Financially Fit Finance

FACT FINDER

APPLICANT 1 - PERSONAL DETAILS

ABN:

TITLE	GIVEN NAME(S)	SURNAME	DATE OF BIRTH	DRIVER'S LIC FRONT DRIVER'S LIC BACK

MARITAL STATUS	N° OF DEPENDANTS AGES	FULL NAME OF YOUR PARTNER	RESIDENTIAL ADDRESS	POST CODE

DATE YOU MOVED HERE	PERSONAL EMAIL ADDRESS : WORK EMAIL ADDRESS :	HOME TELEPHONE N°	MOBILE TELEPHONE N°

LANDLORD NAME (IF RENTING)	LANDLORD TELEPHONE N°	PREVIOUS ADDRESS (IF CURRENT ADDRESSS IS LESS THAN 3 YRS)	POST CODE	YEARS/MONTH AT THIS ADDRESS

APPLICANT 1 - EMPLOYMENT CONTACT DETAILS

OCCUPATION	EMPLOYER'S NAME & A.C.N. / A.B.N.	EMPLOYER'S ADDRESS	POST CODE

EMPLOYER'S TELEPHONE N°	INDUSTRY TYPE	DATE COMMENCED WITH CURRENT EMPLOYER	YEARS IN INDUSTRY

JOB STATUS: ☐ FULL TIME PERMANENT ☐ PART TIME PERMANENT ☐ CASUAL ☐ CONTRACT ☐ SELF EMPLOYED

PREVIOUS EMPLOYER'S CONTACT NAME AND TITLE	YEARS WITH PREVIOUS EMPLOYER

APPLICANT 2 - PERSONAL DETAILS

TITLE	GIVEN NAME(S)	SURNAME	DATE OF BIRTH	DRIVER'S LICENCE N°

DATE YOU MOVED HERE	PERSONAL EMAIL ADDRESS : WORK EMAIL ADDRESS :	HOME TELEPHONE N°	MOBILE TELEPHONE N°

APPLICANT 2 - EMPLOYMENT CONTACT DETAILS

OCCUPATION	EMPLOYER'S NAME & A.C.N. / A.B.N.	EMPLOYER'S ADDRESS	POST CODE

EMPLOYER'S TELEPHONE N°	INDUSTRY TYPE	DATE COMMENCED WITH CURRENT EMPLOYER	YEARS IN INDUSTRY

JOB STATUS: ☐ FULL TIME PERMANENT ☐ PART TIME PERMANENT ☐ CASUAL ☐ CONTRACT ☐ SELF EMPLOYED

PREVIOUS EMPLOYER'S CONTACT NAME AND TITLE	YEARS WITH PREVIOUS EMPLOYER

MONTHLY INCOME PER MONTH

	BEFORE TAX	AFTER TAX
APPLICANT'S MONTHLY INCOME		
PARTNER'S MONTHLY INCOME		
OTHER MONTHLY INCOME - GIVE DETAILS		
TOTAL INCOME PER MONTH		

LIVING EXPENSES PER MONTH

	AMOUNT ($)
RENT (If applicable)	
FOOD	
TRANSPORT	
BILLS (UTILITIES + TELEPHONE)	
ALL INSURANCE	
CLOTHING	
ENTERTAINMENT	
EDUCATION	
OTHER	
TOTAL PAYMENTS PER MONTH	

DECLARATION AND SIGNATURE | Complete all details on this application form before signing the declaration.

I have read and understood the particulars which have been completed in this application and state that those particulars are true, complete and correct, and have been made in order to determine whether Financial Fit Finance may or may not to offer me finance for vehicle, equipment or unsecured loan.

APPLICANT'S SIGNATURE :

DATE : / / 20

Financially Fit Finance

ASSET & LIABILITY STATEMENT

ASSETS	$ 000s
Land and Buildings (Address)	
Motor Vehicles, Year, Make & Model	
Cash/Saving Accounts	
Other	
Investments	
Shares	
Furniture	
Personal Assets	
Superannuation	
TOTAL ASSETS	

LIABILITIES			PER MONTH
Mortgages (Bank/Institution)	**Amount Borrowed($)**	**Balance($)**	**Repayment($)**
Car Loan	**Amount Borrowed($)**	**Balance($)**	**Repayment($)**
Credit Cards	**Limit($)**	**Balance($)**	**Repayment($)**
Personal Loans	**Amount Borrowed($)**	**Balance($)**	**Repayment($)**
Store Cards	**Limit($)**	**Balance($)**	**Repayment($)**
Bank Overdraft	**Limit($)**	**Balance($)**	**Repayment($)**
Other Liabilities, please list.	**Amount Borrowed($)**	**Balance($)**	**Repayment($)**
TOTAL LIABILITIES			

Reference Name	Address	Telephone Number
1.		
2.		

I/We hereby certify that the above is a full and true statement of my/our assets and liabilities as at today

dated _____/_____/20_____.

I/We am/are not (an) undischarged bankrupts(s) and that there are no outstanding judgments or claims against me/us. I/We further certify that none of the assets started above are held in any trust or by any entity other than me/us except where started.

APPLICANT 1 SIGNATURE :

APPLICANT 2 SIGNATURE :