



KOOPKRAG

Pty Ltd Registration no. 1938/011150/07
PO BOX 35908, MENLO PARK, 0102

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APPLICATION FOR CREDIT

Koopkrag limited is a authorised Financial Service Provider no 2763 and a Authorised Credit Provider in terms of section 40 of the National Credit Act 34 of 2005. The purpose of this application is to determine if the consumer qualifies for credit in accordance with the requirements of the National Credit Act,34 of 2005.

CONSUMER DETAILS

Title	Christian names											
Surname												
First name								Koopkrag account no.				
Identity Number										Number of		
dependants												
Married in Community			Married out of Community			Divorced		Single		Widower / widow		
Residential address						Postal address						
Tel no (H) ()						Fax no ()						
Tel no (W) ()						E-mail address						
Employer						Occupation / Title						
Work address												
Cell number				Service period		Y	Y	M	M	Permanent	Temporary	Contract

SPOUSES DETAILS

Title	First name											
Surname												
Christian names												
Identity Number												
Employer						Occupation / Title						
Work address												
Cell number				Service period		Y	Y	M	M	Permanent	Temporary	Contract
Tel no (W) ()						E-mail address						

AFFORDABILITY ASSESSMENT

NETT MONTHLY INCOME		MONTHLY EXPENSES	
Applicant salary	R	Bond instalment	R
Spouse salary	R	Hire purchase instalments	R
Other income (specify):		Credit card instalments	R
1.	R	Insurance / policies	R
2.	R	Medical	R
3.	R	Pension fund contributions	R
4.	R	Petrol	R
5.	R	Groceries	R
6.	R	Cellular account	R
7.	R	Telephone account	R
		Rental agreement	R
		DSTV / M - net account	R
		Municipality account	R
		Other expenses (specify):	R
			R
			R
TOTAL INCOME	R	TOTAL EXPENSES	R

ASSETS					LIABILITIES	
Fixed property (market value)	R				Bond balance	R
Registered owner	Own	CC	Trust	Other	Loan account (s) balance	R
Registered in the name of:					Bank overdraft balance (s)	R
Furniture	R				Asset finance balance (s)	R
Vehicles	R				Other credit facilities (specify):	
Investments	R				1.	R
Other assets (specify)					2.	R
1.	R				3.	R
2.	R				4.	R
3.	R				5.	R
4.	R				6.	R
5.	R				7.	R
					Surety	R
TOTAL ASSET VALUE		R			TOTAL LIABILITIES	
					R	

OTHER CREDIT FACILITIES			
CREDIT PROVIDER	Account number	Monthly instalments	Facility granted
1.		R	R
2.		R	R
3.		R	R
4.		R	R
5.		R	R
6.		R	R

REFERENCES – TWO RELATIVES (not residing with you)		
1. Title	Initials	Surname
Residential address		
Cellular phone number		Relationship
Tel (W) ()		Tel (H) ()
2. Title	Initials	Surname
Residential address		
Cellular phone number		Relationship
Tel (W) ()		Tel (H) ()

CREDIT FACILITY APPLICATION				
Please indicate the credit facility that you are applying for by ticking the appropriate box below:				
	Deposit	Repayment period	Amount	“X”
1. Asset finance (motor vehicles, furniture etc.)		Months	R	
Description of item financed:				
2. Short term loan		Months	R	
Reason for personal loan:				
3. If insured (relating to item number 1 above):				
Name of short term insurer:			Policy number:	

DOCUMENTATION	
You have to attach the following documents to this application.	
Please indicate, by ticking the appropriate box below, which of the following documents have been included with this application. “X”	
1. Copy of your identity document	
2. Latest proof of income	
3. Proof of residential address	
4. Copy of your ante nuptial contract (if applicable)	

Initial

BANK DETAILS FOR TRANSFER OF THE LOAN:

Name of the account holder: _____

Name of bank: _____

Branch name: _____ Branch Code: _____

Account number: _____

CREDIT APPLICANT DECLARATION

Please indicate your answer by ticking the appropriate box below:

	YES	NO
1. Have you at any stage been declared mentally unfit by THE HIGH COURT OF South Africa?		
2. Are you currently under or have you ever applied for a debt review?		
3. Are you currently under an administration order?		
4. Are you insolvent or is there any indication that your estate could be placed under provisional sequestration?		
5. Do you have any dispute in process with a Credit Bureau?		

I / We declare that I / we have as part of this assessment process answered all the questions and requests for information fully and truthfully and that I / we understand the terms and conditions of section 89(3) of the Act.

I / We confirm that I / we am / are applying for this credit facility and understand the implications, consequences and risks attached to credit as explained to me / us.

I / We understand that the Credit Provider can refuse to grant this credit facility to me / us in terms of section 60(2) of the Act.

I / We hereby authorize the Credit Provider to obtain credit references and / or any other references from any Credit Bureau and / or person for the purpose of my / our application and pertaining to my/ our credit history.

Signed at _____ on this _____ Day of _____ 20_____

Signature Consumer

Signature Consumer Spouse