



# CITY WHEELS AUCTION HOUSE

## Vehicle Finance Application FAX COVER NOTE

TO : \_\_\_\_\_

PAGES : \_\_\_\_\_

FROM : \_\_\_\_\_

YOUR FAX : \_\_\_\_\_

DATE : \_\_\_\_\_

**PLEASE COMPLETE THE APPLICATION AND FAX BACK  
TO 012 335 3412 OR EMAIL [michelle@citywheels.co.za](mailto:michelle@citywheels.co.za)**

**PLEASE NOTE : ALL FIELDS ARE COMPULSORY , DON'T  
LEAVE BLANK SPACES OR APPLICATION CANNOT  
BE SUBMITTED!!**

**THE FOLLOWING DOCUMENTS TO BE SUBMITTED WITH COMPLETED APPLICATION :**

**PERSONAL APPLICATION**

1. CLEAR COPY OF ID
2. CLEAR COPY OF DRIVERS LICENCE
3. LATEST 3 X PAYSLIPS AND SUPPORTING BANKSTATEMENTS REFLECTING SALARY.
4. PROOF OF RESIDENCE (NOT OLDER THAN 3 MONTHS)
5. EXTRA INCOME BANKSTATEMENTS (IF ANY)

**BUSINESS APPLICATION**

1. IF MORE THAN 1 MEMBER, EACH MEMBER MUST COMPLETE A PERSONAL APPLICATION FORM.
2. BUSINESS APPLICATION FORM COMPLETED
3. CLEAR COPY OF EACH MEMBERS ID
4. CLEAR COPY OF EACH MEMBERS VALID DRIVERS LICENCE
5. LATEST 3 X BANKSTATEMENTS OF BUSINESS
6. PROOF OF RESIDENCE FOR BUSINESS AND EACH MEMBER(NOT OLDER THAN 3 MONTHS)
7. BUSINESS DOCS, (CK DOCS, PTY DOCS ECT..
8. LATEST SIGNED AUDITOR STATEMENTS



# City Wheels Auction House Vehicle Finance Application

ABSA D/Code : \_\_\_\_\_  
 Wesbank D/Code : \_\_\_\_\_  
 MFC D/Code : \_\_\_\_\_  
 Ariva D/Code : \_\_\_\_\_

APPLICATION FOR FIN PAGE 1  
 City Wheels Auction House  
 644 Johan Heyns street, Gezina, PTA  
 Tel 012 335 1783 Fax 012 3353412  
 Email : michelle@citywheels.co.za

**F & I CONTACT : MICHELLE** SALESMAN : \_\_\_\_\_ TEL \_\_\_\_\_

Vehicle Description : RETAIL : R \_\_\_\_\_ KMS : \_\_\_\_\_ MM CODE

YEAR : \_\_\_\_\_ MAKE /MODEL: \_\_\_\_\_

PRICE VAT INCLUSIVE : R \_\_\_\_\_ TERM REQUESTED \_\_\_\_\_ RATE : \_\_\_\_\_

LICENCE & REG FEE : R \_\_\_\_\_ WARRANTY : R \_\_\_\_\_ LINKED/FIXED : \_\_\_\_\_

DEPOSIT PAID: R \_\_\_\_\_ RWC FEE : R \_\_\_\_\_ LEASE/INSTALMENT SALE \_\_\_\_\_

**PERSONAL DETAILS : FULL NAMES & SURNAME :**

ID NUMBER : \_\_\_\_\_ MARRIED  ANC  COP  DATE        
 SINGLE  DIVORCED

HOME TEL: \_\_\_\_\_ WORK : \_\_\_\_\_ CELL : \_\_\_\_\_ EMAIL \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CODE : \_\_\_\_\_  
 POSTAL ADDRESS \_\_\_\_\_ CODE : \_\_\_\_\_  
 TIME AT CURRENT ADDRESS : YEARS \_\_\_\_ MNTHS \_\_\_\_\_ TIME AT PREVIOUS ADDRESS : YEARS \_\_\_\_ MONTHS \_\_\_\_\_  
 BONDED YES  NO  BANK BOND WITH : ASBA  STD BANK  FNB  OTHER SPECIFY \_\_\_\_\_  
 AMOUNT OUTSTANDING \_\_\_\_\_ CURRENT PROPERTY VALUE \_\_\_\_\_ PAID UP

**NEXT OF KIN : (SOMEONE NOT RESIDING WITH YOU) :** NAME \_\_\_\_\_ SURNAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ TEL NO : \_\_\_\_\_ RELATION \_\_\_\_\_

**EMPLOYMENT DETAIL :** EMPLOYER : \_\_\_\_\_ JOB DISCR- \_\_\_\_\_ YRS \_\_\_\_ MTS \_\_\_\_  
 EMPLOYER ADDRESS \_\_\_\_\_ CODE \_\_\_\_\_  
 SALARY DATE : \_\_\_\_\_ LANDLINE CONTACT TEL : \_\_\_\_\_ PREV EMP YRS \_\_\_\_ MTS \_\_\_\_  
 SPOUSE EMPLOYER : \_\_\_\_\_ TEL \_\_\_\_\_ YRS \_\_\_\_ MTS \_\_\_\_  
 SPOUSE NAME \_\_\_\_\_ ID NO \_\_\_\_\_ TEL \_\_\_\_\_

**BANKING DETAIL :** BANK NAME : \_\_\_\_\_ BRANCH CODE \_\_\_\_\_  
 ACC NAME : \_\_\_\_\_ ACC NUMBER \_\_\_\_\_ SAV/CHE \_\_\_\_\_  
 DO YOU CONSENT TO BANK TO OBTAIN STATEMENTS ON YOUR BEHALF TO CONFIRM SALARY? YES  NO

**CURRENT OPEN ACCOUNTS :** ARE YOU GOING TO SETTLE CURRENT ACCOUNT?:  
 NAME : \_\_\_\_\_ ACC TO SETTLE \_\_\_\_\_ AMOUNT \_\_\_\_\_

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 DATE SIGNED



# Vehicle Finance Application

## Income and Expenses

APPLICATION FOR FIN PAGE 2  
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 Email : michelle@citywheels.co.za

APPLICANT NAME AND SURNAME :		ID NUMBER :
BASIC SALARY BEFORE DEDUCTIONS: R		
CAR ALLOWANCE R		LOANS DEDUCTED FROM SALARY ? R
COMMISSION MONTHLY R		NETT SALARY PAID TO YOUR ACCOUNT : R
OTHER INCOME : R	SPECIFY :	BANKED IN YOUR ACCOUNT ? YES <input type="checkbox"/> NO <input type="checkbox"/>

### EXPENSES MONTHLY

BOND PAYMENT : R	WATER/ELECTRICITY : R
RENT PAYMENT : R	PERSONAL LOANS : R
VEHICLE INST (EXCLUDING TO BE SETTLED) R	FURNITURE ACCOUNTS : R
CREDIT CARD PMTS : R	OVERDRAFT PMT MONTHLY : R
CLOTHING ACCOUNTS : R	TELEPHONE ACC : R
POLICY / INSURANCE PMTS : R	GROCERIES: R
TRANSPORT FUEL COSTS : R	MAINTENANCE : R
EDUCATION STUDY / KIDS SCHOOL FEES : R	DSTV ETC : R

NETT INCOME : R	MONTHLY EXP TOTAL : R	DISPOSABLE : R
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I HEREBY GIVE CONSENT TO ABSA/MFC/WESBANK TO OBTAIN ELECTRONIC STATEMENTS AND OR PAYSLIPS ELECTRONICALLY OR VIA EMPLOYER,

I confirm that I am not a Minor.  
 I have never been declared mentally unfit by a court  
 I am not subject to an administration order  
 I am not under debt counselling  
 I have not applied for debt-re arrangement  
 I am not under sequestration  
 The information I supplied is true and correct  
 If any of the above is incorrect give details \_\_\_\_\_

#### Declaration by client :

I hereby grant the Credit provider the right :

1. To increase my Credit limit once every year to accommodate any value added products needed
2. To authorise the Credit Provider to make enquiries about my credit record with any credit agency
3. To obtain whatever information on me they might require to process this application
4. I understand that i will be liable for a monthly service fee
5. I also authorise the Credit Provider to share my payment behaviour with any credit agency and National Loans Reg

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE SIGNED