



ASSET BASED FINANCE APPLICATION FORM

APPLICANT – FULL NAME(S) PRIVATE INDIVIDUAL / COMPANY / TRUST

ID NO or REGISTRATION NO.

VAT No. if applicable

PROFESSION / EMPLOYER / RETIRED / NATURE OF BUSINESS

ADDRESS

Postal

DIRECTORS /SHAREHOLDERS/TRUSTEES IF APPLICANT IS COMPANY OR TRUST

Names ID Numbers % Shareholding

Names	ID Numbers	% Shareholding
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

CONTACT DETAILS

Name of contact person - if not Applicant individual.

Tel No

e-mail

FINANCIAL STATEMENTS IF APPLICANT IS A COMPANY / TRUST

<input type="checkbox"/>	<input type="checkbox"/>
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YES NO



BANK

Name	Name of Company
Branch	Name of Broker
Code	Policy ref. no
Account No	Contact no
	e-mail address:

INSURERS

AUDITOR IF COMPANY / TRUST

Name	Name
Address	Address
Contact name	Contact name
Contact no	Contact no
e-mail address:	e-mail address:

ATTORNEY

ADDRESS WHERE VEHICLE WILL BE KEPT

Name
Address
Contact name of Landlord – if premises are leased:
Contact no
e-mail address:

SUPPLIER DETAILS

Name	
Address	
Contact number	E Mail address

DESCRIPTION OF VEHICLE

INSTALMENT SALE

SELLING PRICE	DEPOSIT
R.....	R.....

Period – months (tick)

12	18	24	36	48	60
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SECURITY OFFERED / AVAILABLE

I/we agree to Classic Vehicle Finance, a Division of Charter Finance making any enquiry to any bank or credit bureau in respect of this application. I / we understand that further information may be requested by Classic Vehicle Finance in support of this application and for general compliance purposes.

SIGNED BY APPLICANT

Signature	Date
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For and on behalf of Applicant :

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APPROVED / DECLINED by Charter Finance – Official use

APPROVED	DECLINED
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Signature	Date
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Conditions of Approval

Kindly attach the following as may be applicable:

1. Latest audited Financial Statements and Management Accounts if Applicant is Company or Trust.
2. Statement(s) of assets and liabilities of Applicant / Directors / Members
3. CIPIC documents if Applicant is a Company or Trust
4. Copy of ID document(s) of Applicant and of Directors / Members if Company or Trust
5. Utility bill of Applicant and Directors/Members if Company or Trust
6. Proof of bank account of Applicant
7. SARS Tax clearance certificate if Applicant is Company or Trust.