



Loan Details

Sub- Account 1 (mandatory)	
Loan Amount \$, , , , , , , , , , , , , , , , , ,	Term years (max 30 years)
Loan Purpose Private and / or Domestic	Business and / or Investment
Repayment type Principal & Interest Inter	est Only
Complete if "Interest only" Interest Only Period 1 year	2 years 4 years 5 years
Sub- Account 2 (if required)	
Loan Amount \$, , , , , , , , , , , , , , , , , ,	Term years (max 30 years)
Loan Purpose Private and / or Domestic	Business and / or Investment
Repayment type Principal & Interest Inter	est Only
Complete if "Interest Only Period 1 year 1	2 years 4 years 5 years
VERI	FICATION TYPE
What will be the Verification type?	Lo Doc
Applicant Declaration	
This declaration need only be sign	ed if the customer is not signing the oplication for finance form
I/we acknowledge/certify that:	pheaton for infance form
the Credit Provider by any other means, including the a	ned in this loan application and any other information submitted to above information which was provided by me/us in or with my/our loan y/our ability to make loan repayments and approve my/our loan
submitted to the Credit Provider by any other means, in	ation contained in this loan application and any other information including the above information which was provided by me / us in or wider to assess my/our ability to make loan repayments and approve
· · · · · · · · · · · · · · · · · · ·	/our loan application is true and correct and that I/we can afford to the loan terms and without substantial financial hardship; and
 I/we have considered my/our financial position and have consider appropriate in connection with my/our propos 	re or will seek appropriate financial and other relevant advice as I/we ed loan.
The Applicant(s) each acknowledge that the Credit Provider Applicant(s) in this certification/acknowledgement.	relies upon the certifications and acknowledgement given by the
All Applicants to sign and date below	
Applicant 1: Signature Date:	Applicant 2: Signature Date:
/ / 20	/ /20
Print in BLOCK letters	Print in BLOCK letters
Applicant 3: Signature Date:	Applicant 4: Signature Date:
/ / 20	/ / 20
Print in BLOCK letters	Print in BLOCK letters





Individual Details

Complete a separate page for each	h Individual Applican	ant / Guarantor		
Which Applicant is this?	Applicant 1	Applicant 2	Applicant 3	Applicant 4
Is applicant acting in capacity as guar	rantor? Ye	Yes No		
Full Name				
Title First Name		Middle	e name(s)	
Middle name(s)	L	Last Name		
Trust Name- if Applicant is making this ap	plication in its capacity a	as trustee of a trust		
If Applicant is making this application	as trustee of a trust, i	, is the trust a Superannuation	trust? Yes	No
Drivers licence number			Date of Birth	
Current Address			D	D M M Y Y
Unit No. Street No.	Street/Road Name			Street Type
Suburb			State	Postcode
Post settlement address (if differen	nt to current address	SS)		
Unit No. Street No.	Street/Road Name			Street Type
Suburb			State	Postcode
Contact Details Phone Number		Mobile Phone Number		
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				J
Does this Applicant have a HECs/ Pl		Yes No		
Residency Status Permanent		· · · · · · · · · · · · · · · · · · ·	ength of continuous resi	1 <u></u> i
Citizen	Other	Yes No	years	months
Dependents Number of Depender	nts (who aren't Applicants	nts) NB: please insert '0' if i	no dependents	
Employment/ Self Employment det	ails			
Employer's/ Self Employed Business' trac	ding name as shown in W	White Pages	N	onths in current position
				months
ABN (if Self Employed income earner)		Months self empl	loyed Months c	ontinuously employed
		n	nonths	months
Applicant's nearest living relative i	n Australia (must no	ot be an Applicant)	if less than	12 in current position
First Name	L	Last Name		
Phone Number		Mobile Phone Number		
Accountant's details (For full doc s	self employed income	me earners)		-
Trading Name				
First Name	L:	Last Name		
Phone Number		Mobile Phone Number		1
Privacy Declaration				
Privacy Declaration held for this Applicant	? Yes No	No Date of Privacy Declar	ation for Applicant	
				D M M Y Y





Individual Details

Complete a separate page for each	h Individual Applican	ant / Guarantor		
Which Applicant is this?	Applicant 1	Applicant 2	Applicant 3	Applicant 4
Is applicant acting in capacity as guar	rantor? Ye	Yes No		
Full Name				
Title First Name		Middle	e name(s)	
Middle name(s)	L	Last Name		
Trust Name- if Applicant is making this ap	plication in its capacity a	as trustee of a trust		
If Applicant is making this application	as trustee of a trust, i	, is the trust a Superannuation	trust? Yes	No
Drivers licence number			Date of Birth	
Current Address			D	D M M Y Y
Unit No. Street No.	Street/Road Name			Street Type
Suburb			State	Postcode
Post settlement address (if differen	nt to current address	SS)		
Unit No. Street No.	Street/Road Name			Street Type
Suburb			State	Postcode
Contact Details Phone Number		Mobile Phone Number		
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				J
Does this Applicant have a HECs/ Pl		Yes No		
Residency Status Permanent		· · · · · · · · · · · · · · · · · · ·	ength of continuous resi	1 <u></u> i
Citizen	Other	Yes No	years	months
Dependents Number of Depender	nts (who aren't Applicants	nts) NB: please insert '0' if i	no dependents	
Employment/ Self Employment det	ails			
Employer's/ Self Employed Business' trac	ding name as shown in W	White Pages	N	onths in current position
				months
ABN (if Self Employed income earner)		Months self empl	loyed Months c	ontinuously employed
		n	nonths	months
Applicant's nearest living relative i	n Australia (must no	ot be an Applicant)	if less than	12 in current position
First Name	L	Last Name		
Phone Number		Mobile Phone Number		
Accountant's details (For full doc s	self employed income	me earners)		-
Trading Name				
First Name	L:	Last Name		
Phone Number		Mobile Phone Number		1
Privacy Declaration				
Privacy Declaration held for this Applicant	? Yes No	No Date of Privacy Declar	ation for Applicant	
				D M M Y Y





Company Details

Complete	a separate	page for eac	ch Comp	oany App	licant.											
Which App	plicant is thi	is?		Applicant 1			Applic	ant 2		Applica	ınt 3		Ap	plicant	4	
Company N	lame															
Type:	Inc.	NL	Pt	ty Ltd	Ltd		0	ther								
Is Company	acting in capa	acity as Guara	intor?	Y	es	No	L	ength of	time in	current indu	stry?				month	s
Trust Name																
If Applicant is the trust a	is making this a Superannuat	application as tion Trust?	trustee of	f a trust,	Yes		No			Applicant a prporation?	Strata		es	No		
ACN:		-				ABN:			- 🗌		_					
Current Ad	ddress															
Unit No.	Street No		Street/	Road Nam	ne								Stre	et Typ	е	
Suburb										State			Postcode	;		
Post settle	ement addre	ess (if differe	ent to cu	rrent add	Iress)											
Unit No.	Street No	-	Street/	Road Nam	ne								Stre	et Typ	е	
Suburb										State			Postcode	;		
Accountar	nt's details (For full doc	self em	ployed in	come e	arne	rs)									
Trading Nar	me															
First Name					Last	Nam	e									
Phone Num	ber					Mob	ile Pho	ne Numb	er							
()															
Privacy De	eclaration															
Privacy Dec	claration held f	or this Applica	nt?	Yes	No		Date o	of Privac	y Declar	ation for Ap	plicant					
												D	D M	M	Υ	Υ

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Security Property Details

-	irale page for each	n Security Prop	erty.							
Security Propert										_
Unit No. Stre	eet No.	Street/Road Nar	me						Street 7	Гуре
Suburb						S	tate	Po	stcode	
Title Particulars (if k	nown)									
Ownership			г	_					7	
Who will Own this P	roperty?	Applicant	1 _	Applic	ant 2	A	pplicant 3	_ L	Applica	ant 4
Property Type	House	,	Apartment		Service	d Apartmen	t _	Vacant L	and	
	Townhou	ıse	Unit		Duplex			Other		
Property Value										
Is the Property bein	g Purchased?	Yes	No							
Complete if YES	Contract	of Sale Price: \$, 🔲 🗀						
Complete if NO	Estimated Value	e of Property: \$, 🔲 🗀	$ \bigcup $, $ $					
Investment										
Is the Property a Re	ental Investment?	Yes	No							
Complete if YES	Rental Value	e (per month) \$,						
First Home Owne	ers Grant					_				
Does this Applicant	qualify for First Home	e Owners Grant Sc	cheme?		Yes	No				
Existing Mortgag	e Details (where the	he property is no	t being pu	ırchased)						
Is the Property curre	ently mortgaged to an	yone?	Yes	No						
Complete if YES	First Mortgagee Na	me				Accoun	t Number			
	Second Mortgagee	Name (if applicabl	e)			Accoun	t Number			
Number of Arrears i	n Last 6 months? (gre	eater than 30 days)							
Number of Current	Arrears?									
Construction										
Is the Property bein	g constructed?	Yes	No							
Complete if YES	Land	d Value: \$	\square , \square		$ \Box \Box$					
F	Fixed Price Building C	Contract: \$								

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Assets

Deposit paid on real estate assets being purchased and to be	ре о	ffer	ed a	s Se	curi	ity fo	r this	з ар					
Property Address		Am	ount	Paid					Which	Applio 1	cant(s)	owns 3	this Asse
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Real estate assets being refinanced and to be offered as Se	\$ CUP	ity (, Subi	oct o	of thi	_, s ∆nr	licat	ion)	J				
Real estate assets being remianced and to be offered as se	cui	ity (oubj	COL	וווו וכ	s Thi	nicat	1011)	Which	Applio	cant(s)	owns	this Asse
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Motor Vehicles									_				
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Shares/ Managed funds									\	A II:			4la:a A a a a
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Liabilities & Expenses

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Existing mortgages over the o	ccurity	prope	, L y (3, 0	,,,,	iis Ap	piice	1110	,,,							Bei	ng pa	aid	W	hich A	Applica is Liab	nt(s)
Property Address/ Mortgagee								Р	ayou	t Fi	gure	:				o settl	ut at eme	nt?	1	2	3	4
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Other Mortgages over property	/(s) not Is this a		ect to	o tn	IS F	ррис	ation									Be	ing p	aid			pplica	
Property Address/ Mortgagee	nvestme loan?	nt	onthly	, Pa	กองเ	mont		Cı	urrer	1 l i	imit						out a	t		es th	s Liab 3	lity? ₄
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Credit cards/ Store cards/ Inter	rest fre	e stor	e fac	ciliti	es											Re	ing p	hier	W	hich A	Applica	nt(s)
Card type/ Lender											Cur	rant l	imit				out a	ıt			is Liab	ility?
Card type/ Lender										\$	Curi	rent I	-111111			Set] [tleme	311L?	1	2	3	7 4
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Unpaid Defaults / Judgments		\$,[,			\$,				, , ,				ina s		w	hich 4	Annlica	nt(s)
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Unpaid Defaults / Judgments Description		\$					\$			Am	ount		,				eing p out a tleme	ıt		hich Aves th	Applica is Liab	nt(s) ility?
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Description		\$],[\$		\$			nthly	, , , , , , , , , , , , , , , , , , ,	ense		set	out a	ent?	1 W pa	2 hich A	3 Applica	4 nt(s)
Description Rental Expense		\$],[\$		\$	\$,,,,,	ense		set	eing p	ent?	1 W pa	hich A	3 Applicas Expe	att(s) nse?
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Description Rental Expense Property Address Other Expenses		\$					\$		\$	\$ \$ \$	Mor	nthly	,			set Bee	eing pout a	ent?	WI pay	hich Ays thi	Applicas Expe	nt(s) nse? 4 nt(s) nse?





Income

Self employed income (Full Doc)										Wł	nich Ap	plican	t(s)
Description		Gro	ss M	lonthl	y lı	nco	me			ea 1	rns this	3 Incon	ne? 4
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Self employed income (Self Certified, as per Self Certified Declara	tior	1)								WI	hich A	oplican	t(s)
Description		Gro	ss M	lonthl	y lı	nco	me			ea 1	rns thi	s Incor 3	ne?
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PAYG- Full time income										W	hich Ap	oplican	t(s)
Employer		Gro	ss M	lonthl	y lı	nco	me			ea 1	rns thi	s Incor 3	ne?
	\$],[
	\$],[
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PAYG - Part time, casual, bonus, commission, shift or Motor Vehic	cle	allo	wan	ce ir	nc	om	е			WI	hich Ap	oplican	t(s)
Employer		Gro	ss M	lonthl	y lı	nco	me			ea 1	rns thi	s Incor	ne?
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PAYG - Regular Overtime Income										WI	hich A	plicar	t(s)
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Rental Income									Is this a	WI	hich Ap	oplican	t(s)
Rental Property Address			Gro	ss M	on	thly	Inco	me	Security Property?	1	2	3	4
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		\$],								
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Investment Income (dividends, annuities, interest)										WI ea	hich Ap	oplican s Incor	it(s) ne?
Description		ሱ	Gro	ss M	ont] [thly	inco	me		1	2	3	4
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What



Privacy Declaration

Permission to obtain and disclose credit and personal information

What information		Act) allows certain inform to be disclosed, includi		out each applicant/guarantor referre	ed to in this
can be disclosed?	information that identif		, date of	birth, current and previous address	es, your current/last
	the fact that you have you have agreed to be		e amoun	t, or that we are a current credit pro	vider to you, or that
	advice that payments	previously notified as un	paid are	no longer overdue;	
	· payments overdue for	at least 60 days and for	which co	ollection action has started;	
	 cheques for more than 	1 \$100 drawn by you wh	ich have	been dishonoured more than once;	
	 in specified circumstar 	nces, that in our opinion	you have	e committed a serious credit infringe	ement;
	 the fact that credit pro 	vided to you by us has b	een paid	or otherwise discharged;	
	 other information about the Act, including a creat 		ess, hist	ory or capacity that credit providers	can disclose under
	Cred	it Providers		Guarantors	i
Who can give or obtain information?	We (your loan originator) any introducer, dealer or application, any person a application, and other en securitisation of your loat together, the Credit Province.	broker referred to in the assisting in processing the tities involved in the fundam, (each a Credit Provide)	loan ne loan ding or	The Credit Providers may give a g who is considering becoming a gu information about you for the purp guarantor to decide whether to ack keep informed about the guarante Lenders mortgage and trade ins	arantor, credit ose of enabling the t as guarantor or to e.
	 obtain a commercial a containing information reporting agency; 	nd a consumer credit re about you from a credit		A lender's mortgage insurer or a remay obtain a consumer credit reported Provider or from a credit reported in the consumer and the credit reported in the consumer credit reported in the con	ort about you from a
	 exchange credit inforn other; 	nation about you with ea	ch	assess whether to provide lenders insurance/trade insurance to us in	mortgage
		any other provider of cre dit application or a credi	dit to		
When can information	This information can be of for the various purposes			lit Providers before, during or after t	the provision of credit,
be obtained or disclosed				r the applicant, assessing your cred your loan is funded or collecting ove	
	 if you are in default un and any of our collecti 		notifying	and exchanging information with of	ther credit providers
	 to allow a credit report 	ing agency to create or	maintain	a credit information file about you.	
Marketing purposes	only available from a cre	dit file for marketing our ces (supplied by us or o	products	entities, information about you other with you. If you do not want to record providers) which we consider m	eive any information
Your authority to the credit providers	By signing this declaration information and you auth specified above until the	orise the Credit Provide	ving read rs to give	and understood this permission to and obtain, in accordance with the	obtain and disclose Act, the information
All Applicants to	sign and date below				
Applicant 1: Signatu		Date:	Applican	nt 2: Signature	Date:

Applicant 1. Signature	Date.		Applicant 2. Signature	Date.	
	1	/ 20		1	/ 20
Print Full Name in BLOCK letters			Print Full Name in BLOCK letters		
Applicant 3: Signature	Date:		Applicant 4: Signature	Date:	
	/	/ 20		/	/ 20
Print Full Name in BLOCK letters	-		Print Full Name in BLOCK letters	-	





Applicant Identity Verification

Complete one table for each Applicant totalling a minimum of 100 points

Please note: At least one identification document must show the Applicants full legal name (e.g John Barry Smith) and must match the name as shown on the Applicant's Individual Details page.

Also note: if the Applicant's last name as it appears on the Medicare card differs from the name appearing on the Applicant's other identity documents, please provide a copy of a supplementary document (e.g. marriage certificate or deed poll) confirming that both names identify the Applicant as one and the same person.

Applicant Document Type	Medicare Card - Compulsory (25 Points)	Citizenship - Passport or Birth Certificate (70 Points)	Drivers Licence (40 Points)	Other
Full name as appears on Document				
Date of Birth as shown				
Document No.				
Applicant Document Type	Medicare Card - Compulsory (25 Points)	Citizenship - Passport or Birth Certificate (70 Points)	Drivers Licence (40 Points)	Other
Full name as appears on Document				
Date of Birth as shown				
Document No.				
Applicant Document Type	Medicare Card - Compulsory (25 Points)	Citizenship - Passport or Birth Certificate (70 Points)	Drivers Licence (40 Points)	Other
Applicant Document Type Full name as appears on Document				Other
Document Type Full name as appears on				Other
Full name as appears on Document				Other
Full name as appears on Document Date of Birth as shown				Other
Document Type Full name as appears on Document Date of Birth as shown Document No. Applicant	Compulsory (25 Points) Medicare Card -	Birth Certificate (70 Points) Citizenship - Passport or	(40 Points) Drivers Licence	
Document Type Full name as appears on Document Date of Birth as shown Document No. Applicant Document Type Full name as appears on	Compulsory (25 Points) Medicare Card -	Birth Certificate (70 Points) Citizenship - Passport or	(40 Points) Drivers Licence	

Mortgage Manager / Mortgage Introducer Declaration

I declare:

- 1. I have sighted the originals of all Identity Verification Documents (referred above) and confirm the personal identity of the Applicant; and
- 2. I have in my possession photocopies of all Identity Verification Documents (referred above) and that the identification documents are attached to the Mobius Applicant Identity Verification.

I attach a copy of the Medicare Card for the Applicant identified above and certify that it is a true representation of the Medicare Card sighted.

Mortgage Manager / Mortgage Introducer (delete as appropriate)	Date: / / 20	
	Print full name in BLOCK Letters	
Signature		





Individual Self Certified Declaration (Lo Doc)

Complete a separate box for each Indiv	vidual Applicant				
Which Applicant is this?	Applicant 1	Applicant 2	Applicant 3	Applicant 4	
Name of Individual Applicant making t	his declaration				
Print in BLOCK letters: First Name	Last Na	ame			
ABN (if Self Employed income earner)	M	onths Self-Employed?	My average GROSS M	onthly Income is:	
		months	\$	per month	
Which Applicant is this?	Applicant 1	Applicant 2	Applicant 3	Applicant 4	
Name of Individual Applicant making this declaration					
Print in BLOCK letters: First Name	Last Na	ame			
APAL (if Solf Francisco di incomo a cura ri		antha Calf Francisco do	My system CDOCC M	anthir in an ann in i	
ABN (if Self Employed income earner)	IMI	onths Self-Employed?	My average GROSS M	ontnly income is:	
		months	\$,	per month	
Which Applicant is this?	Applicant 1	Applicant 2	Applicant 3	Applicant 4	
Name of Individual Applicant making t					
Print in BLOCK letters: First Name	Last Na	ame			
ABN (if Self Employed income earner)	M	onths Self-Employed?	My average GROSS M	onthly Income is:	
		months	\$,,	per month	
Applicant Declaration					
I/we acknowledge/certify that:	or to not require decum	antani avidanaa af m	w/our income outgoing	a coacta and liabilities:	
1. I/we have requested the Credit Provide	· ·	-			
the Credit Provider will rely upon the ir Credit Provider by any other means, ir					
application in order for the Credit Prov					
I/we certify the correctness and accura		-	• •	* * * * * * * * * * * * * * * * * * * *	
to the Credit Provider by any other me					
application in order for the Credit Prov	ider to assess my/our a	ibility to make loan re	payments and approve	my/our loan application;	
4. the Credit Provider has not independe loan application and any other informa				ne/us in or with my/our	
5. I/we declare that the information provide	ded in or with my/our lo	an application is true	and correct and that I/w	ve can afford to make	
the relevant loan repayments in accord					
6. I/we have considered my/our financial consider appropriate in connection with			nancial and other releva	ant advice as I/we	
The Applicant(s) each acknowledge that the			ns and acknowledgmen	t given by the Applicant	
(s) in this certification/acknowledgment.				t give in a y time y in principle.	
All Applicants to sign and date below		,			
Applicant 1: Signature	Date:	Applicant 2: Signature)	Date:	
	/ / 20			/ / 20	
Print Full Name in BLOCK letters	'	Print Full Name in BLO	CK letters		
	1	_			
Applicant 3: Signature	Date:	Applicant 4: Signature)	Date:	
	/ / 20			/ / 20	
Print Full Name in BLOCK letters	1	Print Full Name in BLO	OCK letters	1	





Company Applicant Declaration

Company Declaration: Acknowledgement of Reliance on Information Provided by Applicant Company Name						
Name of Company Director making Declarati	on on behalf of this Comp	pany				
First Name	Last Name	e				
Company Applicant Declaration						
1. I/We declare that this Company's average MONTHLY profit before tax is \$,per month.						
2. I/We declare that this Company has been operating in its industry for months.						
I/We acknowledge that the Company he evidence of the Company's income, out the company has been supported by the company has been suppo			r not require documentary			
 I/We acknowledge that the Credit Provinformation which was provided by the to make loan repayments and approve 	Company in or with its le					
5. I/We acknowledge that the Credit Provider has not independently verified the information relating to the Company's income provided by it in or with its loan application.						
I/We declare that I/we am/are duly app the information provided in or (in conne afford to make the relevant loan repay)	ection) with the Company	y's loan application is true and correct	and that the Company can			
Director's Signature	Date:	Director / Secretary Signature	Date:			
	/ /20	,	/ / 20			
Print Full Name in BLOCK letters	, , , 20	Print Full Name in BLOCK letters				





Business Purpose Declaration

Complete a separate box for each Indiv	vidual Applicant	_				
Which Applicant is this?	Applicant 1	Applicant 2	Applicant 3 Applicant 4			
Name of Individual Applicant making this declaration						
Print in BLOCK letters: First Name	Last Na	me Time				
ABN (if Self Employed income earner)	Mo	onths Self-Employed?	My average GROSS Monthly Income is:			
	<u> </u>	months	\$,per month			
Which Applicant is this? Applicant 1 Applicant 2 Applicant 3 Applicant 4						
Name of Individual Applicant making this declaration						
Print in BLOCK letters: First Name	Last Na	me				
ABN (if Self Employed income earner)	Mo	onths Self-Employed?	My average GROSS Monthly Income is:			
	<u> </u>	months	\$,per month			
Which Applicant is this?	Applicant 1	Applicant 2	Applicant 3 Applicant 4			
Name of Individual Applicant making t						
Print in BLOCK letters: First Name	Last Na	me				
ABN (if Self Employed income earner)	Mo	onths Self-Employed?	My average GROSS Monthly Income is:			
]-	months	\$,per month			
Which Applicant is this?	Applicant 1	Applicant 2	Applicant 3 Applicant 4			
Name of Individual Applicant making t	his declaration					
Print in BLOCK letters: First Name	Last Na	me				
ABN (if Self Employed income earner)	Mo	onths Self-Employed?	My average GROSS Monthly Income is:			
		months	\$ per month			
	IMPO	RTANT				
You should not sign this declarat	ion unless this loan is w	holly or predominant	y for business or investment purposes.			
_			e Consumer Credit Code.			
, , , , , , , , , , , , , , , , , , , ,	,	, , , , , , , , , , , , , , , , , , ,				
Pusiness Burness Declaration						
Business Purpose Declaration						
I/we declare that the credit to be provided to me/us by the credit provider in connection with this loan is to be applied wholly or						
predominantly for business or investment purposes (or for both purposes).						
Applicant 4: Cignotius	Deter	Applicant 2: Signatura	Detai			
Applicant 1: Signature	Date:	Applicant 2: Signature	Date:			
	/ / 20		/ / 20			
Print Full Name in BLOCK letters		Print Full Name in BLO	CK letters			
Applicant 3: Signature	Date:	Applicant 4: Signature	Date:			
	/ / 20		/ / 20			
Print Full Name in BLOCK letters		Print Full Name in BLO	CK letters			