

SIGNATURE

Juristic Application for Finance

Type of Entity: Co				Dealer CodeOrig. Branch Input BranchCr.Prov.Intr Brn				
								If Trust, no.TrusteesAny Trustee a juristic person? Y \[\] N \[\]
% Black owned Co/CC/Trust Reg.No				Marketer's ID No	Fax N	lo.()_		
Co/CC/Trust Name(Reg. Name)				LeadProv	ID No	1.463		
Trading Name				BuyLne: A				
Tax NoVAT No				Language of Choice:	English Afrikaa	ns Otl	her 🗌	
Holding Company Registration Number				Registered Office Address				
Holding Company Name								
Address:(YrsMnths)				No.years in business				
Cubush				TelNo. () Fax No. ()				
Suburb Postal Code				E-mail Address				
Postal Address:(If Different from Residential)				Authorised Signatories as per resolution				
Suburb Postal Code Landlord's Details: (Name & Address of Landlord if not owner of property)				Name		ID No. Designation		
I andlord's Name:	:	dlora it not owner or pr	roperty)	11011.5	10	Design	lation	
Landlord Address						+,		
		Postal Code			+	+		
Suburb Postal Code								
	Banker's Name					+		
Branch								
A/C No				Indicate if prepar	Indicate if prepared to guarantee facility/deal *			
	Bookkeepers			FULL Names & ID No. of all Directors/Members/Partners/Trustees				
	erson			Name	ID No	*Yes/No		
Ann. Turnover:R Net Asset val:R				- Harris	10110	163/140	703hare	
Previous or Curre	ent Amounts owing	to Financial In	etitutions:			1		
Name	Account No.	Instal. Amount				1		
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Tiotaii 7 ii ioae	Danoming		0	+		
			 			+		
		 	-			+		
Description of oth	her Property regist	ered in Compar	v Name:			+		
Stand No. ———	————— Suburb		ly italiici					
Bondholder Name						+		
Bondholder Address					,	+		
· · · · · · · · · · · · · · · · · · ·								
Purchase Price R		teofPurchase		Foreign Controlled? Y	N Percen	ntage?	%	
Present Value R	Outst.V	alue-bond <u>R</u>		Contact Person ————————————————————————————————————				
Financial Details:	r e			Transaction Type:			-	
Selling Price (VAT in		R						
- '				Instalment Sale Lease Rental Term Loan Period Months				
		R		NACM Rate (what are we going to use)%				
				Do you require a Fuel & Maintenance Facility? Y N				
		R			Maintenance racinty.	1 🗀		
Total of Extras		R		Transaction Details:				
Sub Total R				Supplier/Dealer Name				
Insurance	R		Dealer Tel No. ()					
Insurance			,	Contact Name				
Insurance		R		Tel No. ()				
Less Deposit /Initia	l Rental	R	,	Goods Description				
Principal Debt		R			- 1			
Retail Files K				Insurance Company/ Broker:				
				Policy NoRenewalDte//DD/MM/YY				
Initiation/ Processing Fees to be financed? Y N N				Confirmed By	Tel N	Vo. ()		
disclose to this Credit I/We the undersigned The Bankers/ Auditors copies of my/our finan I/We do not have appl	Provider, details and co hereby consent to this s may disclose confident ncial statements.	pries of my/our according or make the control of th	ounts and finar king enquiries r arding my/our a ations as envisa	Bankers and/or auditors and Incial statements. regarding my/our credit historaccounts and financial positionaged in section 92 of the Natio	ry with any credit bureau on to this Credit Provider	I.		

NAME

DESIGNATION