

Personal Loan Application – Website

Please contact Aussie Customer Care on **1300 729 156** for any assistance.

To ensure your application is processed promptly, please provide all the details requested below. Questions marked (*) are essential to your application – without this information, your application cannot be processed.

Please read the “Important Privacy Notice” in its entirety (located on the last page of this form) and sign to acknowledge your acceptance. This needs to be completed in order for us to process your application.

Completed forms can be faxed to us at **1300 729 102** or mailed to the above address.

1 Loan Details

Amount requested*	Preferred payment	Preferred loan term (max. 84 months)*	Loan purpose*
\$ <input type="text"/> .00	\$ <input type="text"/> monthly	<input type="text"/> months	<input type="text"/>

2 About You

Applicant 1 (Enter your name and address as it appears on your primary ID e.g. driver licence or passport)

Title*	First name*	Middle name	Surname*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden name (if applicable)	Gender*	Date of birth*	Marital status*
<input type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input type="text"/> DD/MM/YYYY	<input type="text"/>
No. of dependants (exclude partner)	Driver licence number*	Licence expiry date*	
<input type="text"/>	<input type="text"/>	<input type="text"/> DD/MM/YYYY	
Home phone*	Work phone*	Mobile phone	Type of mobile phone
(<input type="text"/>)	(<input type="text"/>)	<input type="text"/>	Contract <input type="checkbox"/> Pre-paid <input type="checkbox"/>
Fax number	Preferred contact number	Preferred time to be called	
(<input type="text"/>)	Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile <input type="checkbox"/>	Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening <input type="checkbox"/>	
Email address	Email password (for secure transmission of loan documents)		
<input type="text"/>	<input type="text"/>		
Current home address*	Postcode		
<input type="text"/>	<input type="text"/>		
Current residential status*	Time at current address*		
Own home <input type="checkbox"/> Home mortgaged <input type="checkbox"/> Rent <input type="checkbox"/> Board <input type="checkbox"/> Live with parents <input type="checkbox"/>	years months		
Previous address if you lived for less than 3 years at your current address*	Postcode		
<input type="text"/>	<input type="text"/>		
Previous residential status*	Time at previous address*		
Own home <input type="checkbox"/> Home mortgaged <input type="checkbox"/> Rent <input type="checkbox"/> Board <input type="checkbox"/> Live with parents <input type="checkbox"/>	years months		
Mailing address – if you wish us to contact you at a different address	Postcode		
<input type="text"/>	<input type="text"/>		
Country	<input type="text"/>		

NEXT ▶

2 About You *continued*

Applicant 2 (if applicable) (Enter your name and address as it appears on your primary ID e.g. driver licence or passport)

Title*	First name*	Middle name	Surname*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden name (if applicable)	Gender*	Date of birth*	Marital status*
<input type="text"/>	M <input type="checkbox"/> F <input type="checkbox"/>	<input type="text" value="DD/MM/YYYY"/>	<input type="text"/>
No. of dependants (exclude partner)	Driver licence number*	Licence expiry date*	
<input type="text"/>	<input type="text"/>	<input type="text" value="DD/MM/YYYY"/>	
Home phone*	Work phone*	Mobile phone	Type of mobile phone
() <input type="text"/>	() <input type="text"/>	<input type="text"/>	Contract <input type="checkbox"/> Pre-paid <input type="checkbox"/>
Fax number	Preferred contact number	Preferred time to be called	
() <input type="text"/>	Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile <input type="checkbox"/>	Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening <input type="checkbox"/>	
Email address	Email password (for secure transmission of loan documents)		
<input type="text"/>	<input type="text"/>		
Current home address*	Postcode		
<input type="text"/>	<input type="text"/>		
Current residential status*	Time at current address*		
Own home <input type="checkbox"/> Home mortgaged <input type="checkbox"/> Rent <input type="checkbox"/> Board <input type="checkbox"/> Live with parents <input type="checkbox"/>	years months		
Previous address if you lived for less than 3 years at your current address*	Postcode		
<input type="text"/>	<input type="text"/>		
Previous residential status*	Time at previous address*		
Own home <input type="checkbox"/> Home mortgaged <input type="checkbox"/> Rent <input type="checkbox"/> Board <input type="checkbox"/> Live with parents <input type="checkbox"/>	years months		
Mailing address – if you wish us to contact you at a different address	Postcode		
<input type="text"/>	<input type="text"/>		
Country	<input type="text"/>		

3 Your Employment

Applicant 1

Current employment status*

Permanent full-time Permanent part-time Casual Contract Self employed Unemployed
 Workers comp Other Specify

Occupation* Employer/Company name

Employer phone number* () Time with employer* years months

Previous employer/company name if with your current employer for less than 3 years Time with previous employer* years months

Applicant 2 (if applicable)

Current employment status*

Permanent full-time Permanent part-time Casual Contract Self employed Unemployed
 Workers comp Other Specify

Occupation* Employer/Company name

Employer phone number* () Time with employer* years months

Previous employer/company name if with your current employer for less than 3 years Time with previous employer* years months

4 Your Finances

Monthly income and expense details

Living expenses include all utilities bills (e.g. phone, electricity, gas, water, rates, etc), food, entertainment, travel, car expenses and any other regular expenditure.

Applicant 1

Monthly income after tax*	Additional income	Living expenses*	Rent/Mortgage	Partner working full time?
\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Source of additional income (e.g. dividend payments, government benefit, workers compensation)

Applicant 2 (if applicable)

Monthly income after tax*	Additional income	Living expenses*	Rent/Mortgage	Partner working full time?
\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Source of additional income (e.g. dividend payments, government benefit, workers compensation)

Account/loan/credit card details

Liabilities include personal, car or home loans, credit or store cards and other finance/instalment payments. Please complete all fields as appropriate.

Liability 1

Account name	Credit limit/Amount borrowed	Person responsible for liability
<input type="text"/>	\$ <input type="text" value=".00"/>	App 1 <input type="checkbox"/> App 2 <input type="checkbox"/> Joint <input type="checkbox"/>

Bank	Account type (e.g. VISA)	Original term	Term remaining	Monthly payment	Current balance
<input type="text"/>	<input type="text"/>	<input type="text" value="months"/>	<input type="text" value="months"/>	\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>

Liability 2

Account name	Credit limit/Amount borrowed	Person responsible for liability
<input type="text"/>	\$ <input type="text" value=".00"/>	App 1 <input type="checkbox"/> App 2 <input type="checkbox"/> Joint <input type="checkbox"/>

Bank	Account type (e.g. VISA)	Original term	Term remaining	Monthly payment	Current balance
<input type="text"/>	<input type="text"/>	<input type="text" value="months"/>	<input type="text" value="months"/>	\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>

Liability 3

Account name	Credit limit/Amount borrowed	Person responsible for liability
<input type="text"/>	\$ <input type="text" value=".00"/>	App 1 <input type="checkbox"/> App 2 <input type="checkbox"/> Joint <input type="checkbox"/>

Bank	Account type (e.g. VISA)	Original term	Term remaining	Monthly payment	Current balance
<input type="text"/>	<input type="text"/>	<input type="text" value="months"/>	<input type="text" value="months"/>	\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>

Liability 4

Account name	Credit limit/Amount borrowed	Person responsible for liability
<input type="text"/>	\$ <input type="text" value=".00"/>	App 1 <input type="checkbox"/> App 2 <input type="checkbox"/> Joint <input type="checkbox"/>

Bank	Account type (e.g. VISA)	Original term	Term remaining	Monthly payment	Current balance
<input type="text"/>	<input type="text"/>	<input type="text" value="months"/>	<input type="text" value="months"/>	\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>

Liability 5

Account name	Credit limit/Amount borrowed	Person responsible for liability
<input type="text"/>	\$ <input type="text" value=".00"/>	App 1 <input type="checkbox"/> App 2 <input type="checkbox"/> Joint <input type="checkbox"/>

Bank	Account type (e.g. VISA)	Original term	Term remaining	Monthly payment	Current balance
<input type="text"/>	<input type="text"/>	<input type="text" value="months"/>	<input type="text" value="months"/>	\$ <input type="text" value=".00"/>	\$ <input type="text" value=".00"/>

4 Your Finances *continued*

Liability 6

Account name		Credit limit/Amount borrowed	Person responsible for liability		
<input type="text"/>		\$ <input type="text"/> .00	App 1 <input type="checkbox"/> App 2 <input type="checkbox"/> Joint <input type="checkbox"/>		
Bank	Account type (e.g. VISA)	Original term	Term remaining	Monthly payment	Current balance
<input type="text"/>	<input type="text"/>	<input type="text"/> months	<input type="text"/> months	\$ <input type="text"/> .00	\$ <input type="text"/> .00

Liability 7

Account name		Credit limit/Amount borrowed	Person responsible for liability		
<input type="text"/>		\$ <input type="text"/> .00	App 1 <input type="checkbox"/> App 2 <input type="checkbox"/> Joint <input type="checkbox"/>		
Bank	Account type (e.g. VISA)	Original term	Term remaining	Monthly payment	Current balance
<input type="text"/>	<input type="text"/>	<input type="text"/> months	<input type="text"/> months	\$ <input type="text"/> .00	\$ <input type="text"/> .00

Asset details

Home and contents

Property market value	Home contents insured value
\$ <input type="text"/> .00	\$ <input type="text"/> .00

Vehicle 1

Make/model (e.g. Toyota Corolla)	Type (e.g. sedan)	Year of manufacture	Registration number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Type of insurance cover on this vehicle			Policy expiry date
None <input type="checkbox"/> Third party property <input type="checkbox"/> Comprehensive <input type="checkbox"/>			<input type="text"/> DD/MM/YYYY

Vehicle 2

Make/model (e.g. Toyota Corolla)	Type (e.g. sedan)	Year of manufacture	Registration number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Type of insurance cover on this vehicle			Policy expiry date
None <input type="checkbox"/> Third party property <input type="checkbox"/> Comprehensive <input type="checkbox"/>			<input type="text"/> DD/MM/YYYY

Other Asset(s)

Description	Value
<input type="text"/>	\$ <input type="text"/> .00
<input type="text"/>	\$ <input type="text"/> .00

5 Personal Referees

Referee 1

Full name	
<input type="text"/>	
Home phone number	Mobile phone number
(<input type="text"/>) <input type="text"/>	<input type="text"/>
Address	
<input type="text"/>	
Postcode	
<input type="text"/>	
Relationship to borrower (e.g. relative, friend, colleague, etc)	
<input type="text"/>	

Referee 2

Full name	
<input type="text"/>	
Home phone number	Mobile phone number
(<input type="text"/>) <input type="text"/>	<input type="text"/>
Address	
<input type="text"/>	
Postcode	
<input type="text"/>	
Relationship to borrower (e.g. relative, friend, colleague, etc)	
<input type="text"/>	

6 How Did You Hear About Us?

Please **X** one box only

TV <input type="checkbox"/>	Radio <input type="checkbox"/>	Newspaper/Magazine <input type="checkbox"/>	Online/Web <input type="checkbox"/>	Outdoor advertising <input type="checkbox"/>	Direct mail <input type="checkbox"/>	Special offer <input type="checkbox"/>
Other <input type="checkbox"/>	Specify <input type="text"/>					

7 Notice and Declaration

Important privacy notice

We (AHL Investments Pty Ltd together with GE Personal Finance Pty Ltd) will use the information we collect about you to assess your application for an Aussie Consumer Finance product.

We may disclose information about you to a credit reporting agency, and in our capacity as the credit provider we will obtain a credit report, which may include information concerning your commercial credit worthiness.

We may also disclose information we collect about you to Aussie's franchisees and brokers, other financial institutions and to any employer named in your application.

We may use your personal information to help plan, research and promote Aussie's products and services or those of Aussie's alliance partners until you revoke your consent.

Declaration

By signing this application you are confirming that all information provided above is correct and consent to the above Important Privacy Notice. If you do not agree to our collection and use of your personal information, we may be unable to assess your application.

Signature of Applicant 1

X

Full name (please print)

Date

Signature of Applicant 2 (if applicable)

X

Full name (please print)

Date

Terms, conditions, fees and charges apply. Loan approval subject to the credit provider's lending criteria.