

<b>QUALIFYING TO PURCHASE</b>		<b>CONSULTANT:</b>	
<b><u>This application form must be completed in full &amp; signed by all applicants.</u></b>		DATE:	
		NAME:	Lizette Vilonel
		CELL:	714 553 674
		Fax:	086 601 2860
		EMAIL:	<a href="mailto:admin@meridianfinance.co.za">admin@meridianfinance.co.za</a>

PERSONAL DETAILS:											
Main Applicant - Purchaser A						Co - Applicant - Purchaser B					
FULL NAMES:											
SURNAME:											
ID NUMBER:											
CONTACT DETAILS:		(W)		(H)		(W)		(H)			
CELL:											
FAX:											
E-MAIL:											
						Co - Applicants Interests in this loan		Co - Lender		Surety	
HOME ADDRESS:											
				CODE						CODE	
POSTAL ADDRESS:											
				CODE						CODE	
MARITAL STATUS:											
MARRIED IN COP				DIVORCED				SINGLE			
MARRIED BY ANC				SEPARATED				ENGAGED			
MARRIED BY CUSTOMARY LAW				WIDOW / WIDOWER				LIVING TOGETHER			
DEPENDENTS LIVING WITH YOU:		ADULTS		Number Of Kids		Ages of Kids					
MY PREFERRED LANGUAGE IS:		English	Afrikaans	ZULU	XHOZA	OTHER:					

EMPLOYMENT DETAILS:											
Main Applicant						Co - Applicant					
EMPLOYER											
OCCUPATION:											
WORK ADDRESS:											
				CODE						CODE	
EMPLOYER HR CONTACT NUMBER:											
YEARS WITH CURRENT EMPLOYER:											
YEARS WITH PREVIOUS EMPLOYER:											
GROSS BASIC SALARY:											
OTHER (SPECIFY):											
EMPLOYMENT STATUS:		FULL TIME		UNEMPLOYED		FULL TIME		UNEMPLOYED			
		PART TIME		TEMPORARY		PART TIME		TEMPORARY			
		CONTRACT WORK		SELF EMPLOYED		CONTRACT WORK		SELF EMPLOYED			
		PENSIONER		HOME EXECUTIVE		PENSIONER		HOME EXECUTIVE			

Your Banking						
PRODUCT	Main Applicant			Co - Applicant		
	WHO WITH	ACCOUNT NUMBER	BALANCE	WHO WITH	ACCOUNT NUMBER	BALANCE
BANK ACCOUNT						
BOND ACCOUNT						

INCOME for Qualifying Only						
		Main Applicant			Co - Applicant	
Total Monthly Salary	R		-	R		-
Less Approx Monthly Expenses	R		-	R		-
<b>AVAILABLE FOR FINANCE</b>	R		-	R		-

SIGNATURES		
		Main Applicant
		Co - Applicant
Signature		