



11 Rope St, CH-CH 8011

LOAN APPLICATION FORM

APPLICANT		
First name	Last name:	
Date of birth	Email:	
Relationship: Married Defacto Divorced Separated	Single Widowed Other	
Dependants: Yes No	Number of Dependants:	Dependants age / s:
Drivers Licence (Type): Full Restricted Other	Licence number:	Version:
Tenancy: Own home Renting Boarding Family	Other:	
Address:	Suburb / Town:	Years:
Previous Address:	Suburb / Town:	Years:
Phone: Residency:	NZ Citizen: Y N	Permanent Resident: Y N
Employment: Full Time Part Time Self Employed	Contractor Casual Othe	r 🗌
Current Employer:	Years:	Months:
Address:	Suburb / Town:	
Phone:	Occupation	
Previous Employer:	Years:	Months:
Personal Contact:	Relationship:	Phone:
Address:	Suburb / Town:	
Personal Contact:	Relationship:	Phone:
Address:	Suburb / Town:	
Any criminal convictions? Y \bigcap N \bigcap	Any Court fines? Y N	
Details:	Details:	
SECOND APPLICANT		
First name:	Last name:	
Date of birth:	Email:	
Relationship: Married Defacto Divorced Separated	Single Widowed Other	
Dependants: Yes No	Number of Dependants:	Dependants age / s:
Drivers Licence (Type): Full Restricted Other	Licence number:	Version:
Tenancy: Own home Renting Boarding Family	Other:	
Address:	Town / Suburb:	Years:
Previous address:	Town / Suburb	Years
Phone: Residency:	NZ Citizen: Y N	Permanent Resident: Y N
Employment: Full Time Part Time Self Employed	Contractor Casual Othe	r 🗌
Current employer:	Years:	Months:
Address:	Suburb / Town:	
Phone:	Occupation:	
Previous employer:	Years:	Months:

PAGE 1 TMFNZ Limited Trading as TMF Finance



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ASSETS			LIABILITIES		
Home:		1:	Mortgages:	1:	
		2:		2:	
		3:		3:	
Furnishing	js:		HP / Credit Card	accounts:	
Bank:			Bank O/D:		
Vehicles:		1:	Finance / Loans:		
		2:			
		3:	Other Credit / Lo	ans:	
Investmen	nts:	1:			
		2:	EXPENSES		
		3:	WEEKLY	FORTNIGHTLY	MONTHLY
Other:			Mortgages:		
			Rent:		
Applicant	1: Take ho	me pay \$	Rates:	P	hone:
Applicant 2	2: Take ho	me pay \$	Power:	lr	nsurances:
Other income \$		Vehicle	L	ife Insurance:	
	\$		Other:		
Total incor	me \$				
TOTAL \$	5		TOTAL \$		
0					
	ife Insurar	s: (Tick which applies)			
	Medical Ins				
	ncome Pro				
	rauma Ins				
П	otal Perma	anent Disability Insurance			
	Other Insur	•			



TERMS AND CONDITIONS

I/We understand and authorise that:

The information received from me/us will be securely held by the relevent financier ("Financial Privacy Act 1993") The information may be used by the financier to: consider my/our application and monitor any facilities, products or services provided to me/us; conduct market research, data processing & statistical analysis: and unless I/we disagree, provide me/us with information about other facilities, products or services including selected third party products or services. The Financier may disclose information about me/us to its related companies (as defined by the Companies Act 1993), agents or contractors for the above purposes. The Financier may disclose information about me/us to credit reference agencies for the purpose of obtaining a credit report on me/us. Those credit reference agencies may retain that information and provide it to their customers who use their credit reporting services. If I/we default in any obligations to the Financier then information about me/us may be disclosed to credit reference or debt recovery agencies and retained by them. Those agencies may provide that information to their customers who use their credit reporting services. The Financier may obtain information and make such enquiries about me/us as that Financier considers warranted from any source including from its related companies (as defined by the Companies Act 1993), credit reference agencies and the Minister of Justice for the above purposes. The Financier may also check the current status of me/our drivers licences and car registration with the LTSA, Personal Property Securities Register (PPSR), Transport Registry Centre, Drivers Licence Database, NZ Transport Agency Motor Vehicle Ownership Register, Land Information NZ, Internal Affairs and any other government agencies and fines status with the Ministry of Justice (MOJ) Also I consent to Electronic Communications* and to using Equifax* (EIVP), ID Plus* and Bank Links using Proviso*.

I/We acknowledge that TMFNZ use a third party service provider, Proviso, to obtain bank statement information. To provide this service Proviso* uses your banking credentials soley for the purpose of retrieving banking data and returning it to us. By using this service you agree to the terms and conditions of the Proviso service. *Refer https://proviso.com.au/terms and privacy policy https://proviso.com.au/privacy

*Equifax using (EIVP) Electronic Identity
*Yerification Protocol ID Plus

*Electronic Communications - you consent to us communicating with you electronically with respect to your application and/or loan

I have read, understood and accept the Terms and Conditions as set out in this document.

To verify your acceptance of the above Terms and Conditions please SIGN this below with your name, date and signature.

Name:

Date:

Signature:

Date:

Signature:



PRIVACY ACT STATEMENT

Before completing this application it is a requirement that you read and accept the below Privacy Act Statement. The Privacy Act 1993

I/we authorise TMFNZ* to collect, retain and use the personal information about me/us, for the purposes of:

- · Assessing my/our credit worthiness;
- · Attending to the financing, whether directly or indirectly, of my/our contract(s) and enforcing TMFNZ rights thereunder;
- Marketing and/or informing me/us about the goods and services provided by TMFNZ

I/we authorise TMFNZ to collect from credit reporting agencies, credit providers, my/our employer(s), accountant(s), relatives, or other person(s) such personal, financial and commercial information about me/us for the said purposes.

I/we authorise TMFNZ to provide this information:

- To any person for the foregoing purposes;
- To any employees and agents of TMFNZ and/or any other person, in any ordinary course of business, for any of the foregoing purposes;
- To credit agencies for the purpose of maintaining proper or effective records.

Name:

Signature:

I/we acknowledge that if I/we do not provide all or any part of the information requested on this application form, my/our application for finance may be declined. I/we further acknowledge that pursuant to the Privacy Act 1993, I/we have a right of access to information collected by TMFNZ about me/us and to request that this information be corrected. The information will be held at the office of TMFNZ, 11 Rope Street, Christchurch 8011 or the registered offices of any party nominated by TMFNZ (*TMFNZ and other associated third parties)

I/We: a) authorise TMFNZ, its parent company, subsidiaries and agents, hereinafter referred to as "the Company" to contact credit agencies and any other source to obtain, check, verify and exchange (both now and in the future), information (including information concerning defaults) in connection with this application for credit and any agreement that I/we may hereafter enter into with the Company; b) acknowledge that my/our signature on this application for credit shall operate as an authority to each Source to provide the Company with any information about me/us which the Company may require in connection with this application for credit or any such agreement; c) acknowledge that this application TMFNZ Credit Application page 3 for credit will form part of any agreement I/we may hereafter enter into with the Company and that the authorisation set out above will be deemed to be incorporated into that agreement. The Applicant(s) warrants on a continuing basis that the information supplied herein is true and correct and that the Company will be notified immediately of any changes. You are entitled, under the provisions of the Privacy Act 1993, to: a) have access to personal information held by the Company about you; b) request correction of any personal information held by the Company about you in either case in accordance with the provisions of that Act.

I/We acknowledge and understand and have given my/our permission to conduct a credit enquiry, Driver Licence enquiry, Ministry of Justice enquiry, NZTA enquiry and Personal Property Securities Register enquiry.

I have read, understood and accept the Terms and Conditions, and I have read, understood and accept the Privacy Act Statement.

To verify your acceptance of the above Privacy act statement please SIGN this below with your name, date and signature.

Name:

Date:

Signature:

Date: