



LOAN APPLICATION FORM

Required Loan Amount: R

Loan Duration:

PLEASE COMPLETE THIS DOCUMENT IN PRINT

Surname:

ID No:

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Full

Names: ____

Date of Birth: _____

Title: (Mr/Mrs/Miss, etc. _____)

Physical address: _____

Postal address: _____

Address Type:

Postal

Residential

Owner / Tenant

Home Tel: () _____

Work Tel: () _____

Cell No: _____ Email: _____

Fax No: _____

Marital Status:

Married

Single

Separated

Divorced

Living Together

Widowed

2. EMPLOYMENT DETAILS

Employer: _____ Salary: _____

Occupation: _____ Fax No: _____

Date _____ Employed: _____ Employer's Address: _____

Position: _____

3. OTHER DETAILS

Type of Loan: _____ Reason for Loan: _____

Are you in debt?

If Yes, Amount: R

Blacklisted?

If blacklisted, give full details: _____

4. DECLARATION BY BORROWER

I _____ declare that all the information in this

Application form is true.

SIGNED ON THIS

DAY OF

20

APPLICANT SIGNATERY: _____

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