



# Mortgage Loan Application and Checklist

Police & Nurses Credit Society Limited  
ABN 69 087 651 876  
AFSL 240701  
Level 7, 130 Stirling Street  
Perth WA 6000

PO Box 8609, Perth BC,  
Western Australia 6849  
Telephone 13 25 77  
www.pncs.com.au  
brokerapplications@pncs.com.au



This form must be emailed or faxed with your home loan application along with all the required supporting documentation. Police & Nurses Broker Support may request additional information based on the specifics of the application.

Email to	Email	Date Emailed
Police & Nurses Broker Support	brokerapplications@pncs.com.au	/ /

Broker Name

Broker Address	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Broker Declaration:** I confirm all applicable requirements have been satisfied and the requisite supporting documentation is enclosed. I verify that I have sighted the originals of all supporting documentation including all statements, savings, income and employment, and I have copies of these documents on file.

<input checked="" type="checkbox"/>	Date
<input type="text"/>	/ /

Broker's Signature

**Note:** Please tick [✓] the boxes for the supporting documentation required to approve this application and to acknowledge the information you have provided.

## ALL APPLICANTS

- Application Form (Applicant)
- Application Form (Guarantor) if applicable
- Personal Consent Form (Applicant & Guarantor)
- Copy of identification for each Applicant & Guarantor
- A completed copy of the submission sheet/calculator

## Application Form

- Completed in full with no blank spaces. If a certain section or field is not applicable, please indicate N/A. If fields are left blank, it will hold up the application processing.
- Address information - if current and previous addresses are less than a 2 year period as a whole, please note where they resided prior and for how long. Need 2 full years history.
- Referee must provide a landline whether it be home or work (a mobile number will not be accepted).
- Employment information - if current and previous employment are less than a 2 year period as a whole, please note where they worked prior, address of employer, job title, status of employment and for how long. Need 2 full years history.
- Financial position - Assets: list year, make and model of motor vehicles.
- Financial position - Liabilities: list what type of credit card, rent is to be noted under "other" and ticked "to be paid out" if ceasing once loan approved.

## Submission Sheet (Servicing Calculator)

- Completed in full with no blank spaces.
- Income calculations to be noted at bottom of sheet advising how obtained income figure used for servicing (i.e. base wage \$500/week gross x 52 weeks = \$26,000 gross p.a.). Explanation required for any deductions on payslips.

## INCOME VERIFICATION

**Note:** all applicants must provide the following documents as a minimum when applying for a loan:

### Salaried Employees

- Group Certificate (PAYG) for the last financial year, together with 1 recent payslip (dated within 2 months of application). If LMI required, Group Certificate and 2 recent payslips dated within 2 months of the application; or
- A letter from employer confirming salary or wages. The letter should include the employee's full name, employment status, length of service and detailed income (i.e. base salary, overtime, salary sacrifice, etc). This letter must be dated within 1 month of application (mandatory for LMI applications over and above group certificates and payslips).

## INCOME VERIFICATION (continued...)

### Commission, bonuses, overtime, allowances

For loans requiring LMI (50% allowance for overtime, shift work allowance). Depends on LMI provider.

- Copy of last 8 weeks consecutive payslips or statements showing regular income from bonus or commissions
- A letter from the employer detailing employment type and wage structure
- Group Certificate for the last financial year

### Self Employed, Company Director or applicants involved in a Trust

- Tax returns for the past 2 years (including profit & loss) for both personal and business; and any interim figures from your accountant if applicable
- Accompanying ATO notices for the last 2 years tax returns
- Copy of the last 2 years financials (i.e. profit & loss and balance sheet)

**Note:** Tax File Numbers must be removed from all supporting documentation as this will delay processing.

### Rental Income

(80% of rent can be used in servicing capacity)

- A current executed lease agreement; or
- Management statement; or
- A letter from the Real Estate Agent managing the property; or
- Taxation return

### Investment Income

Income level must be evident over the past 2 years. For loans requiring LMI - 80% allowance for investment income (interest, dividends).

- Shareholding certificates/statements/notices

### Government Allowances

- A current Centrelink statement showing name of applicant, frequency and amount (dated within 1 month of application)

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## GENUINE SAVINGS/EQUITY

- Copies of last 3 months consecutive bank statements (in Applicant's name) showing transactional history
- Term Deposit (in Applicant's name) held for 3 months or more
- Shares - documents evidencing ownership for a period of at least 3 months
- Equity from real estate (additional borrowings or sale). Rates notice, loan statement, settlement statement (if applicable) to be provided as evidence.

### Investment Loans

- Minimum 10% or 5% (depends on LMI provider) of the purchase price as genuine savings or equity in other real estate for all investment loan proposals where the loan purpose is for purchase or construction, and LVR > 85%

**Note:** borrowed funds or a personal loan cannot be used as part of 10% or 5% deposit.

## NON-GENUINE SAVINGS (owner occupied only)

Where non-genuine savings are accepted as the deposit towards the application, the following additional criteria will apply:

- Copy of latest bank statement for bank deposits
- Signed statutory declaration confirming non-repayable gift
- Current employment of minimum 12 months, OR, current employment of minimum 6 months AND previous employment term minimum 18 months AND employment within the same industry AND not on probation
- Minimum 12 months in current residence
- 6 months recent and consecutive rent or board history to show good conduct. Rent receipts not acceptable, evidenced via letter from Real Estate Agent or statutory declaration if a private rental
- 6 months recent and consecutive statements for current credit commitments to show good conduct

**Note:** good conduct is evident by arrears less than 7 days and limit arrangements respected. Borrowed funds or a personal loan cannot be used as part 5% deposit.

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## PURCHASES

- Contract of Sale (if purchasing or selling) including purchaser's name, vendor's name, purchase price and property address - signed and dated by all parties
- Evidence of funds to complete
- Completed deposit and/or FHOG application form (emailed or faxed with all supporting documents where clients are using FHOG funds to complete settlement)

**Note:** original FHOG required prior to funding. Complete list of FHOG requirements available at each State's Office of State Revenue website.

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## REFINANCING OR CONSOLIDATING DEBTS

**Note:** all statements must cover consecutive months and the latest statement must not be over 1 month old. Statements must include the borrower's name and account number.

### For debts refinanced

- Copy of last 6 months (LMI) or 3 months (no LMI or PL) statements for liabilities being refinanced (home loan or personal loan)

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## CONSTRUCTION

- Building contract (signed) and specifications
- Building plans

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## STATEMENTS

**Note:** internet statements allowed but must be accompanied by 1 original (regardless of date) and have account number to match, show debits and credits and a running balance.

## Office Use Only

### Loan Type

Personal Use     
  Investment     
  Commercial

Aggregator \_\_\_\_\_

Broker Name \_\_\_\_\_

ASIC Registration Number \_\_\_\_\_

Purpose of Loan \_\_\_\_\_

Loan Amount \$ \_\_\_\_\_ Requested Term \_\_\_\_\_

Date of Meeting \_\_\_\_\_ Location of Meeting \_\_\_\_\_

## Your Needs, Goals and Objectives

### TERM

### OBJECTIVE

Short term

\_\_\_\_\_

1-5 years

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Longer term

\_\_\_\_\_

5+ years

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### CUSTOMER NEEDS – How important is it for you...

#### Payments

...to pay off your home loan quickly?

- with your savings
- with additional payments
- by merging your accounts into one and minimising your outstanding balance
- by keeping your accounts separate

#### Portability

...to have the option to transfer this loan to an alternative property?

#### Redraw

...to have access to additional repayment funds, should you require them?

#### Top-Up

...to have access to additional funds, should you wish to make renovations etc?

#### Interest Only

...to minimise your repayments by paying interest only?

#### Rate

...to have certainty of repayments  
...to benefit from movements in rates



Application #:



# Mortgage Loan Application Form

(For Broker Use Only - Telephone (08) 9219 7411 Fax (08) 9219 7474)

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## Personal Details

**PRIMARY**     Applicant     Guarantor

Member Number \_\_\_\_\_

Title \_\_\_\_\_

Given Names \_\_\_\_\_

Surname \_\_\_\_\_

Date of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_

Phone (home) (    ) \_\_\_\_\_

Phone (work) (    ) \_\_\_\_\_

Mobile \_\_\_\_\_

Email Address \_\_\_\_\_

Ages of Dependents \_\_\_\_\_

Drivers Licence Number \_\_\_\_\_ State \_\_\_\_\_

Known by any other Name \_\_\_\_\_

**SECONDARY**     Applicant     Guarantor

Member Number \_\_\_\_\_

Title \_\_\_\_\_

Given Names \_\_\_\_\_

Surname \_\_\_\_\_

Date of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_

Phone (home) (    ) \_\_\_\_\_

Phone (work) (    ) \_\_\_\_\_

Mobile \_\_\_\_\_

Email Address \_\_\_\_\_

Ages of Dependents \_\_\_\_\_

Drivers Licence Number \_\_\_\_\_ State \_\_\_\_\_

Known by any other Name \_\_\_\_\_

## Address Information

**Current Residential Address**

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Time there \_\_\_\_\_ (years) \_\_\_\_\_ (months)

**Postal Address** (leave blank if same as above)

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

**Previous Residential Address** (if current address is less than 2 years)

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Time there \_\_\_\_\_ (years) \_\_\_\_\_ (months)

If combined address is less than 2 years, please give details

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Current Residential Address**

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Time there \_\_\_\_\_ (years) \_\_\_\_\_ (months)

**Postal Address** (leave blank if same as above)

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

**Previous Residential Address** (if current address is less than 2 years)

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Time there \_\_\_\_\_ (years) \_\_\_\_\_ (months)

If combined address is less than 2 years, please give details

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Bankruptcy

### PRIMARY

Have you been bankrupt or insolvent?  Yes  No  
What bankruptcy status?  Current bankrupt  
 Discharged bankrupt

Have you ever entered into a scheme or arrangement with creditors under the Bankruptcy Act?  Yes  No

Do you have any judgements, garnishees or other legal proceedings against you?  Yes  No

If you have answered yes to any questions above, please provide full details below.

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### SECONDARY

Have you been bankrupt or insolvent?  Yes  No  
What bankruptcy status?  Current bankrupt  
 Discharged bankrupt

Have you ever entered into a scheme or arrangement with creditors under the Bankruptcy Act?  Yes  No

Do you have any judgements, garnishees or other legal proceedings against you?  Yes  No

If you have answered yes to any questions above, please provide full details below.

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Are any of the applicants experiencing financial stress from existing commitments?  Yes  No

If **yes** to financial stress, are any of the applicants in arrears with respect to existing debt?  Yes  No

Please give details below.

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## Residential Status

Boarding  
 Owner – fully owned  
 Buying/Mortgagor  
 Renting  
 Provided by employer  
 Living with parents  
 Other (give details) \_\_\_\_\_

Boarding  
 Owner – fully owned  
 Buying/Mortgagor  
 Renting  
 Provided by employer  
 Living with parents  
 Other (give details) \_\_\_\_\_

## Residency Status

Australian citizen  
 Temporary resident (copy of passport required)  
 Permanent resident  
 Other (give details) \_\_\_\_\_

Australian citizen  
 Temporary resident (copy of passport required)  
 Permanent resident  
 Other (give details) \_\_\_\_\_

## Referee (must be over 18 years, living in Australia and not living with Applicant)

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone (mobile is **not** acceptable) \_\_\_\_\_

Relationship  Child  Parent  Sibling  Friend  Other \_\_\_\_\_

## Employment Details

### PRIMARY

#### Current Employment

Occupation/Position \_\_\_\_\_

Status

Casual  Contract  Full-time  Part-time

Seasonal  Self employed  Other \_\_\_\_\_

Current Employer or Business Name \_\_\_\_\_

Employer/Business Address

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Service period \_\_\_\_\_ (years) \_\_\_\_\_ (months)

Current Gross Income (circle one)

\$ \_\_\_\_\_ p.a./p.m./p.f./p.w.

Please attach evidence of income, for example, payslips, or for self employed applicants, copies of the last 2 years financial statements.

#### Previous Employment (if current less than 2 years)

Occupation/Position \_\_\_\_\_

Status

Casual  Contract  Full-time  Part-time

Seasonal  Self employed  Other \_\_\_\_\_

Previous Employer or Business Name (if current less than 2 years) \_\_\_\_\_

Employer/Business Address

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Service period \_\_\_\_\_ (years) \_\_\_\_\_ (months)

If combined employment is less than 2 years, please give details

\_\_\_\_\_

\_\_\_\_\_

### SECONDARY

#### Current Employment

Occupation/Position \_\_\_\_\_

Status

Casual  Contract  Full-time  Part-time

Seasonal  Self employed  Other \_\_\_\_\_

Current Employer or Business Name \_\_\_\_\_

Employer/Business Address

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Service period \_\_\_\_\_ (years) \_\_\_\_\_ (months)

Current Gross Income (circle one)

\$ \_\_\_\_\_ p.a./p.m./p.f./p.w.

Please attach evidence of income, for example, payslips, or for self employed applicants, copies of the last 2 years financial statements.

#### Previous Employment (if current less than 2 years)

Occupation/Position \_\_\_\_\_

Status

Casual  Contract  Full-time  Part-time

Seasonal  Self employed  Other \_\_\_\_\_

Previous Employer or Business Name (if current less than 2 years) \_\_\_\_\_

Employer/Business Address

St No. and Name \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Service period \_\_\_\_\_ (years) \_\_\_\_\_ (months)

If combined employment is less than 2 years, please give details

\_\_\_\_\_

\_\_\_\_\_

## Other Income

	Income source	Amount	p.a./p.m./p.f.
Australian Government Pension	_____	\$ _____	_____
Austudy/ABSTUDY	_____	\$ _____	_____
Dividend	_____	\$ _____	_____
Family Tax Benefit Part A & B	_____	\$ _____	_____
Interest	_____	\$ _____	_____
Maintenance Child Support	_____	\$ _____	_____
Newstart	_____	\$ _____	_____
Overseas Income/Pension	_____	\$ _____	_____
Private Pension	_____	\$ _____	_____
Superannuation	_____	\$ _____	_____
Workers Comp.	_____	\$ _____	_____
Other (including spousal income)	_____	\$ _____	_____

	Income source	Amount	p.a./p.m./p.f.
Australian Government Pension	_____	\$ _____	_____
Austudy/ABSTUDY	_____	\$ _____	_____
Dividend	_____	\$ _____	_____
Family Tax Benefit Part A & B	_____	\$ _____	_____
Interest	_____	\$ _____	_____
Maintenance Child Support	_____	\$ _____	_____
Newstart	_____	\$ _____	_____
Overseas Income/Pension	_____	\$ _____	_____
Private Pension	_____	\$ _____	_____
Superannuation	_____	\$ _____	_____
Workers Comp.	_____	\$ _____	_____
Other (including spousal income)	_____	\$ _____	_____

# Financial Position - Assets

Assets	Owned by Primary App	Owned by Secondary App	To be used as security	Value
Primary Property (show address details) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Other Real Estate (show address details) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Weekly Rental Income \$ _____ Other Real Estate (show address details) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Weekly Rental Income \$ _____ Other Real Estate (show address details) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Weekly Rental Income \$ _____ Motor Vehicle Year _____ Make _____ Model _____ Insurer _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Motor Vehicle Year _____ Make _____ Model _____ Insurer _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Cash/Bank Accounts _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Other Assets _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
<b>TOTAL</b>				\$ _____





## Loan Details

	Loan 1	Loan 2	Loan 3	Total
Loan Amount	\$ _____	\$ _____	\$ _____	\$ _____
Term of Loan (yy/mm)	_____/____	_____/____	_____/____	
Type	<input type="checkbox"/> Fixed <input type="checkbox"/> Variable <input type="checkbox"/> Line of Credit	<input type="checkbox"/> Fixed <input type="checkbox"/> Variable <input type="checkbox"/> Line of Credit	<input type="checkbox"/> Fixed <input type="checkbox"/> Variable <input type="checkbox"/> Line of Credit	
Repayment Method	<input type="checkbox"/> Interest only <input type="checkbox"/> Principal & Interest	<input type="checkbox"/> Interest only <input type="checkbox"/> Principal & Interest	<input type="checkbox"/> Interest only <input type="checkbox"/> Principal & Interest	
Are these funds being used predominantly for investment purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is mortgage offset required?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

## Property for Security

Address \_\_\_\_\_

Volume/Folio No. \_\_\_\_\_ Lot No. \_\_\_\_\_  Plan  Deposited Plan  Diagram  Strata Plan  Survey-Strata Plan

Address \_\_\_\_\_

Volume/Folio No. \_\_\_\_\_ Lot No. \_\_\_\_\_  Plan  Deposited Plan  Diagram  Strata Plan  Survey-Strata Plan

## Settlement

Expected settlement date \_\_\_\_/\_\_\_\_/\_\_\_\_ Finance approval date \_\_\_\_/\_\_\_\_/\_\_\_\_

Will a Settlement Agent be acting for you?  Yes  No

Settlement Agent Company Name \_\_\_\_\_

Settlement Agent Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Do you agree to Police & Nurses providing a copy of your loan approval letter and/or documentation to the Settlement Agent/Solicitor?  Yes  No

Where do you want documents to be sent?  Mail  Member to collect  Broker to collect  Overseas  Other \_\_\_\_\_

Branch name \_\_\_\_\_

## Other Products

Police & Nurses has a competitive range of other financial products. Please indicate if you wish to have any or all of these additional products:

<input checked="" type="checkbox"/> Term Deposit	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input checked="" type="checkbox"/> Savings Account	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input checked="" type="checkbox"/> Personal Loan	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input checked="" type="checkbox"/> Credit Card (if you qualify for a pre-approved credit card would you like one?)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## Insurance

We offer competitive insurance to members wishing to insure their repayments against sickness, accident, unemployment or death. Insurance is recommended by the Credit Union for your benefit. Before deciding to acquire or continue to hold any insurance product/s you should carefully read and consider the Product Disclosure Statement/s (PDS) available from Police & Nurses. Please indicate your Consumer Credit Insurance and/or your General Insurance needs by ticking the appropriate boxes below. The decision to take out Consumer Credit Insurance and/or General Insurance is not a condition of application approval.

### Consumer Credit Insurance

I/We am/are adequately insured and do not require Consumer Credit Insurance.

I/We would like to take advantage of Consumer Credit Insurance as follows:

	Primary	Secondary
<input checked="" type="checkbox"/> Death	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Disability	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Involuntary Unemployment	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Trauma	<input type="checkbox"/>	<input type="checkbox"/>

### General Insurance

I/We am/are adequately insured and do not require General Insurance.

I/We would like to take advantage of General Insurance as follows:

<input checked="" type="checkbox"/> Home and Contents	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Vehicle Insurance Comprehensive	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Health Insurance	<input type="checkbox"/>	<input type="checkbox"/>

## Service Nomination

You have the option to nominate a designated person to receive notices and other documents under the National Credit Code on your behalf (other than default notices) and you may declare that the nominated person resides at the same address as you.

Do you wish to nominate a person to receive notices? (Only a person who is a borrower may be the person nominated)  Yes  No

If yes, please write that person's name here \_\_\_\_\_

**IMPORTANT:** Please note that each joint Debtor/Guarantor is entitled to receive a copy of any notice or other document under the National Credit Code. By nominating and signing this form, you are giving up the right to be provided with information direct from the credit provider and instead it will go to the nominated person on behalf of each or all of you. You can advise the credit provider at any time that you wish to cancel this nomination.

## Acknowledgement of Liability for Costs

An establishment fee is payable upon funding of the loan and is not refundable. Other fees and charges may be applicable to the loan and a Schedule of Fees and Charges is available upon request. In the event that your loan is not accepted, or you decide not to proceed, you will only be liable for any fees and charges already incurred. For example: valuation fee. By signing this loan application form you acknowledge your liability in relation to our already expended fees and charges.

**Note:** It is an offence under the Financial Transaction Reports Act (1988) to make a false or misleading statement.

## Borrower/s Declaration & Consent

### Declaration

I/We declare that the answers in the foregoing statements are true and complete in every particular and that I/we have no financial commitments or obligations other than those stated in this document and that I/we are aware that it is on this basis of the information that I/we have provided that Police & Nurses will make its decision whether or not to grant a loan.

I/We acknowledge that this form does not constitute an offer or acceptance of credit in terms of any legislation relating to the provision of credit or any other applicable act of ordinance relating to the provision of credit.

## Borrower/s Acknowledgement & Consent

### Protection of Your Privacy

#### Credit Information (section 18E(8)(c) Privacy Act 1988)

The personal information you supply to us will be held and used by us (including our agents and contractors if applicable) to provide you with membership and our products and services. Without the information we require, we may be unable to provide the products and services you require. Further details, including how you may access the personal information that we hold, are in our publicly available Privacy Statement.

#### Important Notice & Authorisation

The Privacy Act (1988) allows the Credit Union to give a credit reporting agency and certain persons information about me for the following purposes:

- to obtain a consumer credit report about you; and/or
- to allow the credit reporting agency to create or maintain a credit information file containing information about you.

This information is limited to:

- identity particulars including name, sex, date of birth, current known address, 2 immediately previous addresses, current or last known employer, and drivers licence number;
- the fact that credit has been applied for and the amount;
- the fact that the Credit Union is a credit provider;
- advice that details of payments which become overdue for more than 60 days and for which collection action has commenced;
- the fact that payments are no longer overdue;
- details of cheques drawn which have been dishonoured more than once;

- the fact that in the Credit Union’s opinion a serious credit infringement has occurred; and
- the credit provided by the Credit Union has been paid or discharged

Which I hereby acknowledge the above notice and authorise the Credit Union to give the above mentioned information about me to a credit reporting agency.

I acknowledge that the information may be given before, during or after the provision of credit to me.

**Exchanging information with other credit providers and potential or existing Guarantor (section 18N(1)(b) & 18N(1)(bg) Privacy Act 1988)**

I agree to the Credit Union checking personal information about me with any credit provider named in my credit application, and with other credit providers that may be named in a credit report issued by a credit reporting agency, for any of the following purposes:

- to assess my creditworthiness;
- to help me avoid defaulting on my credit obligations;
- the collection of overdue payments;
- to assess an application by me for credit;
- to notify a default by me; and
- to exchange information with other credit providers as to the status of this loan where I am in default with other credit providers.

I/We agree that the Credit Union may give to a person who is currently a Guarantor, or whom I/we have indicated is considering becoming a Guarantor, a credit report containing information about me/us for the purpose of the guarantor deciding whether to act as Guarantor or to keep the Guarantor informed about the guarantee. I/We declare that the Credit Union may act upon this authority until it has received my/our instructions to the contrary.

I/We understand that this information can include any information about me/our credit worthiness, credit standing, credit history or credit capacity that credit providers are allowed to give or receive from each other under the Privacy Act 1988.

**Access to Commercial Credit Information (section 18L(4) Privacy Act 1988)**

For the purpose of assessing my application for credit, I consent to the Credit Union obtaining a report containing information about my commercial activities or commercial credit worthiness, for a business which provides information about the credit worthiness of persons.

**Access to Consumer Credit Information for a Commercial Credit Application (section 18K (1)(b) Privacy Act 1988) (not for credit cards)**

If my application is for commercial credit, I consent to the Credit Union, in order to assess my application, obtaining from a credit reporting agency a credit report about me containing consumer credit information.

**Declaration**

I declare that the answers in the foregoing statements are true and complete in every particular and that I have no financial commitments or obligations other than those stated in this document and that I am aware that it is on the basis of the information that I have provided that Police & Nurses will make its decision whether or not to grant a loan. I authorise Police & Nurses to make enquiries, which it considers necessary to fully assess this loan enquiry. I acknowledge that this form does not constitute an offer or acceptance of credit in terms of any legislation relating to the provision of credit or any other application act or ordinance relating to the provision of credit.

**X**

Borrower's Signature

**X**

Borrower's Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

## Guarantor/s Acknowledgement & Consent (complete only for Mortgage Loan applications requiring Guarantor/s)

### Assessment of Guarantor (Section 18N(1)(bh) Privacy Act 1988)

I/We agree that the Credit Union may obtain from a credit reporting agency a consumer credit report containing information about me/us for the purpose of assessing whether to accept me/us as a Guarantor for credit applied for by, or provided to, the Borrower/s named below. I/We agree that this agreement commences from the date of this agreement and continues until the credit covered by the Borrower/s application ceases.

X

Guarantor's Signature

Name

Date

X

Guarantor's Signature

Name

Date

## Business Purpose Declaration

### Borrower's Declaration of Purpose

I/We declare that the credit to be provided to me/us by the credit provider is to be applied wholly or predominately for business or investment purposes (or for both purposes).

#### **Important**

You should **not** sign this declaration unless this loan is wholly or predominantly for business or investment purposes.  
By signing this declaration you may lose your protection under the National Credit Code.

X

Borrower's Signature

Name

Date

X

Borrower's Signature

Name

Date