

APPLICATION FORM - DUAL APPLICANTS

PERSONAL DETAILS

APPLICANT 1

Surname _____
First Name(s) _____
Title Mr. Mrs. Miss Ms. Dr. Prof. Rev.
Gender Male / Female
Marital Status Single Married ANC Married COP
 Divorced Widowed
Ethnic Group Asian African Coloured White
No. of Dependants _____
Residency Status SA Citizen Permanent Resident
 Temporary Resident Foreign National
ID Type RSA ID Passport
ID No. / Passport No. _____
Date Passport Issued DD/MM/CCYY
Date Passport Expires DD/MM/CCYY
Permanent Resident Country _____
Country Permit Issued _____
Type of Permit Study Permit Work Permit OTHER
Are you a first time home buyer Yes / No
Date Work Contract Issued DD/MM/CCYY
Date Work Contract Expires DD/MM/CCYY
Date Temp Permit Issued DD/MM/CCYY
Date Temp Permit Expires DD/MM/CCYY
Tax Obligation outside of RSA? Yes / No
Nationality _____
Foreign Tax Number _____
Country Tax Code was issued _____
SARS Tax Number _____
If No Tax Number is Available Please State Reason _____

Home Language _____
City of Birth _____
Country of Birth _____
Country of Marriage _____
Date of Birth DD/MM/CCYY
Have you smoked any form of tobacco
in the last year Yes / No
Do you have a tertiary qualification Yes / No
If yes, what is the highest level _____

SOLVENCY DETAILS

APPLICANT 1

Have you been declared insolvent? Yes / No
Have you been rehabilitated? Yes / No
Have you ever had a dispute with the
credit bureau? Yes / No
Do you currently have a debt arrangement
in place? Yes / No
Have you ever been under an
administration order? Yes / No
Are you currently under an administration
order (Garnishee order)? Yes / No
Are you currently under debt review /
in debt counselling? Yes / No
Have you ever had a judgement? Yes / No

PERSONAL DETAILS

APPLICANT 2

Surname _____
First Name(s) _____
Title Mr. Mrs. Miss Ms. Dr. Prof. Rev.
Gender Male / Female
Marital Status Single Married ANC Married COP
 Divorced Widowed
Ethnic Group Asian African Coloured White
No. of Dependants _____
Residency Status SA Citizen Permanent Resident
 Temporary Resident Foreign National
ID Type RSA ID Passport
ID No. / Passport No. _____
Date Passport Issued DD/MM/CCYY
Date Passport Expires DD/MM/CCYY
Permanent Resident Country _____
Country Permit Issued _____
Type of Permit Study Permit Work Permit OTHER
Are you a first time home buyer Yes / No
Date Work Contract Issued DD/MM/CCYY
Date Work Contract Expires DD/MM/CCYY
Date Temp Permit Issued DD/MM/CCYY
Date Temp Permit Expires DD/MM/CCYY
Tax Obligation outside of RSA? Yes / No
Nationality _____
Foreign Tax Number _____
Country Tax Code was issued _____
SARS Tax Number _____
If No Tax Number is Available Please State Reason _____

Home Language _____
City of Birth _____
Country of Birth _____
Country of Marriage _____
Date of Birth DD/MM/CCYY
Have you smoked any form of tobacco
in the last year Yes / No
Do you have a tertiary qualification Yes / No
If yes, what is the highest level _____

SOLVENCY DETAILS

APPLICANT 2

Have you been declared insolvent? Yes / No
Have you been rehabilitated? Yes / No
Have you ever had a dispute with the
credit bureau? Yes / No
Do you currently have a debt arrangement
in place? Yes / No
Have you ever been under an
administration order? Yes / No
Are you currently under an administration
order (Garnishee order)? Yes / No
Are you currently under debt review /
in debt counselling? Yes / No
Have you ever had a judgement? Yes / No

CONTACT DETAILS

APPLICANT 1

Home Tel. No. _____
 Cellphone No. _____
 Work Tel. No. _____
 Email Address _____
 Physical Address _____
 Suburb _____
 City _____ Postal Code _____
 Province _____
 Country _____
 Residential Status Border Living with Parents
 Tenant Owner Other
 Occupied Since DD/MM/CCYY
 Preferred Method of Contact SMS Email Post

EMPLOYMENT DETAILS

APPLICANT 1

Occupational Status Contract Worker Full-time Employee
 Home Executive Part-time Employee
 Self-employed (Non-professional) Self-employed (Professional)
 Temp Employed Unemployed
 Occupational Level Unskilled Worker Semi-skilled Worker
 Skilled Worker Junior Position
 Supervisor Management
 Senior Management
 Source of Income Salary Government Grant
 Inheritance Investments
 Pension Policy Retirement Annuity
 Donation / Gift Other
 Salary Frequency Daily Weekly Bi-weekly
 Monthly Other
 Application coincide with job change Yes / No
 Employer Name _____
 Employment Sector _____
* For e.g. finance, legal and sales
 Employer Physical Address _____
 Suburb _____
 City _____ Postal Code _____
 Province _____
 Country _____
 Employee Number _____
 Start Date DD/MM/CCYY
 Occupation _____
 Who is your previous employer _____
* Applicable if employed for less than 3 years at current employer
 Previous Employer _____
 Previous Period Employed _____ Years _____ Months

CONTACT DETAILS

APPLICANT 2

Home Tel. No. _____
 Cellphone No. _____
 Work Tel. No. _____
 Email Address _____
 Physical Address _____
 Suburb _____
 City _____ Postal Code _____
 Province _____
 Country _____
 Residential Status Border Living with Parents
 Tenant Owner Other
 Occupied Since DD/MM/CCYY
 Preferred Method of Contact SMS Email Post

EMPLOYMENT DETAILS

APPLICANT 2

Occupational Status Contract Worker Full-time Employee
 Home Executive Part-time Employee
 Self-employed (Non-professional) Self-employed (Professional)
 Temp Employed Unemployed
 Occupational Level Unskilled Worker Semi-skilled Worker
 Skilled Worker Junior Position
 Supervisor Management
 Senior Management
 Source of Income Salary Government Grant
 Inheritance Investments
 Pension Policy Retirement Annuity
 Donation / Gift Other
 Salary Frequency Daily Weekly Bi-weekly
 Monthly Other
 Application coincide with job change Yes / No
 Employer Name _____
 Employment Sector _____
* For e.g. finance, legal and sales
 Employer Physical Address _____
 Suburb _____
 City _____ Postal Code _____
 Province _____
 Country _____
 Employee Number _____
 Start Date DD/MM/CCYY
 Occupation _____
 Who is your previous employer _____
* Applicable if employed for less than 3 years at current employer
 Previous Employer _____
 Previous Period Employed _____ Years _____ Months

MONTHLY INCOME & EXPENSES

APPLICANT 1

| INCOME | MONTHLY TOTALS |
|------------------------------|-----------------------|
| Basic Salary / Wage | _____ |
| Average Commissions | _____ |
| Investments | _____ |
| Interest Income | _____ |
| Rental Income | _____ |
| Housing Subsidy | _____ |
| Average Overtime | _____ |
| Monthly Car Allowance | _____ |
| Travel Allowance | _____ |
| Income from Sureties | _____ |
| Maintenance / Alimony Income | _____ |
| Future Rental Income | _____ |
| Other | _____ |
| TOTAL INCOME | _____ |

| LIVING EXPENSES | MONTHLY TOTALS |
|---------------------------------------------------------------------------------|-----------------------|
| Assurance (Life, Retirement Annuities) | _____ |
| Domestic Wages | _____ |
| Donations | _____ |
| Education | _____ |
| Groceries | _____ |
| Insurance and Funeral Policies | _____ |
| M-Net, DSTV and TV License | _____ |
| Maintenance / Alimony | _____ |
| Petrol and Transport Costs | _____ |
| Security | _____ |
| Medical - <i>If not payslip deduction</i> | _____ |
| Rental - <i>Don't include should this amount fall away if bond is approved?</i> | _____ |
| Water and Lights | _____ |
| Cellphone / Telephone and ISP - <i>If pre-paid</i> | _____ |
| Other - <i>Please specify with description</i> | _____ |
| Other - <i>Please specify with description</i> | _____ |
| TOTAL EXPENSES | _____ |

| DEDUCTIONS | MONTHLY TOTALS |
|----------------------------------|-----------------------|
| Income Tax – PAYE / SITE | _____ |
| Pension | _____ |
| U.I.F | _____ |
| Medical Aid *if Salary deduction | _____ |
| Other Deductions | _____ |
| SUB-TOTAL DEDUCTIONS | _____ |

EXPENSES (CONTRACTUAL)

Cellphone / Telephone and ISP (If on contract)

| | |
|-------------------|---------------|
| Description _____ | Monthly _____ |
| Description _____ | Monthly _____ |
| Description _____ | Monthly _____ |

Signature _____

Date _____

APPLICANT 2

| INCOME | MONTHLY TOTALS |
|------------------------------|-----------------------|
| Basic Salary / Wage | _____ |
| Average Commissions | _____ |
| Investments | _____ |
| Interest Income | _____ |
| Rental Income | _____ |
| Housing Subsidy | _____ |
| Average Overtime | _____ |
| Monthly Car Allowance | _____ |
| Travel Allowance | _____ |
| Income from Sureties | _____ |
| Maintenance / Alimony Income | _____ |
| Future Rental Income | _____ |
| Other | _____ |
| TOTAL INCOME | _____ |

| LIVING EXPENSES | MONTHLY TOTALS |
|---------------------------------------------------------------------------------|-----------------------|
| Assurance (Life, Retirement Annuities) | _____ |
| Domestic Wages | _____ |
| Donations | _____ |
| Education | _____ |
| Groceries | _____ |
| Insurance and Funeral Policies | _____ |
| M-Net, DSTV and TV License | _____ |
| Maintenance / Alimony | _____ |
| Petrol and Transport Costs | _____ |
| Security | _____ |
| Medical - <i>If not payslip deduction</i> | _____ |
| Rental - <i>Don't include should this amount fall away if bond is approved?</i> | _____ |
| Water and Lights | _____ |
| Cellphone / Telephone and ISP - <i>If pre-paid</i> | _____ |
| Other - <i>Please specify with description</i> | _____ |
| Other - <i>Please specify with description</i> | _____ |
| TOTAL EXPENSES | _____ |

| DEDUCTIONS | MONTHLY TOTALS |
|----------------------------------|-----------------------|
| Income Tax – PAYE / SITE | _____ |
| Pension | _____ |
| U.I.F | _____ |
| Medical Aid *if Salary deduction | _____ |
| Other Deductions | _____ |
| SUB-TOTAL DEDUCTIONS | _____ |

EXPENSES (CONTRACTUAL)

Cellphone / Telephone and ISP (If on contract)

| | |
|-------------------|---------------|
| Description _____ | Monthly _____ |
| Description _____ | Monthly _____ |
| Description _____ | Monthly _____ |

Signature _____

Date _____

Initial

MONTHLY INCOME & EXPENSES CONT

APPLICANT 1

EXPENSES (CONTRACTUAL) CONT.

Credit Cards

Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____

Loans - Personal, Student etc.

Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____

Retail Accounts - Clothing, Store Cards

Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____

Other

Description _____
 Monthly _____ Outstanding Balance _____

ASSET AND LIABILITY DETAILS

APPLICANT 1

Mortgage Bonds / Existing Property

Description _____
 Monthly _____ Value _____
 Outstanding Balance _____
 Will this property be sold if this bond is approved? Yes / No
 Institution _____
 Description _____
 Monthly _____ Value _____
 Outstanding Balance _____
 Will this property be sold if this bond is approved? Yes / No
 Institution _____
 Description _____
 Monthly _____ Value _____
 Outstanding Balance _____
 Will this property be sold if this bond is approved? Yes / No
 Institution _____

Vehicles

Description _____
 Monthly _____ Value _____
 Outstanding Balance _____ Institution _____

Signature _____

Date _____

MONTHLY INCOME & EXPENSES CONT

APPLICANT 2

EXPENSES (CONTRACTUAL) CONT.

Credit Cards

Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____

Loans - Personal, Student etc.

Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____

Retail Accounts - Clothing, Store Cards

Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____
 Description _____
 Monthly _____ Outstanding Balance _____

Other

Description _____
 Monthly _____ Outstanding Balance _____

ASSET AND LIABILITY DETAILS

APPLICANT 2

Mortgage Bonds / Existing Property

Description _____
 Monthly _____ Value _____
 Outstanding Balance _____
 Will this property be sold if this bond is approved? Yes / No
 Institution _____
 Description _____
 Monthly _____ Value _____
 Outstanding Balance _____
 Will this property be sold if this bond is approved? Yes / No
 Institution _____
 Description _____
 Monthly _____ Value _____
 Outstanding Balance _____
 Will this property be sold if this bond is approved? Yes / No
 Institution _____

Vehicles

Description _____
 Monthly _____ Value _____
 Outstanding Balance _____ Institution _____

Signature _____

Date _____

Initial

ASSET AND LIABILITY DETAILS CONT.

APPLICANT 1

Vehicles CONT.

Description _____

Monthly _____ Value _____

Outstanding Balance _____ Institution _____

Description _____

Monthly _____ Value _____

Outstanding Balance _____ Institution _____

Investments (Unit Trusts, Endowments)

Description _____

Monthly _____ Value _____

Institution _____

Description _____

Monthly _____ Value _____

Institution _____

Description _____

Monthly _____ Value _____

Institution _____

Overdraft

Description _____

Outstanding Balance _____

Description _____

Outstanding Balance _____

Description _____

Outstanding Balance _____

Other

Description _____

Outstanding Balance _____

Description _____

Outstanding Balance _____

Description _____

Outstanding Balance _____

TOTAL ASSETS _____ **TOTAL LIABILITIES** _____

NET ASSET VALUE _____

APPLICANT 2

Vehicles CONT.

Description _____

Monthly _____ Value _____

Outstanding Balance _____ Institution _____

Description _____

Monthly _____ Value _____

Outstanding Balance _____ Institution _____

Investments (Unit Trusts, Endowments)

Description _____

Monthly _____ Value _____

Institution _____

Description _____

Monthly _____ Value _____

Institution _____

Description _____

Monthly _____ Value _____

Institution _____

Overdraft

Description _____

Outstanding Balance _____

Description _____

Outstanding Balance _____

Description _____

Outstanding Balance _____

Other

Description _____

Outstanding Balance _____

Description _____

Outstanding Balance _____

Description _____

Outstanding Balance _____

TOTAL ASSETS _____ **TOTAL LIABILITIES** _____

NET ASSET VALUE _____

DECLARATION

I hereby appoint the Originator as my sole agent and on my behalf to submit to all banks in line with the requirements as discussed, in order to obtain mortgage loan finance for the property specified on this application form.

I hereby consent to the Originator using, storing and sharing my personal information (as set out on this form) with companies within its group and with registered credit providers as well as its service providers. I further agree to receive information about other products and services that the Originator thinks may be of interest to me. I acknowledge that I have the right to opt-out of such future communications.

The advantages of putting down a deposit when financing a home has been discussed with me.

I/we hold no other citizenships and residencies for local and international tax purposes, other than those disclosed in this application form and will inform the lender in writing of any change of this status within 30 days of the change of status.

I warrant that all the information I supplied is to the best of my knowledge and believe true and correct in all material respects. I am not aware of any other information which, should it become known to the Bank, would affect the consideration of my application in any way. I agree that the Bank may provide any information pertaining to the Loan applied for to the Originator during the application process. I hereby authorise the Bank to have access to my credit bureau records and to furnish and/or to disclose any information arising from any agreement entered into with the Bank to any such credit bureaus.

APPLICANT 1

Name _____

Date _____

Signature _____

APPLICANT 2

Name _____

Date _____

Signature _____

Initial

BANK ACCOUNT DETAILS

APPLICANT 1

Bank Name 1. _____ Business Yes / No
 Branch _____
 Account Type _____
 Account Holder _____
 Account No. _____
 Balance _____
 Primary Yes / No
 Bank Name 2. _____ Business Yes / No
 Branch _____
 Account Type _____
 Account Holder _____
 Account No. _____
 Balance _____
 Primary Yes / No
 Bank Name 3. _____ Business Yes / No
 Branch _____
 Account Type _____
 Account Holder _____
 Account No. _____
 Balance _____
 Primary Yes / No

CONSENT FORM

APPLICANT 1

Consent to electronically obtain account statements from financial institutions

Name of account holder (you)*

*One account holder per consent form

Identity/Passport/Registration Number

Absa Bank Ltd, Nedbank Ltd and Standard Bank (the banks) work with each other and other financial institutions to fight, amongst other crimes, home loan application fraud. In these dealings, the banks ensure that all personal and financial information about clients are protected and kept strictly confidential.

For the purpose of assessing the home loan application that BetterBond will submit on your behalf to any or all of the banks in

the name of _____,

the banks need your consent to obtain your bank statement(s) directly for your account(s) held at other financial institutions (as specified). The financial institutions involved will exchange no further information than the bank statements you have authorised and these will be safeguarded and not used for any other purposes. Bank account statements obtained will also be limited to the period necessary to assess the home loan application.

Your signature below confirms that the banks have your consent to obtain bank statement(s) on the following account(s) (that show your account transaction history) and if there is a problem with the electronic retrieval of some or all of the required bank statements for any reason, the banks will contact you to provide physical copies:

Name _____

Date _____

Signature _____

BANK ACCOUNT DETAILS

APPLICANT 2

Bank Name 1. _____ Business Yes / No
 Branch _____
 Account Type _____
 Account Holder _____
 Account No. _____
 Balance _____
 Primary Yes / No
 Bank Name 2. _____ Business Yes / No
 Branch _____
 Account Type _____
 Account Holder _____
 Account No. _____
 Balance _____
 Primary Yes / No
 Bank Name 3. _____ Business Yes / No
 Branch _____
 Account Type _____
 Account Holder _____
 Account No. _____
 Balance _____
 Primary Yes / No

CONSENT FORM

APPLICANT 2

Consent to electronically obtain account statements from financial institutions

Name of account holder (you)*

*One account holder per consent form

Identity/Passport/Registration Number

Absa Bank Ltd, Nedbank Ltd and Standard Bank (the banks) work with each other and other financial institutions to fight, amongst other crimes, home loan application fraud. In these dealings, the banks ensure that all personal and financial information about clients are protected and kept strictly confidential.

For the purpose of assessing the home loan application that BetterBond will submit on your behalf to any or all of the banks in

the name of _____,

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Your signature below confirms that the banks have your consent to obtain bank statement(s) on the following account(s) (that show your account transaction history) and if there is a problem with the electronic retrieval of some or all of the required bank statements for any reason, the banks will contact you to provide physical copies:

Name _____

Date _____

Signature _____

Initial