return to me before our appointment. This will speed up the whole process and we can spend our time together focusing on your requirements! If you are unsure of anything, leave it blank. You can type your answers in and email back, or just print the form, hand write the information and fax back.

Loan Amount Sought:

Purchase Price or Property Value:

	APPLICANT 1					APPLICANT 2				
Title: (please select)	Mr	Mrs	<input type="radio"/> Miss	Ms	Dr	Mr	Mrs	Miss	Ms	Dr
First and middle names:										
Surname:										
Mother's maiden name:										
Marital status:	Married		Single			Married		Single		
	De-Facto		Separated			De-Facto		Separated		
Residential status:	Australian Citizen		Permanent Resident			Australian Citizen		Permanent Resident		
	Temporary Resident		Visitor			Temporary Resident		Visitor		
Date of birth:										
Date of birth of dependent children:										
Drivers licence:	No:		State:			No:		State:		
	Expiry Date:					Expiry Date:				

CURRENT RESIDENTIAL ADDRESS (If less than 3 years, add additional addresses)

Address:								
How long have you been at this address:	Years		Months		Years		Months	
Contact phone numbers:	Home:		Work:		Home:		Work:	
	Mobile:		Fax:		Mobile:		Fax:	
Email address:								
Status:	Owner		Renting		Owner		Renting	
	Boarding		Living with parents		Boarding		Living with parents	
	Owner with mortgage				Owner with mortgage			
If renting, landlord's details and phone number:								
Previous address details:								

EMPLOYMENT (If less than 3 years, add additional employers)

Employer's name (in full):								
Time with current employer:	Years		Months		Years		Months	
Status:	Full-time		Permanent part-time		Full-time		Permanent part-time	
	Casual		Self-employed		Casual		Self-employed	
Occupation/Job title:								
Current employer address:								
Contact details (for verifying employment) eg, Paymaster:	Name				Name			
	Phone number				Phone number			

Income – gross annual salary (before tax):	\$	\$
Gross overtime/penalties (before tax):	\$	\$
Other income – pensions, FTB (P.A. before tax):	\$	\$
Previous employer's details		

ASSETS

Properties owned	Property 1		Property 2	
Address:				
Value:				
In the name of:	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2

Savings account and term deposits

Financial institution:			
Account number:			
In the name of:	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1
Balance:			

Motor vehicles	Vehicle 1		Vehicle 2		Vehicle 3	
Make and model:						
Year built:						
In the name of:	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2
Value:						

Household items

List value (hint – what is your home contents sum insured?):	
--	--

Other assets

Value of caravan, boat, shares etc:			
-------------------------------------	--	--	--

LIABILITIES: MORTGAGES

	Mortgage 1		Mortgage 2		Mortgage 3	
Name of financial institution:						
Original loan amount:						
Account number:						
In the name of:	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2
Amount currently owing:						
Minimum monthly repayment:						

OTHER LOANS

	Loan 1		Loan 2		Loan 3	
Name of financial institution:						
Original loan amount:						
Account number:						
In the name of:	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2	<input type="radio"/> Applicant 1	<input type="radio"/> Applicant 2
Amount currently owing:						
Monthly repayment:						
Is loan being paid out?	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No

CREDIT CARDS

	Card 1	Card 2	Card 3	Card 4
Name of financial institution:				
Credit limit:				
Amount currently owing:				
Type of card (Visa, Mastercard, Amex):				