

INSURANCE-REQUIRED BANK VAPS

Credit Life	Monthly	Annual	Term	Service and maintenance	Single premium
Extended cover	Monthly	Annual	Term	Motor Breakdown Warranty	Single premium
Motor comprehensive	Monthly			Other	
Existing ins co name			Tel	Policy no	
Broker name			Tel	Do you require Comprehensive Vehicle Cover? <input type="checkbox"/> Y <input type="checkbox"/> N	

TRANSACTION DETAILS		Goods description		APPLICANT'S INCOME DETAILS	
Year model	Salesman	Gross remuneration	R		
Dealer name	Dealer tel	Monthly commission	R		
Scheme code	Buyline code	Car allowance included in gross	R		
M&M code	Period of contract (Mnths)	Net take-home pay	R		
Special requirements		Income other than salary/wages	R		
Balloon payment	% R	Total monthly income	R		
Residual value	% R	Applicant's Expenses per month:			
Purpose of goods: Business	Private	Taxi	Commercial	Bond payment/rent	R
Payment frequency: Month	Bi-Ann	Quart	Annual	Rates, water and electricity	R
Payment mode: Advance	Arrears	Cash	Debit order	Vehicle instalments (excluding those to be settled)	R
FINANCIAL DETAILS		Credit card repayments			
Proposed rate	% Fixed	Linked	Furniture accounts		
Selling price (VAT inclusive)	R		R		
Extras description	R		R		
	R		R		
	R		R		
Total of extras	R		R		
Dealer VAPS description	R		R		
	R		R		
	R		R		
Delivery fee	R		R		
Initial fuelling charges	R		R		
Licence and registration costs	R		R		
Initiation fees to be financed	<input type="checkbox"/> Y <input type="checkbox"/> N		R		
Less deposit/initial rental	R		R		
Total	R		R		
		Furniture accounts			
		Clothing accounts			
		Overdraft repayments			
		Policy/Insurance repayments			
		Telephone payment			
		Transport costs			
		Food and entertainment			
		Education costs			
		Maintenance			
		Household expenses			
		Other			
		Total monthly expenses			
		Applicant's disposable income			
		Are you currently liable as:			
		Surety		Guarantor	
				Co-debtor	
		Specify details			

I confirm that –

- A I am not a minor
- B I have never been declared mentally unfit by a court.
- C I am not subject to an Administration Order.
- D I do not have any current application pending for debt restructuring or alleviation.
- E I do not have any current debt re-arrangement in existence.
- F I have not previously applied for a debt re-arrangement.
- G I do not have applications pending for credit, nor open quotations as envisaged in section 92 of the National Credit Act.

If any of the above is incorrect please indicate here: _____

H I would like to be included in any Telemarketing Campaign. Y N

I I would like to be included in any Telemarketing List that you may sell or distribute. Y N

J I would like to be included in any mass distribution of e-mails or SMS messages. Y N

I understand that I will be liable for a monthly service fee.

I hereby consent to Absa making enquiries regarding my credit history with any credit bureau.

I consent to Absa reporting the conclusion of any credit agreement with me to the National Loans Register in compliance with Absa's obligation under the National Credit Act.

I hereby declare that the information provided by me is true and correct in all material respects.

Absa Bank Limited ("Absa") a member of the Banking Council of South Africa wishes to inform you that all information regarding your personal and financial matters is treated as strictly confidential. To enable the Absa Group to offer you a full range of services and products suited to your needs, we require your consent to utilise your personal information within the Group and to communicate to you on an on-going basis.

Absa Bank Ltd ('Absa') is committed to complying with national and international law, rules and regulations and policies regarding the combating of criminal activities, money laundering and terrorist financing. All applications and all information concerning the customer, are therefore subject to verification, processing and screening and Absa may be obliged to decline certain applications. In addition, upon the acceptance of an application, all information, instructions and transactions for and on behalf of the customer will be subject to continuous screening which may prohibit, limit or delay the execution thereof and which may oblige Absa to terminate its relationship with the customer. To the extent permissible, Absa shall advise the customer of any prohibitions or limitations on such applications, instructions or transactions. Absa, or its respective affiliates, employees, officers, and directors, shall not be liable for any special, punitive, indirect, or consequential losses or damages, including, without limitation, loss of profits or any anticipated savings.

Please tick (✓) the appropriate box

I/We hereby consent to the above

I/We hereby withhold consent and fully understand the implications and ramifications of my/our decision.

I agree that you may obtain information from appropriate parties to check the details given by me on this application form.

Signature _____

Date _____