



Call Centre: 012 998 3116
 Fax no: 012 998 3119

Home Loan Enquiry Form

AGENT:		DATE SUBMITTED:	
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AGENCY DETAILS:

COMPANY:

TELEPHONE NUMBER:

FAX NUMBER:

CELL PHONE NUMBER:

APPLICANT'S DETAILS:

SURNAME:

FULL NAMES:

ID NUMBER:

ADDRESS:

CONTACT NUMBERS:

HOME NO.				
WORK NO.		CELL NO.		

RETIREMENT AGE:

SA CITIZEN or PERMANENT RESIDENT:

	YES		NO	
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MARRIED:

COP		ANC		OTHER	
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FIRST TIME HOME OWNER?

	YES		NO	
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EMPLOYER DETAILS:

CURRENT EMPLOYER:

PHYSICAL ADDRESS:

TELEPHONE NUMBER:

HR CONTACT PERSON:

EMPLOYMENT TYPE:

PERM		TEMP		CONTRACT	
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EMPLOYMENT PERIOD:

NAME OF PREVIOUS EMPLOYER:

NO. OF YEARS IN PREVIOUS EMPLOYMENT:

SPOUSE DETAILS:

FULL NAMES:

ID NUMBER:

CONTACT NUMBERS:

HOME NO.				
WORK NO.		CELL NO.		

EMPLOYMENT STATUS:

EMPLOYED		UNEMPLOYED	
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CURRENT EMPLOYMENT DETAILS OF SPOUSE:

CURRENT EMPLOYER:

PHYSICAL ADDRESS:

CONTACT PERSON:

CONTACT NO.

EMPLOYMENT TYPE:

PERM		TEMP		CONTRACT	
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EMPLOYMENT PERIOD:

PROPERTY DETAILS:

PROPERTY IDENTIFIED:	YES		NO		DETAILS OF PROPERTY:	
IF YES: PRICE R					ADDRESS:	
					TOWN/SUBURB:	
					POSTAL CODE:	
IF NO: PRICE RANGE: R			TO		FOR OFFICE USE ONLY	
Preferred Area 1:						Postal Code
Preferred Area 2:						Postal Code

INCOME AND EXPENDITURE:

EXPENDITURE DETAILS:	R	
FOOD :		
CLOTHING ACCOUNTS (I.E. EDGARS, FOSCHINI ETC):		
FURNITURE ACCOUNTS (ELLERINES, BRADLOWS ETC):		
OTHER ACCOUNTS (CASH LOANS, ETC):		
TRANSPORT:		
ELECTRICITY, WATER, AND RATES:		
SCHOOL, EDUCATION, CRÈCHE:		
TELEPHONE:		
OTHER (SPECIFY BELOW):		
1.		
2.		
3.		
4.		
RENT:		
TOTAL:		

EMPLOYER COLLATERAL/SUBSIDY AVAILABLE:

CASH DEPOSIT AVAILABLE? (If yes, specify amount / percentage):	YES		NO		R	
MONTHLY HOUSING SUBSIDY? (If yes, specify amount)	YES		NO		R	
EMPLOYER COLLATERAL AVAILABLE? (If yes, specify amount / percentage)	YES		NO		R	

DOCUMENTATION REQUIRED:

CURRENT PAYSリップ OF APPLICANT:		
CURRENT PAYSリップ OF SPOUSE:		
CURRENT BANK STATEMENT (BOTH IF SPOUSE HAS SEPARATE ACCOUNT):		
COPY OF ID OF APPLICANT		
COPY OF ID OF SPOUSE:		

SIGNATURE OF APPLICANT/AGENT	DATE