

# Statement of Financial Position

LOAN IDENTIFICATION NUMBER

## PERSONAL DETAILS

### BORROWER 1

Title  Mr  Mrs  Miss  Ms  Other

Surname

First and Middle Names

Phone  Home  Work

Mobile  Fax

Email Address

Date of Birth  /  /  Age

Marital Status

Ages of Dependents

Drivers Licence No.

Present Address  Postcode  Time at Address

Future Address (If Applicable)  Postcode

Employer (If self-employed please indicate below and use trading name)

Position OR Occupation

Employers Phone

Length of Service

Address of Employer OR Own Business

### BORROWER 2

Title  Mr  Mrs  Miss  Ms  Other

Surname

First and Middle Names

Phone  Home  Work

Mobile  Fax

Email Address

Date of Birth  /  /  Age

Marital Status

Ages of Dependents

Drivers Licence No.

Present Address  Postcode  Time at Address

Future Address (If Applicable)  Postcode

Employer (If self-employed please indicate below and use trading name)

Position OR Occupation

Employers Phone

Length of Service

Address of Employer OR Own Business

Are you an office holder of any companies? (Please tick the appropriate box)  Yes  No

If so, please supply details:

## FINANCIAL DETAILS

**Please Note: If you require more space than provided for any details in this document, please use a separate sheet of paper or write on the back of this form.**

Please Indicate whether you have completed your financial details on a weekly, fortnightly or monthly basis (Tick the appropriate box).

 Weekly

 Fortnightly

 Monthly

### INCOME

After Tax Wages (Person 1) \$

After Tax Wages (Person 2) \$

### OTHER SOURCES OF INCOME

Bonds \$

Dividends \$

Rent/Board \$

Other (Please State) \$

\$

\$

Unemployment Benefits \$

### FAMILY ALLOWANCE

Basic \$

Additional \$

Rent Assistance \$

Other (Please State) \$

\$

\$

\$

\$

**TOTAL MONTHLY INCOME** \$

### EXPENDITURE

Mortgage or Rent \$

Credit Card Repayments \$

### HOUSEHOLD/LIVING COSTS

Rates/Water \$

Telephone \$

Electricity/Gas \$

Food \$

Clothing \$

Personal (Grooming etc.) \$

Entertainment \$

Other (Please State) \$

\$

\$

Medical (Please State) \$

### CAR COSTS

Petrol \$

Repairs/ Registration/Insurance \$

Repayments on other borrowings \$

Any Other Costs (Please indicate) \$

**TOTAL MONTHLY EXPENDITURE** \$

## ASSETS (ANYTHING YOU OWN)

Market value of this property	\$
Other real estate owned	\$
Furniture	\$
Investments (Shares etc.)	\$
Bank/Building Society Funds	\$

### CAR 1

Make	
Model	
Year	

### CAR 2 (IF MORE THAN 1 CAR)

Make	
Model	
Year	

Other Assets	\$
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<b>TOTAL ASSETS</b>	\$
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## LIABILITIES (ANYTHING YOU OWE)

Mortgage(s)	\$
Hire Purchase	\$
Personal Loans	\$
Credit Cards	\$
Department Store Cards	\$

### OTHER LIABILITIES (PLEASE STATE BELOW)

	\$
	\$
	\$

### NOTES

<b>TOTAL LIABILITIES</b>	\$
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Is any money owed to you?  Yes  No

Name (Who owes you money?)	Reason money is owed to you	Total amount now owed	Monthly Payments (\$)	Date final payment due to be repaid	Contact phone number
\$	\$	\$	\$	\$	\$
\$	\$	\$	\$	\$	\$

## DECLARATION

I/we declare that all particulars completed on this form are true and correct. I/we give permission to Pepper Australia Pty Ltd, to check and confirm the information given. I/we undertake to notify Pepper Australia Pty Ltd of any change in my/our financial position and/or any change of address or telephone number.

I/we are able to commit to a repayment amount of: \$  Per (Tick the appropriate box)  Week  Fortnight  Month

The first payment will be made on (subject to acceptance by Pepper):

Borrower	<input type="text"/>	Signature	<input type="text"/>
Date	<input type="text"/>		
Borrower	<input type="text"/>	Signature	<input type="text"/>
Date	<input type="text"/>		