



## **Personal Details for Finance Application**

The following details are required to assess borrowing capacity and loan eligibility. Please complete all areas of the application as thoroughly as possible.

Please contact Quay Finance on 1300 799 863 any time if you have any questions.

This is not an application for finance, but simply a data collection form. A Privacy Act for the specific lender you require will need to be signed by you, therefore gaining your consent, before an application can be submitted to a lender.

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Quay Finance Pty Ltd is a member of the Lifespan Financial Planning Group  
ABN: 24 116 009 682

**PERSONAL DETAILS****APPLICANT 1**

Title  First name  Middle name(s)

Surname

Date of birth  /  /  Driver licence details  
 Number  State of issue

Marital status  
 Married  Single  Separated  
 Divorced  Defacto  Widowed

Age(s) of your dependants  
 Dependants include a spouse/defacto (who is not Applicant 2) and children. Note: If you are applying for a joint loan and have shared dependents, only one applicant needs to list them.

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Maiden name (if applicable)

Work phone number  ( ) Home phone number  ( )

Mobile phone number  Fax number  ( )

Email address

Current residential status  
 Owner with mortgage  Owner no mortgage  Renting  
 Supplied by employer  Living with relatives  Boarding

Current residential address   
 Postcode  
 Period at current address  Years  Months

Postal address, complete only if different to residential address  
  
 Postcode

Are you a permanent resident?  
 No  Yes

Previous residential address, if less than 3 years at your current address  
  
 Postcode  
 Period at current address  Years  Months

Will your address change upon drawdown of your loan?  
 No  Yes – please specify you new address  
  
 Postcode

**APPLICANT 2**

Title  First name  Middle name(s)

Surname

Date of birth  /  /  Driver licence details  
 Number  State of issue

Marital status  
 Married  Single  Separated  
 Divorced  Defacto  Widowed

Age(s) of your dependants  
 Dependants include a spouse/defacto (who is not Applicant 1) and children. Note: If you are applying for a joint loan and have shared dependents, only one applicant needs to list them.

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Maiden name (if applicable)

Work phone number  ( ) Home phone number  ( )

Mobile phone number  Fax number  ( )

Email address

Current residential status  
 Owner with mortgage  Owner no mortgage  Renting  
 Supplied by employer  Living with relatives  Boarding

Current residential address   
 Postcode  
 Period at current address  Years  Months

Postal address, complete only if different to residential address  
  
 Postcode

Are you a permanent resident?  
 No  Yes

Previous residential address, if less than 3 years at your current address  
  
 Postcode  
 Period at current address  Years  Months

Will your address change upon drawdown of your loan?  
 No  Yes – please specify you new address  
  
 Postcode

**REFERENCE**

Have you ever had or are there now any judgements, attachments or legal proceedings against you?

No  Yes – Please obtain a signed copy of the default letter by solicitor and borrower and provide a brief written explanation of the default

Details of nearest relative not living with you

Name	Relationship	Phone number
<input type="text"/>	<input type="text"/>	( <input type="text"/> ) <input type="text"/>
Address	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

**EMPLOYMENT DETAILS**

**APPLICANT 1**

Current employment status

Full time  Part time  Self employed

Other – specify

Name of your current employer OR business if self-employed

Current employer's address

  
 Postcode

Date employment started Occupation

 /  /  

Type of industry

Previous employer's name, if less than 3 years with current employer

Name of your current employer OR business if self-employed

Length of service

 Years  Months

Previous employment status

Full time  Part time  Self employed

Other – specify

**APPLICANT 2**

Current employment status

Full time  Part time  Self employed

Other – specify

Name of your current employer OR business if self-employed

Current employer's address

  
 Postcode

Date employment started Occupation

 /  /  

Type of industry

Previous employer's name, if less than 3 years with current employer

Name of your current employer OR business if self-employed

Length of service

 Years  Months

Previous employment status

Full time  Part time  Self employed

Other – specify

**MONTHLY INCOME**

**APPLICANT 1**

		Gross Monthly Income	Net Monthly Income
Gross salary		\$	\$
Overtime		\$	\$
Commission/Bonus		\$	\$
Rental income	Existing	\$	\$
	Proposed	\$	\$
Dividend/Interest income		\$	\$
Motor vehicle allowance		\$	\$
Other income		\$	\$

**APPLICANT 2**

		Gross Monthly Income	Net Monthly Income
Gross salary		\$	\$
Overtime		\$	\$
Commission/Bonus		\$	\$
Rental income	Existing	\$	\$
	Proposed	\$	\$
Dividend/Interest income		\$	\$
Motor vehicle allowance		\$	\$
Other income		\$	\$

## ASSETS AND LIABILITIES

### ASSETS (What you own)

Asset Details				Value/Balance	Applicant 1/2/Joint
Home	Address			\$	
Other Property or Land	Address	1.		\$	
	Address	2.		\$	
	Address	3.		\$	
	Address	4.		\$	
Bank Accounts	Organisation	1.	Account no.	\$	
	Organisation	2.	Account no.	\$	
	Organisation	3.	Account no.	\$	
Motor Vehicles	Make and model	1.	Year made	\$	
	Make and model	2.	Year made	\$	
All Other Assets ( <i>Do not include goodwill, home contents, superannuation</i> )		Description	1.	\$	
		Description	2.	\$	
		Description	3.	\$	
<b>Total value of what you own</b>				<b>\$</b>	
Sundry Assets	Superannuation (Estimate current payout)			\$	
	Goodwill of Business (Estimated value)			\$	
	Home contents (insured value)			\$	

### LIABILITIES/EXPENSES (What you currently owe)

Type of liability	Name of lender	Type of loan	Current limit/ Original loan amount	Amount owing	Monthly expenses		Applicant 1/2/Joint	To be paid out
					pre loan	post loan		
Home and other property loans	1.		\$	\$	\$	\$		<input type="checkbox"/>
	2.		\$	\$	\$	\$		<input type="checkbox"/>
	3.		\$	\$	\$	\$		<input type="checkbox"/>
	4.		\$	\$	\$	\$		<input type="checkbox"/>
	5.		\$	\$	\$	\$		<input type="checkbox"/>
	6.		\$	\$	\$	\$		<input type="checkbox"/>
Other loans, overdrafts, loans with redraw, lease, hire purchase	1.		\$	\$	\$	\$		<input type="checkbox"/>
	2.		\$	\$	\$	\$		<input type="checkbox"/>
	3.		\$	\$	\$	\$		<input type="checkbox"/>
Personal Consumer Loans	1.		\$	\$	\$	\$		<input type="checkbox"/>
	2.		\$	\$	\$	\$		<input type="checkbox"/>
Other liabilities ( <i>include loans you are guarantor for</i> )	1.		\$	\$	\$	\$		<input type="checkbox"/>
	2.		\$	\$	\$	\$		<input type="checkbox"/>
Credit cards and store cards ( <i>include even if balance is nil</i> )	1.		\$	\$	\$	\$		<input type="checkbox"/>
	2.		\$	\$	\$	\$		<input type="checkbox"/>
	3.		\$	\$	\$	\$		<input type="checkbox"/>
	4.		\$	\$	\$	\$		<input type="checkbox"/>
	5.		\$	\$	\$	\$		<input type="checkbox"/>

### OTHER MONTHLY EXPENSES

	Pre loan	Post loan		
Fixed expenses ( <i>e.g. rent, etc</i> )	\$	\$		
Other expenses ( <i>e.g. general living costs, etc</i> )	\$	\$		



## Solicitors & Insurance Information

Solicitor / Conveyances Details (if applicable)

Name of Company	
Contact	
Address	
Phone	

Insurance Details

-----	Life Insurance	Trauma	Income Protection
Amount			
Provider			
Premium Paid			
Waiting Period	N/A	N/A	
Benefit Period	N/A	N/A	

Please indicate by ticking the appropriate box whether you would like the opportunity to discuss you insurance requirements, in any of the following areas;

- Personal Insurance
- Business Expense Insurance
- Key Person Insurance
- Business Succession Insurance
- Yes, please review my insurance requirements.
- No, I have already reviewed my insurance needs and I am satisfied that the level of cover I have meets my existing needs.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(Date)