

ORIGINATOR: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 APPLICANT TYPE: (Select appropriate box)  Company  Individual  Partnership  Trust  Other

**ORGANISATION/INDIVIDUAL LEGAL NAME:** \_\_\_\_\_

Trading Name: \_\_\_\_\_  
 Industry: \_\_\_\_\_ Company #: \_\_\_\_\_ GST No.: \_\_\_\_\_ LTSA No.: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_  
 Postal Address: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
 Accountant Name: \_\_\_\_\_ Acct. Ph: \_\_\_\_\_ Acct. E-mail: \_\_\_\_\_

**ORGANISATION FINANCIAL INFORMATION**

Sales: \$ \_\_\_\_\_ Total Assets: \$ \_\_\_\_\_ Current Assets: \$ \_\_\_\_\_  
 Gross Profit: \$ \_\_\_\_\_ Total Liabilities: \$ \_\_\_\_\_ Current Liabilities: \$ \_\_\_\_\_  
 Net Profit After Tax: \$ \_\_\_\_\_ Shareholder Funds: \$ \_\_\_\_\_ Shareholder Drawings: \$ \_\_\_\_\_

**INDIVIDUAL INFORMATION** (To be completed by: If an INDIVIDUAL: Individual Applicant / Individual Guarantor and if an ORGANISATION: Directors / Shareholders / Partners / Non-Independent Trustee & Others if relevant (each of whom may be the person acting for the purpose of the Personal Property Security Act 1999))

First Name: \_\_\_\_\_ Middle Names: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Citizenship: \_\_\_\_\_ Driver's Licence No/Ver #: \_\_\_\_\_ / \_\_\_\_\_ Marital Status: \_\_\_\_\_ No. of Deps: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
 Home E-mail: \_\_\_\_\_ Work E-mail: \_\_\_\_\_

Address & Tenancy:  Owner Unencumbered /  Owner Mortgage /  Renting /  Parents /  Other: \_\_\_\_\_

Current Address: \_\_\_\_\_ Years: \_\_\_\_\_  
 Previous Address: \_\_\_\_\_ Years: \_\_\_\_\_

Present Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Years: \_\_\_\_\_  
 Address: \_\_\_\_\_ Industry: \_\_\_\_\_  
 Previous Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Years: \_\_\_\_\_  
 Nearest Relative: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone No: \_\_\_\_\_ Address: \_\_\_\_\_  
Not living at the same address

**INDIVIDUAL FINANCIAL INFORMATION**

A. ASSETS		B. LIABILITIES		C. INCOME (Monthly)		D. EXPENSES (Monthly)	
Home	_____	Home Mortgage	_____	Net Income	_____	Mortgage / Rent	_____
Furnishings	_____	HP/Loans	_____	Spouse Net Income	_____	HP/Loans	_____
Bank	_____	Credit Cards	_____	Other Income	_____	Credit Cards	_____
Car(s)	_____	Bank O/D	_____	<b>TOTAL INCOME</b>	_____	Bank O/D	_____
Investments	_____	Other Liabilities	_____	Rental Income	_____	Living Expenses	_____
Other Assets	_____	<b>TOTAL LIABILITIES</b>	_____	Bonus	_____	Other Expenses	_____
<b>TOTAL ASSETS</b>	_____	<b>Net Worth (A-B)</b>	_____		_____	<b>TOTAL EXPENSES</b>	_____

Other Information: \_\_\_\_\_

**VERBAL PRIVACY AUTHORITY**

So that European Financial Services Limited and/or Euro Rate Leasing Limited can assess the application for finance (whether you are the applicant or a guarantor), it is necessary for European Financial Services Limited and/or Euro Rate Leasing Limited and/or this motor vehicle dealership to exchange personal information and make enquiries, disclose and obtain personal information about you to and from any bank, financial institution, credit reporter, government department (such as the Ministry of Justice) or government agencies (such as the New Zealand Transport Agency), insurance company, employer, or any other person or entity in consideration of the application.

Accordingly **do you authorise** European Financial Services Limited and Euro Rate Leasing Limited and this motor vehicle dealership to exchange your personal information, make enquiries about you, disclose and obtain personal information about you to and from any of the entities mentioned earlier for the following purposes: **CONFIRMED**

a) First, to assess your credit worthiness as either the applicant or a guarantor and in considering this application;

b) Second, to verify your identity as may be required by the Anti-Money Laundering and Countering Financing of Terrorism Act 2009 and its regulations; **CONFIRMED**

**Do you understand** that you may access the personal information held by European Financial Services Limited and/or Euro Rate Leasing Limited and this motor vehicle dealership and ask that the personal Information be corrected in accordance with the provisions of the Privacy Act 1993? **CONFIRMED**

**Do you certify** that the information you have given in the application for finance is true and correct? **CONFIRMED**

**Do you understand** that if any information given by you or anyone else in relation to the application for finance is incorrect or if another applicant or a guarantee in relation to the application for finance does not provide an authority like this then the application for finance might be declined **CONFIRMED**

Customer (Introducer Name if Verbal taken) \_\_\_\_\_ Dealership Name \_\_\_\_\_ Signature (Customer or Dealer if Verbal taken) \_\_\_\_\_ Date \_\_\_\_\_



# Volkswagen Finance | Application for Finance | Business

Volkswagen Finance is a trading style of European Financial Services Limited and Euro Rate Leasing Limited. Level 1, 6 Mackelvie Street, Grey Lynn, Auckland 1021

## ADDITIONAL GUARANTOR PAGE

**ORGANISATION/INDIVIDUAL LEGAL NAME:** \_\_\_\_\_

**INDIVIDUAL INFORMATION** (To be completed by: If an INDIVIDUAL: Individual Applicant / Individual Guarantor and if an ORGANISATION: Directors / Shareholders / Partners / Non-Independent Trustee & Others if relevant (each of whom may be the person acting for the purpose of the Personal Property Security Act 1999))

First Name: \_\_\_\_\_ Middle Names: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Driver's Licence No/Ver #: \_\_\_\_\_ / \_\_\_\_\_ Marital Status: \_\_\_\_\_ No. of Deps: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Home E-mail: \_\_\_\_\_ Work E-mail: \_\_\_\_\_

Address & Tenancy:  Owner Unencumbered /  Owner Mortgage /  Renting /  Parents /  Other: \_\_\_\_\_

Current Address: \_\_\_\_\_ Years: \_\_\_\_\_

Previous Address: \_\_\_\_\_ Years: \_\_\_\_\_

Present Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Years: \_\_\_\_\_

Address: \_\_\_\_\_ Industry: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Years: \_\_\_\_\_

Nearest Relative: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone No: \_\_\_\_\_ Address: \_\_\_\_\_

### INDIVIDUAL FINANCIAL INFORMATION

A. ASSETS	B. LIABILITIES	C. INCOME (Monthly)	D. EXPENSES (Monthly)
Home _____	Mortgages _____	Net Income _____	Mortgage / Rent _____
Furnishings _____	HP/Loans _____	Spouse Net Income _____	HP/Loans _____
Bank _____	Credit Cards _____	Other Income _____	Credit Cards _____
Car(s) _____	Bank O/D _____	<b>TOTAL INCOME</b> _____	Bank O/D _____
Investments _____	Other Liabilities _____		Living Expenses _____
Other Assets _____	<b>TOTAL LIABILITIES</b> _____	Rental Income _____	Other Expenses _____
<b>TOTAL ASSETS</b> _____	<b>Net Worth (A-B)</b> _____	Bonus _____	<b>TOTAL EXPENSES</b> _____
		<small>FREQUENCY      BONUS AMOUNT</small>	

Other Information: \_\_\_\_\_

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\_\_\_\_\_  
Customer (Introducer Name if Verbal taken)

\_\_\_\_\_  
Dealership Name

\_\_\_\_\_  
Signature (Customer or Dealer if Verbal taken)

\_\_\_\_\_  
Date