

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:

INDIVIDUAL FINANCIAL INFORMATION

A. ASSETS

B. LIABILITIES

C. INCOME (Monthly)

D. EXPENSES (Monthly)

Home

Home Mortgage

Net Income

Mortgage / Rent

TOTAL

MY SHARE

Furnishings

HP/Loans

Spouse Net Income

HP/Loans

Bank

Credit Cards

Other Income

Credit Cards

Car(s)

Bank O/D

TOTAL INCOME

Bank O/D

Investments

Other Liabilities

Living Expenses

Other Assets

TOTAL LIABILITIES

Rental Income

Other Expenses

TOTAL ASSETS

Net Worth (A-B)

Bonus

TOTAL EXPENSES

FREQUENCY

BONUS AMOUNT

Other Information:

VERBAL AML AND PRIVACY AUTHORITY

So that European Financial Services Limited and/or Euro Rate Leasing Limited can assess the application to you for credit and to verify your identity as required by the Anti-Money Laundering Laws (whether you are the applicant or 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, hold, disclose and obtain your personal information 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. Do you authorise this?

If any information given by you or anyone else in relation to the application is incorrect or if you, another applicant or a guarantor in relation to the application does not provide an authorisation like this or give the information referred to in this authorisation then the application might be declined. Do you understand this?

If you are not the applicant or guarantor, do you confirm that you are authorised to provide the information required for the purposes of this authorisation (for example, you are acting under a power of attorney)?

Do you understand that you are under no obligation to provide us with your driver's licence or passport information and you do so voluntarily?

For the purposes of the Anti-Money Laundering Laws:

* Do you elect to have your identification verified through the Department of Internal Affairs; New Zealand Transport Agency; Illion New Zealand Limited; Equifax New Zealand Information Services and Solutions Limited; Centrix Group Limited; and Aply Limited and the just mentioned entities related bodies corporate; their third party service providers (including Green ID Limited) and their third party systems?

* Do you consent to those entities just mentioned collecting, holding, using and disclosing personal information for identity verification purposes.

* Do you authorise any related company of European Financial Services Limited and/or Euro Rate Leasing Limited, this dealership, and any other dealership who you deal with now and in the future to (if required) access the personal information held by this dealership, the other dealerships just mentioned and the other entities mentioned earlier that verifies your identity under the Anti-Money Laundering Laws?

Do you acknowledge that where any identification checks are done using any of those entities just mentioned and/or the Department of Internal Affairs, that check will be regarded as having assisted in verifying your date of birth information?

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

Do you certify that the information you have given in the application is true and correct?

☐ ABOVE AUTHORISED

Customer (Introducer Name if Verbal taken)

Dealership Name

Signature (Customer or Dealer if Verbal taken)

Date

10/20

Application for Finance | Business

Volvo Car Financial Services 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	TOTAL INCOME	Bank O/D
Investments	Other Liabilities		Living Expenses
Other Assets	TOTAL LIABILITIES	Rental Income	Other Expenses
TOTAL ASSETS	Net Worth (A-B)	Bonus	TOTAL EXPENSES
		FREQUENCY	BONUS AMOUNT

Other Information: _____

VERBAL AML AND PRIVACY AUTHORITY

So that European Financial Services Limited and/or Euro Rate Leasing Limited can assess the application to you for credit and to verify your identity as required by the Anti-Money Laundering Laws (whether you are the applicant or 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, hold, disclose and obtain your personal information 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. **Do you authorise this?**

If any information given by you or anyone else in relation to the application is incorrect or if you, another applicant or a guarantor in relation to the application does not provide an authorisation like this or give the information referred to in this authorisation then the application might be declined. **Do you understand this?**

If you are not the applicant or guarantor, do you confirm that you are authorised to provide the information required for the purposes of this authorisation (for example, you are acting under a power of attorney)?

Do you understand that you are under no obligation to provide us with your driver's licence or passport information and you do so voluntarily?
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☐ ABOVE AUTHORISED

Customer (Introducer Name if Verbal taken) _____ Dealership Name _____ Signature (Customer or Dealer if Verbal taken) _____ Date _____ 10/20