

## POSmate Rental Application Form

P.O. Box 132, ATHELSTONE S.A. 5076

A.B.N. 33 162 287 032

### Company Business Details

<b>Reg. Co. Name:</b>		
<input type="checkbox"/> Pty Ltd	<input type="checkbox"/> Limited	<input type="checkbox"/> Sole Trader <input type="checkbox"/> Trust <input type="checkbox"/> Other
<b>Industry Type:</b>		
<b>Trading Name:</b>		
<b>ABN:</b>		
<b>Installation Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Postal Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Telephone:</b>		
<b>Facsimile:</b>		
<b>Mobile:</b>		
<b>Email:</b>		

### Financial Information of Business

<b>Total Years Trading:</b>
<b>Years Trading Under Applicant/s:</b>

### Details of Business Premises

<input type="checkbox"/> Owner	<b>Value: \$</b>	<b>Mortgage: \$</b>
<input type="checkbox"/> Renting	<b>Monthly Rent: \$</b>	
<b>Landlord:</b>	<b>Telephone:</b>	

### Applicant 1: Personal Details

<b>First Name:</b>		
<b>Surname:</b>		
<b>Gender:</b>	<input type="checkbox"/> M <input type="checkbox"/> F	<b>Date of Birth:</b>
<b>Driver's License Number:</b>		
<b>Mobile:</b>		
<b>Email:</b>		
<b>Current Home Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Years:</b>	<b>Telephone (Home):</b>	
<input type="checkbox"/> Owner	<b>Value: \$</b>	<b>Mortgage: \$</b>
<input type="checkbox"/> Renting	<b>Monthly Rent: \$</b>	
<b>Previous Home Address (if less than 12 months):</b>		
<b>State:</b>	<b>Postcode:</b>	<b>Years:</b>
<i>SECURITY QUESTION: Required for identification purposes. Please fill out the following.</i>		
<b>1) Mother's Maiden Name:</b>		
<b>2) Name of Place You Were Born:</b>		

### Applicant 2: Personal Details

<b>First Name:</b>		
<b>Surname:</b>		
<b>Gender:</b>	<input type="checkbox"/> M <input type="checkbox"/> F	<b>Date of Birth:</b>
<b>Driver's License Number:</b>		
<b>Mobile:</b>		
<b>Email:</b>		
<b>Current Home Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Postcode:</b>
<b>Years:</b>	<b>Telephone (Home):</b>	
<input type="checkbox"/> Owner	<b>Value: \$</b>	<b>Mortgage: \$</b>
<input type="checkbox"/> Renting	<b>Monthly Rent: \$</b>	
<b>Previous Home Address (if less than 12 months):</b>		
<b>State:</b>	<b>Postcode:</b>	<b>Years:</b>
<i>SECURITY QUESTION: Required for identification purposes. Please fill out the following.</i>		
<b>1) Mother's Maiden Name:</b>		
<b>2) Name of Place You Were Born:</b>		

### Amount Required

<b>\$</b>
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### Statement by Applicant(s) For Credit

**Please read carefully before accepting. Where more than one applicant, each applicant must accept.**

- Giving information to a Credit Reporting Agency (Section 18E(8)(c) Privacy Act 1988) POSmate has informed me/us that it may give certain personal information about me/us to a Credit Reporting Agency.
- Agreement that POSmate may seek Consumer Credit information (Section 18K(1)(b), Privacy Act 1988). If POSmate considers it relevant to assessing my/our application for commercial credit, I/we agree to POSmate obtaining from a credit reporting agency a credit report containing personal credit information about me/us in relation to commercial credit provided by POSmate.
- If applicant completes form electronically they do not need to sign, by completing and ticking the box they are authorising us to perform credit checks and process their application.

**Notice of disclosure of your credit information to a credit reporting agency.**  
Under Section 18E(8)(c) of the Privacy Act, POSmate is allowed to give a credit reporting agency, personal information about your credit application. The information which may be given to an agency is covered by Section 18E(1) of the Act and includes:

- Identity particulars
- The fact that you have applied for credit and the amount.
- The fact that POSmate is a credit provider to you.

**You hereby certify that the information you have provided is true and correct and you acknowledge that we are relying upon such information to assess this application.**

<b>Name:</b>
<b>Signature:</b>
<input type="checkbox"/> <i>I have read, understood and accepted the conditions above.</i>
<b>Date:</b>
<b>Name:</b>
<b>Signature:</b>
<input type="checkbox"/> <i>I have read, understood and accepted the conditions above.</i>
<b>Date:</b>