

## LOAN APPLICATION FORM

	Required Loan Amount:	R	Loan Duration:
PLEASE COMPLETE THIS DOCUMENT IN PRINT			
Surname:		ID No:	
Full			Names:
Date of Birth:			
Physical address:	Title:	(Mr/Mrs/Miss, Postal address:	etc
Address Type: Postal	Residential	Owner / Tenant	
Home Tel: ( ) Cell No:	Email:	Work Tel: ( )	
Fax No:	CIIIdII.		
	ngle Separated Divorced	Living Together Widow	ved
2. EMPLOYMENT DET	AILS		
Employer:	Sala	ry:	
Occupation:		Fax No:	
Date	Employed:	Employer's Address:	
Position:			
3. OTHER DETAILS			
Type of Loan:	Reason for Loan:		
Are you in debt? Yes / No	If Yes, Amount: <b>R</b>	Blac	klisted? Yes / No
If blacklisted, give full details:			
4. DECLARATION BY B	ORROWER		
· <b></b>		declare	that all the information in this
Application form is true.			
SIGNED ON THIS	DAY OF	20	
APPLICANT SIGNATERY:			

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