Credit Assistance Application





Reliance Bank is a division of Unity Bank Limited ABN: 11 087 650 315 AFSL /Australian Credit Licence 240399

STATEMENT OF FINANCIAL POSITION - Personal Details

This form will help us in considering your request for assistance related to the financial hardship you are experiencing. For help with any section call the Member Credit Management Department at Unity Bank on 1300 36 2000 or Reliance Bank on 13 24 40 or email: membercreditmanagement@unitybank.com.au

- · We ask that you complete all sections of this application and answer all questions in full.
- We ask that you provide supporting documentation for income and expenses.

You may complete and forward this application to: membercreditmanagement@unitybank.com.au

Fax: 02 8263 3277

Mail: PO Box K237 Haymarket NSW 1240

Or deliver to your local branch.

First Account holder details				
Mr Mrs Miss	Ms Other	Member No:		
Surname: Given name:				
Date of birth: 00/00/0000 Age:	Marital Status:	Age of dependants:		
Home phone:	Home phone: Work phone:			
Email:				
Second Account holder details				
Mr Mrs Miss	Ms Other	Member No:		
Surname: Given name:				
Date of birth: 00/00/0000 Age:	Marital Status:	Age of dependants:		
Home phone:	Work phone:	Mobile:		
Email:				
Please provide reasons for your ap	polication to provide credit assista	nce		
I/We wish to apply for assistance due to the following reasons:				
The state of the s				

Credit Assistance Application STATEM	ENT OF FINANCIAL PO	SITION - Personal Deta	ils
Current Residential address:			
Suburb:		State:	Post code:
Time at this address:		Years:	Months:
Current Postal address:			
Suburb:		State:	Post code:
Previous Residential address:			
Suburb:		State:	Post code:
Time at this address:		Years:	Months:
NAME AND ADDRESS OF FRIEND OR REL	ATIVE NOT LIVING	WITH YOU	
Name:			
Address:			
Suburb:		State:	Post code:
Phone Number:	Status: (friend or rel	ative)	
EMPLOYMENT INFORMATION - MEMBER	1 (PAYSLIP INCLUI	DED)	
Employer's Name:			
Employer's Address:			
Suburb:		State:	Post code:
Employer's Phone Number:		Length of service. Yea	Months:
Occupation:			
Previous Employer:			
Occupation:		Length of service: Yea	Months:
EMPLOYMENT INFORMATION - MEMBER	R 1 (PAYSLIP INCLUI	DED)	
Employer's Name:			
Employer's Address:			
Suburb:		State:	Post code:
Employer's Phone Number:		Length of service. Yea	Months:
Occupation:			
Previous Employer:			
Occupation:		Length of service: Yea	Months:
If currently unemployed, please give details of prospects and time frames for future employment:			

INCOME - MEMBER 1 (PAYSLIP OR CENTRELINK STATEMENT INCLUDED)					
Weekly Fortnightly Monthly	D () (
Net income base \$	Details of other income:	Weekly Fortnightly Monthly			
Overtime allowance \$					
Other income \$					
Total income \$					
INCOME - MEMBER 2 (PAYSLIP OR CENTRELINK STATEMENT INCLUDED)					
Weekly Fortnightly Monthly		,			
Net income base \$	Details of other income:	Weekly Fortnightly Monthly			
Overtime allowance \$					
Other income \$					
Total income \$					
Total income \$					
LIABILITIES / ASSETS / EXPENSES - (LE	TTERS AND DOCU	MENTATION INCLUDED)			
MORTGAGE:					
Mortgage Creditors name:					
Address of mortgaged property:					
		Market value of property \$			
		Mortgage balance \$			
Mortgage Payment : Weekly Fortnightly	Monthly	Mortgage payment \$			
Does anyone contribute to paying this liability?	□	Current mortgage arrears \$			
paying this liability? Yes (e.g. Spouse / Partner)	No				
Are you on a reduced payment arrangement?	No				
If so what are the arrangement details?					
arrangement details:					
RENT:					
Real Estate Agent's name:					
Rental address:					
Rental Paid Weekly Fortnightly	/ Monthly	Rental amount \$			
Does anyone contribute to paying this liability? (e.g. Spouse / Partner) Yes	No	Current rental arrears \$			
Are you on a reduced payment arrangement?	No				
If so what are the arrangement details?					

PERSONAL LOANS:	
LOAN 1:	
P/L Creditors name:	Balance \$
Payment : Weekly Fortnightly	Monthly Repayment amount \$
	Current arrears \$
Is this loan secured? Yes No	Market value of security \$
If so what is the security?	
Are you on a reduced payment arrangement?	No
Payment: Weekly Fortnightly	Monthly Reduced payment amount \$
Does anyone contribute to paying this liability? (e.g. Spouse / Partner) Yes	No
Notes:	
LOAN 2:	
P/L Creditors name:	Balance \$
Payment : Weekly Fortnightly	Monthly Repayment amount \$
	Current arrears \$
Is this loan secured? Yes No	Market value of security \$
If so what is the security?	
Are you on a reduced payment arrangement?	No
Payment: Weekly Fortnightly	Monthly Reduced payment amount \$
Does anyone contribute to paying this liability? (e.g. Spouse / Partner) Yes	No
Notes:	
LOAN 3:	
P/L Creditors name:	Balance \$
Payment : Weekly Fortnightly	Monthly Repayment amount \$
	Current arrears \$
Is this loan secured? Yes No	Market value of security \$
If so what is the security?	
Are you on a reduced payment arrangement?	No If so what is the arrangement?
Payment: Weekly Fortnightly	Monthly Reduced payment amount \$
Does anyone contribute to paying this liability? (e.g. Spouse / Partner) Yes	No
Notes:	

CREDIT CARDS / OVERDRAFT: CARD 1: Card providers name: **Current Debt Balance \$** Debt Balance Limit \$ Payment: Weekly Fortnightly Payment amount \$ Monthly Current arrears \$ Market value of security \$ Yes No Is this credit facility secured? If so what is the security? Are you on a reduced Yes No payment arrangement? Reduced payment amount \$ Payment: Weekly Fortnightly Monthly Does anyone contribute to paying this liability? Yes No (e.g. Spouse / Partner) Notes: CARD 2: Card providers name: Current Debt Balance \$ Debt Balance Limit \$ Payment: Weekly Payment amount \$ Fortnightly Monthly Current arrears \$ Market value of security \$ Yes No Is this credit facility secured? If so what is the security? Are you on a reduced Yes No payment arrangement? Reduced payment amount \$ Weekly Fortnightly Monthly Payment: Does anyone contribute to Yes No paying this liability? (e.g. Spouse / Partner) Notes: CARD 3: Card providers name: Current Debt Balance \$ Debt Balance Limit \$ Payment: Weekly Fortnightly Monthly Payment amount \$ Current arrears \$ Market value of security \$ No Is this credit facility secured? Yes If so what is the security? Are you on a reduced Yes No payment arrangement? Reduced payment amount \$ Payment: Weekly Fortnightly Monthly Does anyone contribute to No paying this liability? Yes (e.g. Spouse / Partner) Notes:

OTHER DEBTS:				
Creditor's name:				
Details:				
	Balance \$			
Payment : Weekly Fortnightly Monthly	Payment amount \$			
	Current arrears \$			
Is this loan secured? Yes No	Market value of security \$			
If so what is the security?				
Are you on a reduced payment arrangement? Yes No				
Payment: Weekly Fortnightly Monthly	Reduced payment amount \$			
Does anyone contribute to paying this liability? (e.g. Spouse / Partner) Yes No				
Notes:				
EXPENSESS:				
	Council / Water / Rates (yearly) \$			
	Insurance Premiums (yearly) \$			
Weekly Fortnightly Monthly	Food \$			
Weekly Fortnightly Monthly	Clothing \$			
Weekly Fortnightly Monthly	Spouse / Child maintenance \$			
Details of other expenses:	Electricity (monthly) \$			
Does anyone contribute to paying this liability?	Home Telephone (monthly) \$			
(e.g. Spouse / Partner)	Mobile (monthly) \$			
Yes No	Other expenses \$			
ALTERNATIVE ARRANGEMENT:	Total \$			
Offer to repay Unity Bank loan: Weekly Fortnightly Monthly	Payment Amount \$			
Details:	Commencing on:			
I/we agree that the information collected by the Bank will not be divulged to an unrelated third party. I/We certify that all information given in this statement is true and correct.				
Signature Member 1	Name:			
	Date: 00/00/0000			
Signature Member 2	Name:			
	Date: 00/00/0000			