

PERSONAL DETAILS

Surname _____ First Name(s) _____

Title Mr. Mrs. Miss Ms. Dr. Prof. Rev. _____

Gender Male / Female _____ No. of Dependants _____

Marital Status Single Married ANC Married COP Divorced Widowed Other _____

Ethnic Group Asian African Coloured White _____

Residency Status SA Citizen Permanent Resident Temporary Resident Foreign National _____

ID Type RSA ID Passport _____ ID No. / Passport No. _____

Date Passport Expires _____ Date Passport Issued _____

Country Permit Issued _____ Type of Permit Study Permit Work Permit _____

Are you a first time home buyer Yes / No _____ Date Work Contract Issued _____

Date Work Contract Expires _____ Date Temp Permit Issued _____

Date Temp Permit Expires _____ 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 _____

Do you have a tertiary qualification Yes / No _____ If yes, what is the highest level _____

Have you smoked any form of tobacco in the last year Yes / No _____ Are you a public official in a position of authority? Yes / No _____

Are you related to or associated with a public official in a position of authority? Yes / No _____

If Yes answer the following question, What is the nature of the relationship or association? (Tick box)

Spouse or Partner Son or Daughter Parent Sibling Business Partner Close associate

Name and Surname of the public official in a position of authority that you are related or associated to?

Name _____ Surname _____

CONTACT DETAILS

Home Tel. No. _____ Cellphone No. _____

Work Tel. No. _____ Email Address _____

Physical Address _____ Postal Address (If different to Physical) _____

Suburb _____ Suburb _____

City _____ Postal Code _____ City _____ Postal Code _____

Province _____ Province _____

Country _____ Country _____

Residential Status Border Living with Parents Tenant Owner Other _____

Occupied Since _____ Preferred Method of Contact SMS Email Post _____

EMPLOYMENT DETAILS

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 _____

Occupation _____ Who is your previous employer _____

* Applicable if employed for less than 3 years at current employer

Previous Period Employed _____ Years _____ Months _____

MONTHLY INCOME & EXPENSES

INCOME	MONTHLY TOTALS	LIVING EXPENSES	MONTHLY TOTALS
Basic Salary / Wage	_____	Assurance (Life, Retirement Annuities)	_____
Average Commissions	_____	Domestic Wages	_____
Investments	_____	Donations	_____
Interest Income	_____	Education	_____
Rental Income	_____	Groceries	_____
Housing Subsidy	_____	Insurance and Funeral Policies	_____
Average Overtime	_____	M-Net, DSTV and TV License	_____
Monthly Car Allowance	_____	Maintenance / Alimony	_____
Travel Allowance	_____	Petrol and Transport Costs	_____
Income from Sureties	_____	Security	_____
Maintenance / Alimony Income	_____	Medical - <i>If not payslip deduction</i>	_____
Future Rental Income	_____	Rental - <i>Don't include should this amount fall away if bond is approved.</i>	_____
Other - <i>Please specify with description</i>	_____	Water and Lights	_____
Other - <i>Please specify with description</i>	_____	Cellphone / Telephone and ISP - <i>If pre-paid</i>	_____
Other - <i>Please specify with description</i>	_____	Other - <i>Please specify with description</i>	_____
Other - <i>Please specify with description</i>	_____	Other - <i>Please specify with description</i>	_____
TOTAL INCOME	_____	TOTAL EXPENSES	_____

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

EXPENSES (CONTRACTUAL)

Cellphone / Telephone and ISP (If on contract)

Description _____	Monthly _____
Description _____	Monthly _____
Description _____	Monthly _____

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 _____
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 _____
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Signature _____ Date _____

ASSET AND LIABILITY DETAILS

Mortgage Bonds / Existing Property

Description _____	Monthly _____ Value _____
Outstanding Balance _____	Will this property be sold if this bond is approved? <input type="checkbox"/> Yes / <input type="checkbox"/> No
Institution _____	
Description _____	Monthly _____ Value _____
Outstanding Balance _____	Will this property be sold if this bond is approved? <input type="checkbox"/> Yes / <input type="checkbox"/> No
Institution _____	
Description _____	Monthly _____ Value _____
Outstanding Balance _____	Will this property be sold if this bond is approved? <input type="checkbox"/> Yes / <input type="checkbox"/> No
Institution _____	

Vehicles

Description _____	Monthly _____ Value _____
Outstanding Balance _____	Institution _____
Description _____	Monthly _____ Value _____
Outstanding Balance _____	Institution _____
Description _____	Monthly _____ Value _____
Outstanding Balance _____	Institution _____

Investments (Unit Trusts, Endowments)

Description _____	Monthly _____ Value _____
Description _____	Monthly _____ Value _____
Description _____	Monthly _____ Value _____

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** _____

Signature _____ Date _____

SOLVENCY DETAILS

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

BANK ACCOUNT DETAILS

 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

 Bank Name 4. _____ Business Yes / No Branch _____

Account Type _____ Account Holder _____

Account No. _____ Balance _____

 Primary Yes / No

DECLARATION

I hereby appoint BetterLife Origination Services (Pty) Ltd ("BetterBond") as my sole agent and on my behalf to submit to all Financial Institutions in line with the requirements as discussed, in order to obtain mortgage loan finance for the property specified on this application form.

Consent to Electronically obtain Account Statements from Financial Institutions: For the purpose of assessing your credit/finance application your consent is needed to obtain your bank statement(s) directly from Absa, Nedbank and Standard Bank. The financial institutions involved will exchange no further information than your bank statements 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 credit/finance application. Your signature below confirms you have provided the required consent for retrieval of your bank statements for purposes of this application and if there is a problem with the electronic retrieval of some or all of the required bank statements for any reason, the credit provider will contact BetterBond to source a separate form for the account statements.

(tick the appropriate box)

I consent I do not consent

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 Financial Institution, would affect the consideration of my application in any way.

I agree that the Financial Institution may provide any information pertaining to the Loan applied for to BetterBond during the application process. I hereby authorise the Financial Institution 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 Financial Institution to any such credit bureaus.

I/We further irrevocably consent that the Bank can request my/our payslips for auditing purposes from my/our employer or any third party

(tick the appropriate box)

I consent I do not consent

Signature _____ Name _____

Date _____

CONSENT IN TERMS OF THE PROTECTION OF PERSONAL INFORMATION ACT

We care about your privacy and information security. In terms of the Protection of Personal Information Act, we treat your personal information as strictly confidential and take certain technical and organisational measures to protect your Personal Information. We will only process your personal information in accordance with this consent and for the purpose for which it has been collected by us.

This consent is given to BetterLife Group Limited, BetterLife Origination Services Proprietary Limited, (BetterBond and MortgageMax are divisions of BetterLife Origination Services) and BetterLife Distribution Services Proprietary Limited (trading as BetterSure Financial Consultants) an authorised financial services provider FSP License 24015 (collectively "**BetterBond**").

For the purposes of this consent, "**Personal Information**" means personal information as defined in the Protection of Personal Information Act 4 of 2013 ("**POPIA**") and includes any information relating to an identifiable, living, natural person, and where it is applicable, an identifiable, existing juristic person that could reasonably be used to identify you (such as your name, surname, email address, telephone number, mobile phone number, home address, photographs, links to your social identities/networks and credit card or other financial information).

You agree to provide us with certain Personal Information when you communicate with us by email, SMS or telephone and make use of our home loan pre-qualification service, do a credit check through a credit bureau report, when you apply for a home loan or when you elect to make use of the BetterSure insurance brokerage service.

You hereby acknowledge that:

- appropriate advice can only be provided after full disclosure of your relevant Personal Information for purposes of evaluating and advising you in respect of your home loan application and on suitable financial products in line with your objectives;
- BetterBond requires relevant Personal Information to assist you with your pre-qualification, home loan application and/or to accept, issue and service insurance policies that you may apply for;
- you agree to be informed about the outcome of your pre-qualification and/or home loan application and/or in respect of the relevant financial products (if applicable).

I hereby agree and explicitly give consent to BetterBond, for purposes of processing, including but not limited to, collecting, updating, sharing and storing of my Personal Information relating to any pre-qualification and/or home loan application made by BetterBond and agree that BetterBond may share this information for this purpose with companies within its group, financial institutions, registered credit providers as well as its service providers in order to enable them to process my personal information to determine whether I qualify for a home loan, including but not limited to do credit checks, fraud checks, checks with and reporting to the South African Fraud Prevention Service::

(tick the appropriate box)

I consent **I do not consent**

I further agree to receive information about other products and services that BetterBond thinks may be of interest to me. I acknowledge that I have the right to opt-out of such future communications.

(tick the appropriate box)

I consent **I do not consent**

The Services provided by BetterBond is not intended to be financial, tax or legal advice and should not be construed as such. BetterBond and their Service Partners are not financial planners, brokers or tax advisers. Your personal financial situation is unique, and it is your responsibility, given your financial and other individual circumstances, to use any information and advice obtained through the Services appropriately and responsibly when implementing your decisions. Before making any financial decisions or implementing any financial strategy, you should obtain advice from your accountant or other financial advisor who are fully aware of your individual circumstances and never take up a home loan that will stretch your repayment capacity to its maximum.

CONSENT FORM – CREDIT CHECK

I do hereby appoint **BetterLife Origination Services Proprietary Limited ("my Representative")** to be my lawful representative and agent in my name, place and stead, to obtain a copy of my personal credit report ("PCR") from Registered Credit Bureau (Pty) Ltd, to be used solely for the following purposes – (a) providing me with advice or assistance with managing my credit, by having reference to the content of my PCR; (b) challenging the accuracy of information contained on my PCR; and (c) investigating information held on me by the registered credit bureau.

I consent to the Registered Credit Bureau releasing a copy of my PCR in PDF or XML format to my Representative and to my Representative having sight of the content of my PCR for the above purpose. Furthermore, I consent to my Representative providing all personal information provided by me to it in relation to accessing my PCR to the registered credit bureau for purposes of updating my credit record.

My Representative may request my PCR from the registered credit bureau on condition that s/he undertakes: (a) not to store, host, retain, resell, on-sell or make available my PCR to any third party or agent, or use my PCR to compile any other databases; (b) not to amend or add any information on my PCR or deal with my PCR in contravention of any applicable laws; (c) not to use any information contained on my PCR for any other reason, save that set out in clause (a) to (c) above; (d) to destroy my PCR immediately after it has served the purpose for which it was obtained on my behalf; (e) to provide to Registered Credit Bureau with the name of all persons who will have access to my PCR for as long as it's in my Representative's possession, before it is destroyed.

I am aware that I am entitled to one free PCR per year from any registered credit bureau and that I can obtain my free PCR by contacting the credit bureau directly, either telephonically, by way of email, fax or attending on the office of the credit bureau in person. I am aware that I have the right to challenge the accuracy of any information contained on my PCR directly with a credit bureau. **Attached to this is a copy of my ID document.** I confirm that the information furnished herein to the registered credit bureau is true and correct.

Signature _____ Name _____

Date _____