

**Personal Information – Applicant 1**

**For Company / Trust Applicants (DO NOT COMPLETE THIS SECTION IF APPLYING AS INDIVIDUAL/S):**

Company / Trustee	<input type="text"/>	Trust Name	<input type="text"/>
ACN/ABN	<input type="text"/>	ABN	<input type="text"/>
Directors:	<input type="text"/>	Shareholders:	<input type="text"/>
		<small>Also show number of shares owned by each Shareholder</small>	
		Trust Primary Beneficiaries:	<input type="text"/>

**Title**    Mr    Mrs    Ms    Miss    Other

Surname    First names

Date of Birth  DD/MM/YYYY   Maiden name

**Marital Status**    Single    Married    De facto    Divorced    Widowed    Separated

**Dependants**

Number    Ages

**Residency Status**    Citizen    Resident    Non-Resident    Country

Home Phone	<input type="text"/>	Work Phone	<input type="text"/>
Mobile	<input type="text"/>	Email	<input type="text"/>
Drivers Licence	<input type="text"/>	Passport	<input type="text"/>
<small>State</small>	<small>Expiry</small> <input type="text"/> <small>DD/MM/YYYY</small>	<small>Expiry</small> <input type="text"/> <small>DD/MM/YYYY</small>	

**Current Residential Address**

Suburb

State    Postcode

**Previous Residential Address (if less than 2 years at current)**

Suburb

State    Postcode

Current Since  MM/YYYY   **(Important)**

From  MM/YYYY to  MM/YYYY   **(Important)**

Own Home – Mortgage    Own Home – no debts

Rent pw  \$    Boarding    Parents

Other (specify)

Own Home – Mortgage    Own Home – no debts

Renting    Boarding    Parents

Other (specify)

Mailing Address

**Nearest relative not living with you (Important):**

Name:    Address:

Phone/Email:     Mother    Father    Other

**Employment details – Applicant 1**

**Current Employment Status (more than one may apply)**

- Primary     Secondary     Retired     PAYG     Self Employed     Unemployed  
 Student     Home duties     Govt Benefit     Full time     Part time     Casual  
 Temporary     Public system     Private system     Other

Occupation

Since

Employer

Currently On Probation     Yes     No

**Employer or Company contact details (HR / payroll)**

Contact Name   
 Contact number   
 Contact email

**Employer or Company address**

Suburb   
 State     Postcode

**IF SELF EMPLOYED:**

ABN Number

**If a Company:**

List Directors   
 List Shareholders

**Accountants Details**

Name	Contact
Address	Phone    Fax

**Previous or Secondary Employment Status if applicable (attach extra sheet if more than 3 jobs in past 3 years)**

- Primary     Secondary     Retired     PAYG     Self Employed     Unemployed  
 Student     Home duties     Govt Benefit     Full time     Part time     Casual  
 Temporary     Public system     Private system     Other

Occupation

Employed From:  to:

Employer

(3 years employment history required)

**Employer or Company contact details (HR / payroll)**

Contact Name   
 Contact number   
 Contact email

**Employer or Company address**

Suburb   
 State     Postcode

**IF SELF EMPLOYED:**

ABN Number

**Accountants Details**

Name	Contact
Address	Phone    Fax

**Personal Information – Applicant 2**

**Title**     Mr     Mrs     Ms     Miss     Other

Surname     First names

Date of Birth     Maiden name

**Marital Status**     Single     Married     De facto     Divorced     Widowed     Separated

**Dependants**

Same as Applicant 1?     Yes     No ➔    Number     Ages

**Residency Status**     Citizen     Resident     Non-Resident    Country

Home Phone     Work Phone

Mobile     Email

Drivers Licence     Passport

State    Expiry    DD/MM/YYYY    Expiry    DD/MM/YYYY

**Current Residential Address**

Suburb

State    Postcode

**Previous Residential Address (if less than 2 years at current)**

Suburb

State    Postcode

Current Since     **(Important)**

From  to     **(Important)**

- Own Home – Mortgage     Own Home – no debts
- Rent pw \$      Boarding     Parents
- Other (specify)

- Own Home – Mortgage     Own Home – no debts
- Renting     Boarding     Parents
- Other (specify)

Mailing Address

**Nearest relative not living with you (Important - cannot be same as Applicant 1):**

Name:     Address:

Phone/Email:      Mother     Father     Other

**Employment details – Applicant 2**

**Current Employment Status (more than one may apply)**

- Primary     Secondary     Retired     PAYG     Self Employed     Unemployed  
 Student     Home duties     Govt Benefit     Full time     Part time     Casual  
 Temporary     Public system     Private system     Other

Occupation

Since

Employer

Currently On Probation     Yes     No

**Employer or Company contact details (HR / payroll)**

Contact Name   
 Contact number   
 Contact email

**Employer or Company address**

Suburb   
 State     Postcode

**IF SELF EMPLOYED:**

ABN Number

**If a Company:**

List Directors

List Shareholders   
Also show number of shares owned by each Shareholder

**Accountants Details**

Name	Contact
Address	Phone    Fax

**Previous or Secondary Employment Status if applicable (attach extra sheet if more than 3 jobs in past 3 years)**

- Primary     Secondary     Retired     PAYG     Self Employed     Unemployed  
 Student     Home duties     Govt Benefit     Full time     Part time     Casual  
 Temporary     Public system     Private system     Other

Occupation

Employed From:  to:

Employer

(3 years employment history required)

**Employer or Company contact details (HR / payroll)**

Contact Name   
 Contact number   
 Contact email

**Employer or Company address**

Suburb   
 State     Postcode

**IF SELF EMPLOYED:**

ABN Number

**Accountants Details (Name/Contact/Address/Phone/Fax)**

Name	Contact
Address	Phone    Fax

**Property Purchase information (if Purchasing)**

**Solicitor/Conveyancer Details (Name/Contact/Address/Phone/Fax)**

Name	Contact	
Address	Phone	Fax

**Property 1 Details**

	<input type="checkbox"/> House	<input type="checkbox"/> Unit	<input type="checkbox"/> Land	<input type="checkbox"/> Construction
Suburb	<input type="checkbox"/> Owner occupied	<input type="checkbox"/> Investment		
State	Postcode	Primary Security?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Finance Date		Settlement Date		
Purchase Price	\$	If Investment, expected weekly rent:	\$	
<b>Contact for access</b>				
Contact name	Name/s on Contract and percentage Ownership:			
Contact number				
Contact email				

**Property 2 Details**

	<input type="checkbox"/> House	<input type="checkbox"/> Unit	<input type="checkbox"/> Land	<input type="checkbox"/> Construction
Suburb	<input type="checkbox"/> Owner occupied	<input type="checkbox"/> Investment		
State	Postcode	Primary Security?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Finance Date		Settlement Date		
Purchase Price	\$	If Investment, expected weekly rent:	\$	
<b>Contact for access</b>				
Contact Name	Name/s on Contract and percentage Ownership:			
Contact number				
Contact email				

## Monthly Living Expenses

As part of our obligations under the Consumer Credit Code we are required to gather information relating to your ongoing living expenses. This is a **MANDATORY** activity under the Credit Code and all Lenders and Brokers are required to go through this process. It is important that the figures you allocate to each category are sensible and representative of your actual living expenses. Note that if they are overstated, it may have a significant negative impact on the amount that you are able to borrow, so please consider carefully when completing. We have a Budget Planner that may assist you in this process. Please click on the link below to access this Tool:

<http://www.lowdocloans.com.au/budget-planner-calculator.asp>

**PLEASE SPEND SOME TIME ON THIS AS  
THE OUTCOME MAY HAVE A SIGNIFICANT EFFECT ON THE  
MAXIMUM AMOUNT THAT YOU ARE ABLE TO BORROW**

## Estimated Living Expenses

CATEGORY	AMOUNT	FREQUENCY (CIRCLE)
Rates, Water and Electricity costs for the property that you live in	\$	Monthly / Annually
Rates, Water and Electricity costs for any investment properties that you own and that you pay for	\$	Monthly / Annually
Telephone, Mobile Phones and Internet	\$	Monthly / Annually
Pay TV	\$	Monthly / Annually
Groceries / Food	\$	Monthly / Annually
Recreation and Entertainment	\$	Monthly / Annually
Clothing & Personal Care	\$	Monthly / Annually
Medical & Heath (excluding Private Health Insurance Premiums)	\$	Monthly / Annually
Transport (including Petrol, Car Servicing, Rego and Car Insurance)	\$	Monthly / Annually
Education (including Private School Fees)	\$	Monthly / Annually
Child Care Fees	\$	Monthly / Annually
Insurances (Life, Sickness and Accident)	\$	Monthly / Annually
Other Expenses (Details below please):		
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually
_____	\$ _____	Monthly / Annually

**Property Assets**

**Property 1 Details**

Suburb	
State	Postcode

Estimated Value \$

Name/s on Current Title and percentage Ownership:

Name/s on Current Mortgage (if under Mortgage):

**If using as Security, Contact for Valuation access:**

Contact Name

Contact number

House     Unit     Land     Construction

Owner occupied     Investment

To be used as Security?     Yes     No

If Investment, current weekly rent: \$

**Current Mortgage Details:**

No Mortgage     Mortgaged (complete details below)

Who is mortgage with

Amount owed \$

Monthly Repayment \$

Interest Rate  %

If this Property is being used as Security, what do you estimate the current Loan Exit Costs to be :

\$

**Property 2 Details**

Suburb	
State	Postcode

Estimated Value \$

Name/s on Current Title and percentage Ownership:

Name/s on Current Mortgage (if under Mortgage):

**If using as Security, Contact for Valuation access:**

Contact Name

Contact number

House     Unit     Land     Construction

Owner occupied     Investment

To be used as Security?     Yes     No

If Investment, current weekly rent: \$

**Current Mortgage Details:**

No Mortgage     Mortgaged (complete details below)

Who is mortgage with

Amount owed \$

Monthly Repayment \$

Interest Rate  %

If this Property is being used as Security, what do you estimate the current Loan Exit Costs to be :

\$

***Please photocopy page if more than 2 properties***

**Other Assets**

**Cheque, savings, term deposit and other accounts are:**

Name of Institution <i>e.g. name of bank, building society, etc</i>	Account Type <i>e.g. cheque, savings, etc</i>	Owner(s) or percentage of ownership if not 50/50		Current Balance
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$

**Investments (superannuation, managed funds, life insurance, shares, unit trusts):**

Name of Institution <i>e.g. name of bank, building society, portfolio etc</i>	Investment Type <i>e.g. super, insurance, shares etc</i>	Owner(s) or percentage of ownership if not 50/50		Current cash balance
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$

**Motor Vehicles:**

Make and Model	Year Build	Owner(s) or percentage of ownership if not 50/50		Market Value
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
		<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$

**Other Assets (household items and personal effects, cash, boats, tools of trade, business equity):**

Brief description of assets <i>Do not provide a detailed list of assets</i>	Owner(s) or percentage of ownership if not 50/50		Market Value
Home Contents	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$
	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	%_____ %_____	\$



**Liabilities (please ensure you list ALL Liabilities)**

**Credit cards, store cards, unsecured overdrafts, etc:**

Include details of credit cards, store cards, etc even if you have a nil balance

Name of Lender <i>e.g. name of bank, store, etc</i>	Credit Type <i>e.g. MasterCard, Visa, etc</i>	Credit Limit	Minimum monthly repayment	Borrower	Amount owing (balance)	Refinance or consolidating this debt
			\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Other loans, including personal loans, vehicle leases, hire purchase**

Name of Lender <i>e.g. name of bank, store, etc</i>	Credit Type <i>e.g. MasterCard, Visa, etc</i>	Minimum monthly repayment	Borrower	Amount owing	Refinance or consolidating this loan / debt
		\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Other liabilities, including provisional taxation, HECS, guarantees on loans/leases**

Brief description of other liabilities	Minimum monthly repayment	Debtor / Guarantor	Amount owing	Refinance or consolidating this loan / debt
	\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Other**

**How long do you intend to keep this Loan for:**

- Less than 6 months
- 12 months to 24 months
- 6 to 12 months
- For the foreseeable future

**What are your objectives with this loan (please provide as much information as possible so that we can ensure that the Loan we propose is NOT unsuitable for you).**

**Examples**

*Home ownership: purchase of house to live in*

*Tax driven investment strategy: borrowing on existing equity to purchase investment property*

**Are there any circumstances that you can foresee that may affect your capacity to repay any proposed loan that we may arrange for you (eg: loss of employment, illnesses etc):**

- No
- Yes (provide details below):

**Type of loan sought:**

- Variable
  - ENTIRE Loan Amount OR

\$ \_\_\_\_\_

- Fixed for \_\_\_\_\_ Years
  - ENTIRE Loan Amount OR

\$ \_\_\_\_\_

**Are there any Lenders that you would prefer to deal with:**

- No
- Yes (list below)

**Are there any Lenders that you would prefer NOT to deal with:**

- No
- Yes (list below):

**Loan Features:**

- |                          |                                       |                                    |                                       |
|--------------------------|---------------------------------------|------------------------------------|---------------------------------------|
| Internet Banking         | <input type="checkbox"/> Not Required | <input type="checkbox"/> Mandatory | <input type="checkbox"/> Nice to have |
| Offset Account           | <input type="checkbox"/> Not Required | <input type="checkbox"/> Mandatory | <input type="checkbox"/> Nice to have |
| Split Loan Facilities    | <input type="checkbox"/> Not Required | <input type="checkbox"/> Mandatory | <input type="checkbox"/> Nice to have |
| Interest Only Facilities | <input type="checkbox"/> Not Required | <input type="checkbox"/> Mandatory | <input type="checkbox"/> Nice to have |

**Anything else that is important to you:**

**Insurances and Declaration**

**INSURANCES:**

As part of our obligations as a Mortgage Broker, we need to ensure that you have considered the various Insurance Policies available that offer protection to your family and your home in case of a catastrophic event occurring. You may OPT OUT of this Service by ticking either or both of the boxes below. If you do not OPT OUT, you agree to be contacted by TELEPHONE by our experts at TAL Australia and/or ALLIANZ to discuss insurance options that may be of interest to you. They will also provide you with an obligation free Quote for your consideration. If you decide to opt out, you acknowledge that we have offered you the opportunity to consider Life Protection products offered by our Business Partners.

**OPT OUT**

- DO NOT** have **ALLIANZ** contact me regarding General Insurance Products (Home & Contents, Landlords or Car Insurance).
  
- DO NOT** have **TAL** contact me regarding Income and Life Protection Products.

**APPLICANT 1:**

Have you ever been **BANKRUPT**  No  Yes  
If **YES**, when were you discharged?

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**APPLICANT 2:**

Have you ever been **BANKRUPT**  No  Yes  
If **YES**, when were you discharged?

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_