

NATIONAL CREDIT ACT REQUIREMENTS

In terms of the National Credit Act (Act No. 34 of 2005), the credit provider (Huisvriend) is required to obtain certain information and consent from the applicant before credit may be granted. Please complete all sections in full:

INCOME AND EXPENSES

Weekly Wage	Own	<input style="width: 80px;" type="text"/>	X 4 =	<input style="width: 80px;" type="text"/>
	Spouse	<input style="width: 80px;" type="text"/>	X 4 =	<input style="width: 80px;" type="text"/>
"Fortnight" Loan	Own	<input style="width: 80px;" type="text"/>	X 2 =	<input style="width: 80px;" type="text"/>
	Spouse	<input style="width: 80px;" type="text"/>	X 2 =	<input style="width: 80px;" type="text"/>

Monthly Salary	Own.....	<input style="width: 80px;" type="text"/>
	Spouse.....	<input style="width: 80px;" type="text"/>
Regular Overtime	Own.....	<input style="width: 80px;" type="text"/>
	Spouse.....	<input style="width: 80px;" type="text"/>
Commission	Own.....	<input style="width: 80px;" type="text"/>
	Spouse.....	<input style="width: 80px;" type="text"/>
Pension	Own.....	<input style="width: 80px;" type="text"/>
	Spouse.....	<input style="width: 80px;" type="text"/>
Other	Own.....	<input style="width: 80px;" type="text"/>
	Spouse.....	<input style="width: 80px;" type="text"/>

Total Income:

Housing – Mortgage / Rent / Lodging.....	<input style="width: 120px;" type="text"/>
Utilities - Electricity / Water.....	<input style="width: 120px;" type="text"/>
Child Support.....	<input style="width: 120px;" type="text"/>
Clothing / Clothing Accounts.....	<input style="width: 120px;" type="text"/>
Groceries - Monthly.....	<input style="width: 120px;" type="text"/>
Medical Expenses - Pharmacy / Doctors....	<input style="width: 120px;" type="text"/>
Furniture Accounts.....	<input style="width: 120px;" type="text"/>
School Fees / Crèche / Aftercare.....	<input style="width: 120px;" type="text"/>
Insurance - Short-Term / Life.....	<input style="width: 120px;" type="text"/>
Transport – Vehicle / Taxi / Fuel.....	<input style="width: 120px;" type="text"/>

Total Essential Expenses:

BANKING DETAILS

Salary Paid Electronically			YES	NO
Bank	<input style="width: 90%; height: 20px;" type="text"/>			
Branch Code	<input style="width: 90%; height: 20px;" type="text"/>			
Acc. No.	<input style="width: 90%; height: 20px;" type="text"/>			
Acc. Type	Savings / Transmission	Current		

Credit Cards / Hire Purchase.....	<input style="width: 120px;" type="text"/>
Loans (Micro / Personal).....	<input style="width: 120px;" type="text"/>
Undisclosed Debt.....	<input style="width: 120px;" type="text"/>

Total Debt Obligations:

TOTAL EXPENSES:

NET DISPOSABLE INCOME:

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APPLICANT CONFIRMATION

The applicant is requested to answer the following questions:

Do you give us permission to visit you at your home in the future?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
May we increase your credit limit if your payment record and affordability allow it?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
May we assess your creditworthiness with the relevant credit bureaus?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you recently applied for debt review, or are you currently under debt review or administration?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Do you intend to apply for debt review or administration?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Which payment method do you prefer?	<input type="checkbox"/> CASH	<input type="checkbox"/> CREDIT

Delivery instructions

The applicant(s) hereby nominate either of the following two persons, over the age of 16 years, to receive the goods on his/her behalf:

1 <input style="width: 90%; height: 20px;" type="text"/>	2 <input style="width: 90%; height: 20px;" type="text"/>
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Signature of Applicant(s):

APPLICANT	SPOUSE
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Once the form has been fully completed, please email a copy to info@huisvriend.co.za