

Further advance application

to Anglican Financial Care

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Important information

Please ensure you have completed the further advance application fully and provided all the documentation required in order to process this application. If you fail to include all the required information, it could cause a delay in processing your application.

Allow 12 business days for the approval process once all the required documentation is received.

Application

Complete ALL sections of the application form.

All applicants must read, sign and date the declaration in section six of the application form.

Provide the following required documents:

- » Bank statements Two months worth for all accounts. This includes savings accounts and credit cards.
- » Copies of payslips
 - » If you are paid a salary and your pay is the same each time you should submit three payslips; or
 - » If your pay is not the same each pay period please submit the following number for each pay period:

Monthly - three

Fortnightly - four

Weekly - six

» If you are self-employed please provide accounts for the previous tax year and a statement of earnings you draw down.

Existing rental property

If you currently own property being used as a rental you must complete the *Rental property information* worksheet located on page 11.

Valuation

Please submit a valuation of the property which supports the requested additional lending. If you are not sure which valuation type you should submit please contact us.

- » If you supply a rating valuation from the council we will lend a maximum of 70% of the capital value shown on the rates valuation.
- » If you supply a **registered valuation** we will lend a maximum of **80% of the value of the property minus the chattels**. If the property is bare serviced land we will lend a maximum of **70%** of the value of the property with a registered valuation and 50% with a Council/District valuation.

Please ensure the valuation has Anglican Financial Care listed as the interested financial party at the start of the valuation. If this does not occur you will have to have the valuation amended and this could add time to the application process.

Verification of identity

To meet our requirement under the Anti-Money Laundering and Countering Financing of Terrorism Act 2009, we are required to verify your identity and address information. No funds will be advanced until this requirement has been met. We can verify your identity electronically or you may submit verified copies of acceptable identity documents.

You may have already completed this requirement. If you have not done so we will send you a guide to verifying your identity.

Credit check

Anglican Financial Care requires a credit check for all applications with total lending over \$50,000. If an application is submitted without the required authority(s) being included, the application will not be processed until it is supplied. If the applicant(s) do not wish a credit check to occur, the application must be withdrawn.

Each applicant must sign and date the Credit Check Authority located after the application form.



Application checklist

Please use the checklist provided to ensure you have included all of the required documents with your application.

If anything is missing we will contact you and ask you for the information. This will add time to the processing of your application.

| Application amount and interest rate |
|---|
| Have you told us how much you would like to receive as a further advance? Have you indicated which interest rate you would like to have applied towards the advance? |
| Advance amount |
| Interest rate choice for new advance amount |
| Proof of your income |
| We will need to be sure you have a regular income, so payments on your loan will not put you under financial pressure. |
| Payslips for each applicant ** Monthly - 3 payslips |
| » Fortnightly - 4 payslips |
| » Weekly - 6 payslips |
| If you are self-employed, a copy of your most up to date financial statements prepared by an accountant. |
| If you have income from other sources besides your employment you should provide evidence of this regular income. For example pension payments, rent or boarder income, regular gift from family, investment earning or funds received from a Trust. |
| Evidence might include investment earnings statements, a letter from the source of the regular funds, bank statements highlighting the regular payments, statement from your property management company. |
| Your debts and outgoings |
| So that we can work out your outgoings, we'll need to see statements that show your current balance on loans, credit cards, any hire purchase arrangements and store cards etc. |
| Please provide statements for the previous two month for the following items. We should be able to see your current balance and your available credit limit as well as any transactions which occurred during the month such as payments and purchases. |
| Credit card statements |
| Finance company loans |
| Store cards |
| Hire purchases |
| Student loans |
| Deposit information |
| Please ensure you provide us with account information which will allow us to deposit the requested monies if the application is approved. |
| Bank account information for deposit |



Further advance application

Please mail to Anglican Financial Care, PO Box 12 287, Thorndon, Wellington 6144 or email office@angfincare.nz 1a. Personal details - Applicant 1 1b. Personal details - Applicant 2 Title Title First name(s) First name(s) Surname Surname Date of birth Date of birth D D D M Daytime / mobile phone Daytime / mobile phone (0 (0 Email address **Email address** Employers name Employers name Occupation Duration Occupation Duration Are you a NZ citizen or do you have Are you a NZ citizen or do you have Yes No Yes permanent NZ residency permanent NZ residency Number of dependants Age of dependants 2. Address Number / Street / PO Box Postal address Suburb / City Postcode 3. Finance amount and purpose [Lending amount is limited by the value of the Requested advance amount: property] What do you intend to use the additional mortgage advance for?

Please note:

You should allow 12 working days for processing of your application, preparation of documents and time for the documents to be couriered to you and returned to us. We cannot advance any funds until we have the original term loan documents returned to us.

| 4. Mortgage details | |
|--|---|
| By law we must apply current interest rates to any further advances. Please select an interest rate for your requested advance. The terms of your mortgage, table versus interest only, and the remaining term are the same for your further advance as your main mortgage. If you would like to change these terms you will need to complete an Alteration of mortgage request form . | Interest rate choice Floating The current interest rates being offered can be viewed on the Anglican Financial Care website. 2 year fixed 3 year fixed 5 year fixed |
| 5. Payment details | |
| Please pay the further advance amount to my bank account as detailed In Name of bank account - Please provide proof of your bank account name and nutrition. Account details Bank Branch Account | |
| 6. Address of property used for security | |
| Number / Street Suburb / City 7. Council rates | Postcode |
| Are the council rates for all properties owned up to date? | ☐ Yes ☐ No |
| | |
| I / we declare that to the best of my/our knowledge the information of the second of t | ey deem necessary in order to verify the financial fect my ability to repay the mortgage and all finan-inancial Care. I / we understand that statements uest they be sent by post. If no email address is |
| Signature of applicant | Date |

9. 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 p | paid? | | |
|---|------------------------------------|--|-----------------------------|
| Applicant 1: | | Applicant 2: | |
| Weekly Fortnig | htly Monthly N/A | Weekly Fortni | ghtly Monthly N/A |
| How much do you receive | in hand during this period? | | |
| Applicant 1: | J . | Applicant 2: | |
| Salary / wages: | \$ | Salary / wages: | \$ |
| Please submit your most r | recent payslips as indicated below | w for each applicant. | |
| » If you are on a sala | ry and your pay remains the sam | e each pay period please submit | three payslips. |
| | ne same each pay period please s | submit the number of payslips sh | own below for each pay |
| period. Monthly - three | Fortnightly - four | Weekly - six | |
| How much income from | other sources do you receive eac | h manth? | |
| | • | only include it in one place. Eg. W | orking for Families benefit |
| Applicant 1: | | Applicant 2: | |
| Commission: | \$ | Commission: | \$ |
| Self-employed income: | \$ | Self-employed income: | \$ |
| NZ Superannuation: | \$ | NZ Superannuation: | \$ |
| Clergy pension: | \$ | Clergy pension: | \$ |
| Other pension / super: | \$ | Other pension / super: | \$ |
| Benefit: | \$ | Benefit: | \$ |
| Child support: | \$ | Child support: | \$ |
| ACC: | \$ | ACC: | \$ |
| Interest / dividends: | \$ | Interest / dividends: | \$ |
| Trust income: | \$ | Trust income: | \$ |
| Other*: | \$ | Other*: | \$ |
| | | otes section on page 8 and provic family you could indicate the pay | |
| How much income do you | receive each month from curre | ntly owned rental properties or | boarders before tax? |
| Rental income: | \$ | Boarder income: | \$ |
| If you currently own prope information worksheet on | | from please ensure you complet | e the Rental property |

10. What assets / savings do you have?

In this section you need to tell us about the things you and your household own, and their current value.

| What assets do you own? | |
|-----------------------------|--------------------------------------|
| Family home: | \$ Address: |
| Property 1: | \$ Address 1: |
| Property 2: | \$ Address 2: |
| Property 3: | \$ Address 3: |
| Chequing accounts: | \$ Superannuation / KiwiSaver: \$ |
| Savings accounts: | \$ Vehicle 1 \$ |
| Shares: | \$ Vehicle 2\$ |
| Term deposits: | \$ Other assets over \$1,000: \$ |
| Household contents (value): | \$ |

11. What debts does the household have (what do you owe)?

In this section you need to tell us about the debts you and your household have.

| How much do you owe in t | otal for: | | |
|----------------------------|-----------------------------------|-----------------------------------|----|
| Family home mortgage: | \$ | Store card 1: | \$ |
| Property 1 mortgage: | \$ | Store card 2: | \$ |
| Property 2 mortgage: | \$ | Finance company 1: | \$ |
| Property 3 mortgage: | \$ | Finance company 2: | \$ |
| Liberty Trust Ioan: | \$ | Finance company 3: | \$ |
| Student loans: | \$ | Personal loan 1: | \$ |
| Credit card 1: | \$ | Personal loan 2: | \$ |
| Credit card 2: | \$ | Bank overdraft 1: | \$ |
| Credit card 3: | \$ | Bank overdraft 2: | \$ |
| Hire purchase payment 1: | \$ | Vehicle finance 1: | \$ |
| Hire purchase payment 2: | \$ | Vehicle finance 2: | \$ |
| Hire purchase payment 3: | \$ | Other liabilities over \$1,000*: | \$ |
| * Please describe what the | Other liabilities over \$1,000 ar | e in the notes section on page 8. | |

12. 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 | h month on mortgages for cu | rrently owned properties? | |
|------------------------------|-----------------------------|-----------------------------------|---------|
| Family home: | \$ | | |
| Property 1: | \$ | | |
| Property 2: | \$ | | |
| Property 3: | \$ | | |
| How much do you pay each | h month for: | | |
| Council rates: | \$ | Liberty Trust payment: | \$ |
| Water rates: | \$ | Entertainment: | \$ |
| Electricity / gas: | \$ | Credit card 1: | \$ |
| Phone: | \$ | Credit card 2: | \$ |
| Internet: | \$ | Credit card 3: | \$ |
| Sky / Netflix etc.: | \$ | Store card 1: | \$ |
| Groceries: | \$ | Store card 2: | \$ |
| Takeaways: | \$ | Store card 3: | \$ |
| Doctor / dentist / optician: | \$ | Personal loan 1: | \$ |
| Pharmacy / medication: | \$ | Personal loan 2: | \$ |
| House / contents insurance: | \$ | Hire purchase payment 1: | \$ |
| Life insurance: | \$ | Hire purchase payment 2: | \$ |
| Medical insurance: | \$ | Hire purchase payment 3: | \$ |
| Vehicle / boat insurance: | \$ | Finance company 1: | \$ |
| Petrol / road user charges: | \$ | Finance company 2: | \$ |
| Public transport: | \$ | Finance company 3: | \$ |
| Car maintenance: | \$ | Student loans: | \$ |
| Home maintenance: | \$ | Offerings / donations / gifts: | \$ |
| Children's education: | \$ | Regular savings: | \$ |
| Child care: | \$ | Other 1: | \$ |
| Child maintenance: | ¢ | Other 2: | <u></u> |

Notes:

Use this page to provide any other information which is relevant to your application.

For example:

» If you have listed income in the *other* section on page 5, please tell us where it is from. You should provide proof of the income. Failure to do this will result in delays as we will have to get in touch regarding this and wait for your answers / documents.



Additional items

Credit check authority Rental property information



Credit check authority

If this authority is not completed your application will not be processed

Please contact us for instructions for credit checks if you have more than two applicants or if you are applying in the name of a Trust.

| Full name of applicant 1 | | | |
|--------------------------|--|--|--|
| | | | |
| | | | |
| Full name of applicant 2 | | | |
| Full name of applicant 2 | | | |

consent to you, Anglican Financial Care collecting, using and disclosing my personal information for the following purposes:

- » Verifying any information that I give to you (or information that you may collect from other sources) with third parties and third party databases, including Government agencies (for e.g. NZ Transport Authority, Motor Vehicle Register, PPSR).
- » Carrying out credit checks on me with a credit reporting agency for a purpose relating to the provision of credit to me (including debt collection) or for a quotation for the cost of credit or for the requirements of the Anti-Money Laundering and Countering Financing Terrorism Act 2009. This will require you to give my information to the credit reporting agency as well as the credit reporting agency providing information about me to you.
- » Debt recovery including appointing an agent to collect any outstanding debts and listing defaults with a credit reporting agency.
- » Checking the Ministry of Justice fines database for any overdue fines I may have. This will require you to give my information to the Ministry of Justice. This check may be carried out by a credit reporting agency, which will require the search results to be disclosed to the credit reporting agency.
- » Verifying any information that I give to you (or information that you may collect from other sources) with third parties and third party databases for the purposes of fraud prevention or the Anti-Money Laundering and Countering Financing Terrorism Act 2009.
- Where I have voluntarily given you my driver licence information, this information may also be disclosed to a credit reporting agency and the Ministry of Justice as part of the checks you undertake with them.

I authorise any third party to provide my personal information to you for any of these purposes.

I understand that if you disclose my personal information to a credit reporting agency, they may hold my information on their credit reporting database and use it for providing credit reporting services and for any other lawful purpose and they may disclose my information to their subscribers for the purpose of credit checking or debt collection or for any other lawful purpose.

| Signature of applicant 1 | Da | ate | | | | | | | |
|--------------------------|----|-----|---|---|---|---|---|---|---|
| | | D | D | М | М | Υ | Υ | Υ | Υ |
| Signature of applicant 2 | Da | ate | | | | | | | |
| | | D | D | М | М | Υ | Υ | Υ | Υ |



Rental property information

Please provide information about income derived from and expenses for all rental properties you own.

| Property 1 | |
|--|--------------------------------|
| . To a series of the series of | |
| Income What is the amount you receive in rent per week? | \$ |
| | \$ |
| Expenditure | |
| Rental property management fees | \$ |
| Council rates | \$ |
| E. II | |
| Full replacement insurance cost | \$ |
| Maintenance | \$ |
| Other regular | |
| Other regular | \$ |
| Are you using a property management agency? | Yes No |
| Is the property rented to a family member? | Yes No |
| Is the property currently tenanted? | Yes No |
| , , , , | |
| | |
| Property 2 | |
| Property 2 | |
| Property 2 Income | |
| | \$ |
| Income | \$ |
| Income What is the amount you receive in rent per week? | \$ |
| Income What is the amount you receive in rent per week? Expenditure Rental property management fees | \$ |
| Income What is the amount you receive in rent per week? Expenditure | |
| Income What is the amount you receive in rent per week? Expenditure Rental property management fees | \$ |
| Income What is the amount you receive in rent per week? Expenditure Rental property management fees Council rates | \$ \$ |
| Income What is the amount you receive in rent per week? Expenditure Rental property management fees Council rates Full replacement insurance cost Maintenance | \$ \$ \$ |
| Income What is the amount you receive in rent per week? Expenditure Rental property management fees Council rates Full replacement insurance cost | \$ \$ |
| Income What is the amount you receive in rent per week? Expenditure Rental property management fees Council rates Full replacement insurance cost Maintenance Other regular | \$ \$ \$ \$ \$ \$ |
| Income What is the amount you receive in rent per week? Expenditure Rental property management fees Council rates Full replacement insurance cost Maintenance Other regular Are you using a property management agency? | \$ \$ \$ \$ \$ \$ \$ Pres No |
| Income What is the amount you receive in rent per week? Expenditure Rental property management fees Council rates Full replacement insurance cost Maintenance Other regular | \$ \$ \$ \$ \$ \$ |