



KOOPKRAG

Limited Registration no. 1938/011150/06

PO BOX 35908, MENLO PARK, 0102

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LYNNWOOD

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APPLICATION FOR CREDIT

Koopkrag limited is a authorised Financial Service Provider no 2763 and a Authorised Credit Provider in terms of section 40 of the National Credit Act 34 of 2005. The purpose of this application is to determine if the consumer qualifies for credit in accordance with the requirements of the National Credit Act,34 of 2005.

CONSUMER DETAILS

Title		Christian names											
Surname													
First name						Koopkrag account number							
Identity Number										Number of dependants			
Married in Community		Married out of Community		Divorced		Single		Widower / widow					
Residential address						Postal address							
Tel no (H) ()						Fax no ()							
Cellular phone number						E-mail address				E-mail account?		Y	N
Employer						Occupation / Title							
Work address													
Tel no (W) ()		Service period		Y	Y	M	M	Permanent		Temporary		Contract	

SPOUSES DETAILS

Title		First name											
Surname		Christian names											
Identity Number													
Employer						Occupation / Title							
Work address													
Tel no (W) ()		Service period		Y	Y	M	M	Permanent		Temporary		Contract	
Cellular phone number						E-mail address							

AFFORDABILITY ASSESSMENT

NETT MONTHLY INCOME			MONTHLY EXPENSES		
Applicant salary	R		Bond instalment		R
Spouse salary	R		Hire purchase instalments		R
Other income (specify):			Credit card instalments (open and budget)		R
1.	R		Insurance / policies		R
2.	R		Medical		R
3.	R		Pension fund contributions		R
4.	R		Petrol		R
5.	R		Groceries		R
6.	R		Cellular account		R
7.	R		Telephone account		R
			Rental agreement		R
			DSTV / M - net account		R
			Municipality account		R
			Other expenses (specify)		R
TOTAL MONTHLY INCOME	R		TOTAL MONTHLY EXPENSES		R

ASSETS						LIABILITIES					
Fixed property (market value)						R					
Registered owner		Own	CC	Trust	Other	Bond balance				R	
Registered in the name of:						Loan account (s) balance				R	
Furniture						R				Bank overdraft balance (s)	R
Vehicles						R				Asset finance balance (s)	R
Investments						R				Other credit facilities (specify)	
Other assets (specify)										1.	R
1.						R				2.	R
2.						R				3.	R
3.						R				4.	R
										5.	R
										Surety	R
TOTAL ASSET VALUE						R				TOTAL LIABILITIES	R

OTHER CREDIT FACILITIES			
CREDIT PROVIDER	Account number	Monthly instalments	Facility granted
1.		R	R
2.		R	R
3.		R	R
4.		R	R
5.		R	R
6.		R	R

REFERENCES – TWO RELATIVES (not residing with you)			
1. Title	Initials	Surname	
Residential address			
Cellular phone number		Relationship	
Tel (W) ()		Tel (H) ()	
2. Title	Initials	Surname	
Residential address			
Cellular phone number		Relationship	
Tel (W) ()		Tel (H) ()	

CREDIT FACILITY APPLICATION				
Please indicate the credit facility that you are applying for by ticking the appropriate box below:				
	Repayment period	Deposit	Amount	"X"
1. Asset finance (motor vehicles, furniture etc.)		R	R	
2. Short term loan			R	
3. Bond			R	

DOCUMENTATION	
You have to attach the following documents to this application.	
Please indicate, by ticking the appropriate box below, which of the following documents have been included with this application. "X"	
1. Copy of your identity document	
2. Latest proof of income	
3. Proof of residential address	
4. Copy of your antenuptial contract (if applicable)	

CREDIT APPLICANT DECLARATION

Please indicate your answer by ticking the appropriate box below:	YES	NO
1. Are you a juristic person?		
2. Have you at any stage been declared mentally unfit by THE HIGH COURT OF South Africa?		
3. Are you currently under or have you ever applied for a debt review?		
4. Are you currently under an administration order?		
5. Are you insolvent or is there any indication that your estate could be placed under provisional sequestration?		
6. Do you have any dispute in process with a Credit Bureau?		

I / We declare that I / we have as part of this assessment process answered all the questions and requests for information fully and truthfully and that I / we understand the terms and conditions of section 89(3) of the Act.

I / We confirm that I / we am / are applying for this credit facility and understand the implications, consequences and risks attached to credit as explained to me / us.

I / We understand that the Credit Provider can refuse to grant this credit facility to me / us in terms of section 60(2) of the Act.

I / We hereby authorize the Credit Provider to obtain credit references and / or any other references from any Credit Bureau and / or person for the purpose of my / our application and pertaining to my/ our credit history.

Signed at _____ on this _____ Day of _____ 20_____

Signature Consumer

Signature Consumer Spouse