

# Alteration of mortgage

Application to alter the terms of your mortgage

## Alteration of mortgage

Please mail to Anglican Financial Care, PO Box 12 287, Thorndon, Wellington 6144 or email [office@angfncare.nz](mailto:office@angfncare.nz)

You can apply to alter the terms and conditions of your mortgage. Please return this form along with any supporting documentation you might have.

If you have any questions, please contact us by email at [mortgages@angfncare.nz](mailto:mortgages@angfncare.nz) or by phone 04 473 9369.

### 1a. Personal details - Applicant 1

Title	First name(s)
<input type="text"/>	<input type="text"/>
Surname	
<input type="text"/>	
Date of birth	
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Daytime / mobile phone	
<input type="text"/>	
Email address	
<input type="text"/>	

### 1b. Personal details - Applicant 2

Title	First name(s)
<input type="text"/>	<input type="text"/>
Surname	
<input type="text"/>	
Date of birth	
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Daytime / mobile phone	
<input type="text"/>	
Email address	
<input type="text"/>	

Number of dependants	Age of dependants
<input type="text"/>	<input type="text"/>

### 2. Mailing address

Postal address	Number / Street / PO Box	
	<input type="text"/>	
	Suburb / City	Postcode
	<input type="text"/>	<input type="text"/>

### 3. Property address

Address of the property for which the mortgage alteration is requested:

Number / Street / PO Box	
<input type="text"/>	
Suburb / City	Postcode
<input type="text"/>	<input type="text"/>

Are the council rates for the property with your AFC mortgage up to date?  Yes  No

## 4. Alteration choices

Select the request(s) you wish to make and return this form along with any supporting documentation you might have. Please indicate your reasons for applying for the alteration in the notes section on the following page or in an email with your application.

### Section A - Alteration of type of mortgage

Change the mortgage type from table to interest only. Interest only mortgages have a ten year term.

or

Change the mortgage type from interest only to table. Please select term length you would like.

5 years

10 years

15 years

20 years

25 years

Other \_\_\_\_\_

Please note: The longest length of mortgage Anglican Financial Care offers is 25 years.

### Section B - Changing the duration of a table mortgage

Additional years to **add** to the current term length of my mortgage:  years

Additional years to **subtract** from the current term length of mortgage:  years

or

I wish to reduce my mortgage payment to: \$  a  month  fortnight.

Please adjust the duration of my mortgage as required.

**Please note:** The longest length of mortgage we offer is 25 years. If the adjustment requested would increase the length of your mortgage over the 25 year limit we will contact you and tell you what term / amount you could use.

### Section C - Payment change

I wish to apply for a payment suspension for my mortgage.

Length of payment suspension:  1 month  2 months  3 months

or

I wish to temporarily reduce my mortgage payments to: \$   a month  a fortnight

Length of payment reduction:  1 month  2 months  3 months

### Section D - Breaking a fixed rate interest term

I wish to break my current fixed rate interest term and choose a new interest rate. I understand there could be fees and charges applied and I will be advised of these before the change is actioned.

Interest rate choice:  Floating  1 year  2 years  3 years

## 5. Declaration

I / we declare that to the best of my/our knowledge the information supplied in the application form is correct.

I / we authorise Anglican Financial Care to make such enquiries as they deem necessary in order to verify the financial details set out in the application.

I / we have disclosed any and all information that might adversely affect my ability to repay the mortgage and all financial liabilities.

Signature of Applicant 1

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature of Applicant 2

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

## 6. Reason for request

Please tell us the reason for your request.

## 7. What is your total household income?

In this section you need to tell us about the money the household has coming in.

### What frequency are you paid?

#### Applicant 1

Weekly  Fortnightly  Monthly  N/A

#### Applicant 2

Weekly  Fortnightly  Monthly  N/A

### How much do you receive in hand during this period?

#### Applicant 1

Salary / wages: \$

#### Applicant 2

Salary / wages: \$

### How much income do you receive from other sources each month?

If you receive an income that counts for both of you, only include it in one place. Eg. Working for Families benefit.

#### Applicant 1

Commission: \$

Self-employed income: \$

NZ Superannuation: \$

Clergy pension: \$

Other pension / super: \$

Benefit: \$

Child support: \$

ACC: \$

Interest / dividends: \$

Trust income: \$

Other: \$

#### Applicant 2

Commission \$

Self-employed income: \$

Superannuation: \$

Clergy pension: \$

Other pension / super: \$

Benefit: \$

Child support: \$

ACC: \$

Interest / dividends: \$

Trust income: \$

Other: \$

### How much income do you receive each month from currently owned rental properties or boarders before tax?

Rental income: \$

Boarder income: \$

## 8. What is your total monthly household expenditure?

In this section you need to tell us about the money you and your household have going out each week. The more information we have, the better we will be able to assess your individual circumstances.

### How much do you pay each month on mortgages for currently owned properties?

Family home:	\$ <input type="text"/>	Property 2:	\$ <input type="text"/>
Property 1:	\$ <input type="text"/>	Property 3:	\$ <input type="text"/>

### How much do you pay each month for:

Council rates:	\$ <input type="text"/>	Liberty Trust payment:	\$ <input type="text"/>
Water rates:	\$ <input type="text"/>	Entertainment:	\$ <input type="text"/>
Electricity / gas:	\$ <input type="text"/>	Credit card 1:	\$ <input type="text"/>
Phone:	\$ <input type="text"/>	Credit card 2:	\$ <input type="text"/>
Internet:	\$ <input type="text"/>	Credit card 3:	\$ <input type="text"/>
Sky / Netflix etc.:	\$ <input type="text"/>	Store card 1:	\$ <input type="text"/>
Groceries:	\$ <input type="text"/>	Store card 2:	\$ <input type="text"/>
Takeaways:	\$ <input type="text"/>	Store card 3:	\$ <input type="text"/>
Doctor / dentist / optician:	\$ <input type="text"/>	Personal loan 1:	\$ <input type="text"/>
Pharmacy / medication:	\$ <input type="text"/>	Personal loan 2:	\$ <input type="text"/>
House / contents insurance:	\$ <input type="text"/>	Hire purchase payment 1:	\$ <input type="text"/>
Life insurance:	\$ <input type="text"/>	Hire purchase payment 2:	\$ <input type="text"/>
Medical insurance:	\$ <input type="text"/>	Hire purchase payment 3:	\$ <input type="text"/>
Vehicle / boat insurance:	\$ <input type="text"/>	Finance company 1:	\$ <input type="text"/>
Petrol / road user charges:	\$ <input type="text"/>	Finance company 2:	\$ <input type="text"/>
Public transport:	\$ <input type="text"/>	Finance company 3:	\$ <input type="text"/>
Car maintenance:	\$ <input type="text"/>	Student loans:	\$ <input type="text"/>
Home maintenance:	\$ <input type="text"/>	Offerings / donations / gifts:	\$ <input type="text"/>
Children's education:	\$ <input type="text"/>	Regular savings:	\$ <input type="text"/>
Child care:	\$ <input type="text"/>	Other 1:	\$ <input type="text"/>
Child maintenance:	\$ <input type="text"/>	Other 2:	\$ <input type="text"/>

04 473 9369  
[www.angfincare.nz](http://www.angfincare.nz)