



Applicant's details														
Title	Initials			Surname										
First name														
Gender	<input type="checkbox"/> Male			<input type="checkbox"/> Female										
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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
ID/Passport number		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Are you a South African citizen		<input type="checkbox"/> Yes			<input type="checkbox"/> No									
Are you a permanent resident		<input type="checkbox"/> Yes			<input type="checkbox"/> No									
Country of citizenship							Country origin/birth							
Country of residence				Nationality				Passport issuing country						
Passport expiry date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Permit number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Permit issue date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Permit expiry date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Permit/Visa type														
Home language							Communication language							
<input type="checkbox"/> English							<input type="checkbox"/> Afrikaans							
Ethnic background	<input type="checkbox"/> African			<input type="checkbox"/> Asian			<input type="checkbox"/> Coloured			<input type="checkbox"/> White			<input type="checkbox"/> Unknown	
<input type="checkbox"/> Not applicable														
Marital status	<input type="checkbox"/> Single			<input type="checkbox"/> Married			<input type="checkbox"/> Divorced			<input type="checkbox"/> Widowed			Number of dependants	
<input type="text"/>		<input type="text"/>												
Type of marriage	<input type="checkbox"/> Married (In community of property)						<input type="checkbox"/> Married (Customary)				<input type="checkbox"/> Married (Antenuptial contract)			
*If you are married in community of property, your spouse must give consent in terms of the Matrimonial Property Act 88 of 1984 before you enter into this agreement.														
<input type="checkbox"/> I confirm that the consent is held														
Contact details														
Contact method	Country code			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Number			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contact method	Country code			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Number			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email address														
Residential Address in South Africa (proof of address required)														
Residential address														
Suburb	City			Country				Postal code			<input type="text"/>	<input type="text"/>	<input type="text"/>	
Postal address (if different from residential address)														
Suburb	City			Country				Postal code			<input type="text"/>	<input type="text"/>	<input type="text"/>	
Domicile address (the place where you stay most often)														
Residential address														
Suburb	City			Country				Postal code			<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address for letters	<input type="checkbox"/> Residential			<input type="checkbox"/> Postal			<input type="checkbox"/> Email							
Preferred contact time	<input type="checkbox"/> Anytime			<input type="checkbox"/> Daytime			<input type="checkbox"/> Evening							
Delivery method for all legal notices including notices in terms of section 129 of the NCA							<input type="checkbox"/> Hand delivery			<input type="checkbox"/> Registered mail				
Next of kin							Next of kin's contact number							
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
TAX														
(In terms of South African law you must give us all your registered tax information, whether in South Africa or other countries. If you have more than two income tax returns, please refer to form 00172132.)														
Country							Income Tax Number							
Country							Income Tax Number							

## Initials

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## Data Privacy

- a** You confirm that, if you give us personal information about or on behalf of other persons (including account signatories, shareholders, principal executive officers, trustees and beneficiaries), you are authorised to: (a) give us the Personal Information; (b) consent on their behalf to the processing of their Personal Information, specifically any cross-border transfer of Personal Information to and from the country where the products or services are provided, and (c) receive any privacy notices on their behalf.
- b** You confirm that we may share your information about your application with your Employer, Fund and Fund Administrator.
- c** Please be advised that Standard Bank will process your Personal Information collected from internal and external sources to administer your products and/or services. This includes all subsidiaries of Standard Bank Group and Standard Bank South Africa which may engage with you directly or indirectly as we personalise your experience.

Our Privacy statement informs you what personal information is, what personal information we process, how we process your information, where we collect your information, who we share your information with, your rights as a data subject such as the right to access or object to the processing of your personal information and the complaints contact details of both Standard Bank and the Information Regulator.

Please be advised that it is your responsibility to read our privacy statement which is available on our website at [www.standardbank.co.za/privacy](http://www.standardbank.co.za/privacy) and upon request from our branch or consultants.

☐ I have read and understood the above and accept the terms of your Privacy statement.

## Authorisation for deductions

I hereby authorise my Employer to deduct directly from my salary in order to pay Standard Bank every month the amount I owe to Standard Bank for a loan the Bank granted to me.

- I acknowledge that the amount to be deducted by my Employer will be according to the notification that Standard Bank will give to my Employer's pay office every month.
- I indemnify my Employer against any liability for any instalment paid in terms of this authorisation as well as any instalment not deducted and paid due to circumstances beyond my Employer's control.
- This authorisation will remain valid and enforceable until my Employer is informed by Standard Bank that the full amount under the Home Loan has been paid.

## Employment details

Company name

Site address

Employee number

Employment start date

Y	Y	Y	Y	M	M	D	D
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Telephone number

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## Fund details

I pledge to the Fund the pension benefits I am entitled to under the rules of the Fund for any amount the Fund may be liable for under the suretyship given to the Bank for my loan.

(i) Name of fund

Fund/Industry member number

(ii) Name of Fund

Fund/Industry member number

## Use of funds declaration

- I confirm that, if this loan is granted, it will be used for housing purposes only, that is:
  - To repay an existing loan granted to me for the purpose of buying property owned by my spouse or me, or
  - To buy an existing home or vacant land on which to build a home, or
  - To build, maintain, repair or alter a home owned by my spouse or me.
- I confirm, in all cases, that the property described above and relating to this application is or will be occupied by my dependants or me as our primary residence.

## Property details/home ownership

### Purpose of the loan

☐ Renovation ☐ Purchasing land ☐ Buying a new house ☐ Depositing on property ☐ Building a new home

Property address

City/Town/District

**\*Please attach proof of the above**

## Details of loan applied for (including details of the existing loan, if applicable)

New loan amount R

+existing loan balance R

= new total loan R

Existing loan account number

Preferred monthly repayment amount R

Preferred loan term (months or years)

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**Initiation fee**

- ☐ The applicant has declined the offer to make payment separately.  
The initiation fee will be capitalised on the principal debt.
- ☐ The applicant has accepted the offer to make payment separately.  
The payment will be made into the Home Loans bucket account on preapproval of the loan.

**Optional credit life insurance**

Will you require credit life cover ☐ Yes ☐ No

**Type of insurance**

- ☐ Death cover ☐ Death and Disability cover ☐ Death, Disability and Dread disease cover ☐ No cover required

**Terms and conditions apply**

Death cover – R1.72 for every R1 000 (one thousand rand) or part thereof with a maximum of R300 000 (three hundred thousand rand)  
 Death and Disability cover – R2.50 for every R1 000 (one thousand rand) or part thereof with a maximum of R300 000 (three hundred thousand rand)  
 Death, Disability and Dreaded Disease cover – R3.47 for every R1 000 (one thousand rand) or part thereof with a maximum of R300 000 (three hundred thousand rand)

**Applicant's declarations**

- 1 Are you insolvent or under debt review (current or applied) ☐ Yes ☐ No
- 2 Is there any legal action pending against you or your spouse? ☐ Yes ☐ No
- 3 Are you under an administration order? ☐ Yes ☐ No
- 4 I confirm that I am legally competent to sign a credit agreement.
- 5 As far as I know, these details are true and correct and I have not withheld any extra information that could affect the Bank's decision.
- 6 I pledge to the Fund the pension benefits I am entitled to under the Fund as security for any amount the Fund may be liable for under the suretyship given to the Bank for my loan.

**Financial Assessment (Income and Expenditure Statement)**

Total monthly income	Applicant	Spouse	Personal Expenses	Applicant	Spouse
Gross income (as per payslip)	R	R	Rates, water and electricity	R	R
Commissions and overtime	R	R	Rental/Home loan	R	R
(average over the past three months)	R	R	Insurance premiums	R	R
Other sources of income (rental, transport, etc.)	R	R	Groceries	R	R
Total income	R	R	Transport (petrol, bus fares and parking)	R	R
Payroll deductions			Credit Bureau		
Tax	R	R	Personal loans	R	R
UIF	R	R	Telephone and cellphone	R	R
Pension	R	R	Motor vehicles	R	R
Medical Aid	R	R	Retails accounts	R	R
			Other	R	R
			Total expenses	R	R
Surplus/Deficit	R				

Comments

- ☐ I give consent for a joint application
- I give the Bank permission to perform credit checks on me at any credit reference agency to consider this application and update my information.

Spouse's signature

Initials

ID number

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**Bank details**

Bank name

Branch code

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Account type

Account number

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**Prominent Influential Persons (PIPs)**

Prominent Influential Persons (PIPs) are individuals entrusted with prominent public functions either domestically or by a foreign country. Examples are heads of state or heads of governments, important political party officials, military officials or senior executives of state-owned corporations. This term also includes immediate family members and close associates.

Are you a public official in a position of authority?

☐ Yes☐ No

Are you related to or associated with a public official in a position of authority?

☐ Yes☐ No

What is the nature of the relationship or association?

☐ Business partner☐ Close associate☐ Parent☐ Sibling☐ Son/Daughter☐ Spouse/Partner

Please provide full name and surname of relative or associate

**Permissions****I give the Bank permission to:**

- a** Perform credit checks on me at any credit reference agency to consider this application and to update my information in future.
- b** Share information with credit agencies about the management of my loan agreement. Such credit agencies may also share the information with other credit providers.
- c** Carry out identity and fraud prevention checks and share the information provided in this application with the Southern African Fraud Prevention service.

**Marketing consent****I give consent for:**

- We may partner with third parties outside of the Group in order to bring you exclusive offers and/or services that may benefit you. Are you happy for us to share your information with these third parties for this purpose?
- A member of the Group may wish to inform you of exclusive offers and/or services that may benefit you. Are you happy for us to share your personal information within our group for this purpose?
- A member of the Group outside of this country may wish to inform you of exclusive offers and/or services that may benefit you. We will ensure that your personal information is given the same protection as is required locally. Are you happy for us to share your personal information across borders within the Group for this purpose?
- Let us know whether you would like to receive marketing communication from us. Note: Opting out of all marketing communication means that you will not always be kept up to date with our latest products and services or special offers.
- May we contact you telephonically to offer you products and services that may benefit you?
- May we send you marketing emails to keep you up to date with our latest products and services?
- May we send you marketing SMS's to keep you up to date with our latest products and services?
- We would really like to get your feedback on our products and services. Let us know if you would like to be contacted for research purposes.

☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No

I confirm that I am legally competent to sign a credit agreement.

As far as I know, these details are true and correct, and I have not withheld any extra information that could affect the Bank's decision.

Initials and Surname

ID number

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Main applicant signature

Date

Y	Y	Y	Y	M	M	D	D
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**Copies of the following documents must be submitted with this application:**

- |   |   |
|---|---|
| <input type="checkbox"/> South African ID or passport document  | <input type="checkbox"/> Latest retirement fund member benefit statement  |
| <input type="checkbox"/> Three consecutive payslips<br>(if you earn commission – last six consecutive payslips) | <input type="checkbox"/> Proof of residence (not older than three months) |
| <input type="checkbox"/> Proof of usage of funds e.g. offer to purchase   | <input type="checkbox"/> Three-month bank statement                       |

**Staff attestation**

☐ I confirm that I advised the client that Standard Bank Group will collect and process their personal information and where they can access our Privacy Statement