Anglican Financial Care
Te Maru Mihinare

Mortgage application

Please email admin@angfincare.nz or post to Anglican Financial Care, PO Box 12 287, Thorndon, Wellington 6144

You should allow 12 working days for processing of your application. If an application is submitted without all required information and documents the application will not be processed until it is fully completed and all documents supplied.

Please ensure you read the Important information document and use the checklist to ensure you submit all required information..

1. This application is for:

☐ Single applicant
☐ Joint applicants
☐ Co-ownership
☐ Trust
☐ Company

Name of trust

Name of Company

Name(s) of co-owner(s)

1a. Personal details - Applicant 1

Title | First name(s)

Surname

Date of birth
D D M M Y Y Y Y

Daytime / mobile phone
(0)

Email address

Employers name

Occupation | Duration

Are you a NZ citizen or do you have permanent NZ residency? ☐ Yes ☐ No

1b. Personal details - Applicant 2

Title | First name(s)

Surname

Date of birth
D D M M Y Y Y Y

Daytime / mobile phone
(0)

Email address

Employers name

Occupation | Duration

Are you a NZ citizen or do you have permanent NZ residency ☐ Yes ☐ No

Number of dependants | Age of dependants

Anglican Financial Care restricts its lending, please tick the category at least one of the applicants qualifies under.

☐ Anglican clergy or widow/er
☐ Clergy - other denominations
☐ Christian organisation employee
☐ Christian KiwiSaver Scheme member
☐ The Retire Fund member
☐ BUSS member

2. Address

Postal address

Number / Street / PO

Suburb / City

Postcode

3. Additional finance sources

Will you be receiving additional finance from another organisation or person? ☐ Yes ☐ No

Name of lender:

Amount: $

Monthly repayment: $

4. Lawyer's details

Firm name

Title

First name

Surname

Phone number (0)

Email address

Postal address

Number / Street / PO Box

Suburb / City

Postcode

You may supply this information later if you do not have a lawyer at the time the application is submitted.

5. Nature and purpose of the loan

What do you intend to use the loan Anglican Financial Care will be providing for?

☐ Purchase a family home
☐ Purchase an investment property
☐ Purchase land / build a home
☐ Refinance an existing property
☐ Renovations / maintenance
☐ Other [Please describe below]

6. Finance amount

Requested lending amount: $

If applying for pre-approval and you would like to know the maximum amount you qualify for, please insert MAX.

Lending amount is limited by the value of the property.

Finance confirmation date: D D M M Y Y Y Y

This is the date you must confirm your finance approval. If this date is less than 12 days AFC cannot guarantee you will receive a decision by this date.

7. Mortgage details

Application type

☐ Purchase a property ☐ Build a home ☐ Refinance a property ☐ Pre-approval

Type of mortgage

☐ **Table** - You pay both interest and principal and your balance decreases over time.

Repayment period ☐ 5 years ☐ 10 years ☐ 15 years ☐ 20 years ☐ 25 years **(MAX)** ☐ Other _____

☐ **Interest only** *[Restricted category]* - No principle is repaid and your balance does not decrease over time.

Interest rate choice - Pre-approval mortgage will select a rate at the time a property has been selected.

☐ Floating ☐ 1 year fixed ☐ 2 year fixed ☐ 3 year fixed ☐ 5 year fixed

Anglican Financial Care's current interest rates can be viewed on the website.

NOTE: If this in intended to be a short-term loan and repaid in full within a 12-month period the loan must be on the floating rate.

8. Address of property used for security

Number / Street

Suburb / City Postcode

9. Additional security

If an additional property is being included for security please provide the details below. Only required if the property you are purchasing does not have enough value to cover the amount you wish to borrow.

Number / Street

Suburb / City Postcode

Is the property mortgaged? ☐ No ☐ Yes If yes, who holds the mortgage?

10. Council rates

Are the council rates for all properties already owned up to date? ☐ No ☐ Yes ☐ N/A

11. Proposed costs for the NEW property

In this section please provide the estimated monthly costs associated with the new property. DO NOT complete this section if you are applying to refinance a currently owned property. If you leave this section blank we will apply a set amount of $750 per month for these costs for a new property.

Full replacement insurance: $ Council rates: $

Maintenance: $ Property management fees $

12. What is your total household income?

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

Salary income details - Applicant 1

Salary / wages $

☐ Weekly ☐ Fortnightly ☐ Monthly

Salary income details - Applicant 2

Salary / wages $

☐ Weekly ☐ Fortnightly ☐ Monthly

How much do you receive in hand each pay period?

Please submit your most recent payslips as indicated below for each applicant.

- If you are on a salary and your pay remains the same each pay period please submit your most recent three consecutive payslips.
- If your pay is not the same each pay period please submit your most recent four consecutive payslips.

How much income from other sources do you receive? Indicate if you receive it monthly, fortnightly or weekly?

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

You must provide proof of other sources of income. This can be shown in bank statements or other proof sources.

	Applicant 1		Applicant 2	
Commission:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Self-employed income:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
NZ Superannuation:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Clergy pension:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Other pension / super:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Benefit:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Child support:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
ACC:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Interest / dividends:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Trust income:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Rental income:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Boarder income:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W
Other*:	$	☐ M ☐ Fn ☐ W	$	☐ M ☐ Fn ☐ W

*** Please describe what the Other income is from on the Notes section on page 11 and provide proof of this income.**

If you intend to purchase a new property that will be rented out, what weekly rent will you charge? $

Do you intend to use a property management firm? ☐ No ☐ Yes

Will you be renting the property out at a discounted rate for family or social housing purposes? ☐ No ☐ Yes

13. 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.

Family home:	$	Address:	
Property 1:	$	Address 1:	
Property 2:	$	Address 2:	
Chequeing accounts:	$	Superannuation / KiwiSaver:	$
Savings accounts:	$	Vehicle 1 _____ year	$
Shares:	$	Vehicle 2 _____ year	$
Term deposits:	$	Household contents (value):	$
Other assets > $1,000:	$	Describe -	

We must see evidence of your deposit in this section. Eg. If you have money in your KiwiSaver or other investments please supply a letter or statement showing the amount you have available to access for a home purchase. Proof is not required if your funds are held by Anglican Financial Care.

14. 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 total for:

Family home mortgage:	$	Store card 1:	$
Property 1 mortgage:	$	Store card 2:	$
Property 2 mortgage:	$	Finance company 1:	$
Liberty Trust loan:	$	Finance company 2:	$
Student loans:	$	Personal loan 1:	$
Credit card 1:	$	Personal loan 2:	$
Credit card 2:	$	Bank overdraft 1:	$
Hire purchase 1:	$	Bank overdraft 2:	$
Hire purchase 2:	$	Vehicle finance 1:	$
		Vehicle finance 2:	$
Other liabilities over $1,000*:	$	Describe -	

Please provide your most recent statement for any credit cards, hire purchases, store cards and finance company loans. We must see the current balance and the minimum repayment amount on the statement.

15. 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:	$	Is this property being refinanced with Anglican Financial Care?	☐ No	☐ Yes
Property 1:	$	Is this property being refinanced with Anglican Financial Care?	☐ No	☐ Yes
Property 2:	$	Is this property being refinanced with Anglican Financial Care?	☐ No	☐ Yes

How much do you pay for:

Council rates	$	☐ M	☐ Fn	☐ W	Liberty Trust loan	$	☐ M	☐ Fn	☐ W
Water rates	$	☐ M	☐ Fn	☐ W	Credit card 1	$	☐ M	☐ Fn	☐ W
Property management	$	☐ M	☐ Fn	☐ W	Credit card 2	$	☐ M	☐ Fn	☐ W
Electricity / gas:	$	☐ M	☐ Fn	☐ W	Store card 1	$	☐ M	☐ Fn	☐ W
Phone:	$	☐ M	☐ Fn	☐ W	Store card 2	$	☐ M	☐ Fn	☐ W
Internet:	$	☐ M	☐ Fn	☐ W	Personal loan 1	$	☐ M	☐ Fn	☐ W
Groceries:	$	☐ M	☐ Fn	☐ W	Personal loan 2	$	☐ M	☐ Fn	☐ W
Medical / dental	$	☐ M	☐ Fn	☐ W	Hire purchase 1	$	☐ M	☐ Fn	☐ W
Pharmacy / medication:	$	☐ M	☐ Fn	☐ W	Hire purchase 2	$	☐ M	☐ Fn	☐ W
House insurance:	$	☐ M	☐ Fn	☐ W	Finance company 1	$	☐ M	☐ Fn	☐ W
Contents insurance:	$	☐ M	☐ Fn	☐ W	Finance company 2	$	☐ M	☐ Fn	☐ W
Medical insurance	$	☐ M	☐ Fn	☐ W	Student loans	$	☐ M	☐ Fn	☐ W
Life Insurance	$	☐ M	☐ Fn	☐ W	Netflix / Prime / Disney	$	☐ M	☐ Fn	☐ W
Vehicle /boat insurance	$	☐ M	☐ Fn	☐ W	Sky / Neon	$	☐ M	☐ Fn	☐ W
Petrol	$	☐ M	☐ Fn	☐ W	Spotify	$	☐ M	☐ Fn	☐ W
Road user charges	$	☐ M	☐ Fn	☐ W	Other subscriptions	$	☐ M	☐ Fn	☐ W
Public transport	$	☐ M	☐ Fn	☐ W	Entertainment	$	☐ M	☐ Fn	☐ W
Car maintenance	$	☐ M	☐ Fn	☐ W	Takeaways	$	☐ M	☐ Fn	☐ W
Education costs	$	☐ M	☐ Fn	☐ W	Regular savings	$	☐ M	☐ Fn	☐ W
Child care	$	☐ M	☐ Fn	☐ W	Offerings / donations	$	☐ M	☐ Fn	☐ W
Child maintenance	$	☐ M	☐ Fn	☐ W	Gifts / Other	$	☐ M	☐ Fn	☐ W
Other _____	$	☐ M	☐ Fn	☐ W	Other	$	☐ M	☐ Fn	☐ W

16. Family trusts and guarantor

Has any applicant set up a family trust and / or are a trustee / beneficiary of a family trust? ☐ No ☐ Yes

Is any applicant acting as a guarantor for a loan for any other person? ☐ No ☐ Yes

17. Additional other relevant information

Please provide any additional information you feel is important for AFC to know in order to assess your application.

For example:

- If you wish to divide your mortgage over more than one interest rate describe the split you wish to do.
- If you have used the other category for income, assets etc. please explain here.
- If you feel there is information we would need to know that did not fit in any other section of this application that might help with us approving your application please explain in this section.

18. Co-ownership information

Complete this section if you are purchasing a property with another party or parties not part of your application.

Is there a formal co-ownership agreement between all parties? ☐ No ☐ Yes

If yes, has this been legally reviewed? ☐ No ☐ Yes

AFC does not require a formal agreement between parties, but for the protection of all involved it is advised. This could cover buy out options, who pays for repairs, what happens if a party dies etc.

Names of co-owners not part of your application

Given name(s) ________ Surname ________

Relationship between co-owners: ☐ Family ☐ Friends ☐ Business partners

Will this party be applying for an AFC mortgage? ☐ No ☐ Yes

Is this co-owner linked with another party? ☐ No ☐ Yes Name ________

What percentage of the property will this party own? ________ %

Names of co-owners not part of your application

Given name(s) ________ Surname ________

Relationship between co-owners: ☐ Family ☐ Friends ☐ Business partners

Will this party be applying for an AFC mortgage? ☐ No ☐ Yes

Is this co-owner linked with another party? ☐ No ☐ Yes Name ________

What percentage of the property will this party own? ________ %

Names of co-owners not part of your application

Given name(s) ________ Surname ________

Relationship between co-owners: ☐ Family ☐ Friends ☐ Business partners

Will this party be applying for an AFC mortgage? ☐ No ☐ Yes

Is this co-owner linked with another party? ☐ No ☐ Yes Name ________

What percentage of the property will this party own? ________ %

Duplicate this page if additional owner information is required.

19. Declarations

General

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.

I / we **consent** to receive electronic communication. **I / we understand** that statements and other communication materials will be sent by email, unless I request they be sent by post. If no email address is supplied, **I / we understand** statements and other communication materials will be sent to my postal address.

Privacy

I understand that my personal information will be collected and held by AFC and used to administer my loan. **I consent** to that information being disclosed to other persons, including any government authority, to comply with applicable laws and (if relevant) to information about my loan being disclosed to any third party required. I acknowledge that I can access or correct my personal information by contacting the manager.

Identity verification

I / we confirm that I / we am / are authorised to provide the personal details presented and **I / we consent** to the information being passed to and checked with the document issuer, official record holder, a credit bureau and authorised third parties (including, but not limited to, the Department of Internal Affairs, NZ Transport Agency, Land Information NZ, Centrix, White Pages, the Dow Jones WatchList and illion) for the purposes of verifying an applicant's identity, address and whether or not any of them is a politically exposed person.

Credit check

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

- Carrying out credit checks on me / us 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. 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 / we may have. This will require you to give my / our 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.
- Where I / we 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 / we authorise any third party to provide my personal information to you for any of these purposes.

I / we 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

Date D D M M Y Y Y Y

Signature of applicant

Date D D M M Y Y Y Y

Please contact us if you are applying in the name of a trust or company to determine who must provide authority for both Identity Verification and Credit Check requirements.