Debt Review Application Form

Application by Consumer for Debt Review

In terms of Section 86 of The National Credit Act

Please Note:

1. This form must be accompanied by the following documentation:
   - Copy of ID
   - Proof of Income (self-employed: 1 months bank statement & 1 months payslip)
2. Upon receipt, the debt counsellor will notify all credit providers and registered credit bureaus of your application.
3. The Debt Review Application will be listed on all registered credit bureaus.
4. All conditions must be read and signed at the bottom of the application.
5. Debt Counselling helps make your monthly repayments more affordable.

Instructions for Completing Application:

- Ensure all information is true and complete.
- Debt Counsellors cannot advise on insurance policies; external contractors assist clients with insurance (short- and long-term).
- Vehicle finance insurance is compulsory; proposals are invalid if insurance is cancelled or lapsed.

Part 1: Personal Information

Item	1st Applicant	2nd Applicant
Full Name and Surname		
Gender (M/F)		
Identity Number		
Physical Address		
Time at Current Address		

Item	1st Applicant	2nd Applicant
Marital Status		
If Married, How (ANC/COP)		
Ethnic Group		
Telephone (Work)		
Telephone (Home)		
Cell Phone		
E-Mail Address		
Employer Name		
Occupation		
Employer Address		
Time with Employer		
Number of Dependants		
Dependants' Age, Gender, Name	Dep1 Age:	Dep1 Sex:
	Dep2 Age:	Dep2 Sex:
	Dep3 Age:	Dep3 Sex:
	Dep4 Age:	Dep4 Sex:

Part 2: Income

(Attach salary slip. Married COP: spouse must complete 2nd applicant section.)

Item	1st Applicant (R)	2nd Applicant (R)
Gross Salary / Pension		
Tax		
UIF		
Medical Aid		
Pension		
Other Deductions (Specify)		

Item	1st Applicant (R)	2nd Applicant (R)
Other Income (Specify)		
Net Salary / Pension		
Total Income		

Part 3: Monthly Commitments

(Excluding debt. Include school fees, transport, medical, utilities, etc.)

Commitment	Monthly Expense (R)
Food	
Property Rental	
Municipal Rates	
Utilities	
Transport	
Medical Expenses	
Maintenance	
School Fees	
Telephone	
Clothing	
Insurance Premiums	
Other Essential Expenses	
Other	
Other	
TOTAL	

Part 4: Debt Obligations

(Attach copies of all outstanding debt. Joint applications: indicate account holder.)

Debt Commitment	**Account Type**	**Account Holder**	**Name of Creditor**	**Total Outstanding (R)**	**Current Monthly Commitment (R)**	**Account Number**
1						
2						

Debt Commitment	Account Type	Account Holder	Name of Creditor	Total Outstanding (R)	Current Monthly Commitment (R)	Account Number
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						

Debt Commitment	Account Type	Account Holder	Name of Creditor	Total Outstanding (R)	Current Monthly Commitment (R)	Account Number
14						
15						

OUTSTANDING TOTALS: R ________________________ Outstanding debt | R ______________________ Monthly Obligations

Part 5: Declaration by Consumer/s

I / We declare: 1. I / We will comply with all requests from the debt counsellor to evaluate my/our indebtedness. 2. I / We consent to submission of information to registered credit bureaus. 3. I / We consent to the debt counsellor obtaining credit records from bureaus and other registers. 4. I / We will not enter into further credit agreements until: - The application is rejected, or - Court determines not over-indebted, or - All obligations fulfilled. 5. Information provided is true and correct.

Important Notes: - This is not a Payment Holiday. - Section 130 Notices (summons) on property are excluded from Debt Review. - I / We undertake to make monthly payments to the PDA as per the Debt Review Proposal / Consent Order. - Failure to keep contact may result in termination of application, making all credit agreements payable. - ____ Debt Counsellors not responsible for loss due to non-disclosure.

Signed at (Place): ____

On this (day): ___________ of (month): _________________________ 20_____

____

1st Applicant Signature

____

2nd Applicant Signature

____

Debt Counsellor Signature

Loans Acceptable referred Client to _____________________________________ Debt Counsellors.