

# AUSTRALIAN SECURITIES LIMITED LOAN ENQUIRY

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## Enquiry Details

Company:	
Company Registered Address:	
ABN:	GST Registration: Yes <input type="checkbox"/> No <input type="checkbox"/> SMSF: <input type="checkbox"/>

## First Applicant / Director

Title	First name	Second name	Last name
Date of birth	Place of birth	Drivers licence No	Occupation
Applicants address			
Mobile*	Business hours*	After hours*	Email*

## Second Applicant / Director

Title	First name	Second name	Last name
Date of birth	Place of birth	Drivers licence No	Occupation
Applicants address			
Mobile*	Business hours*	After hours*	Email*

## Security

Title Details	Volume	Folio	\$ Value	\$ Building Insurance Value
No	Street	Suburb	State	Postcode
Type of security	Commercial <input type="checkbox"/>	Residential <input type="checkbox"/>	Construction <input type="checkbox"/>	

## Loan Details

Finance Type	Interest Type	Employment Status
<input type="checkbox"/> Business & Investment	<input type="checkbox"/> Fixed	<input type="checkbox"/> PAYG Employee
<input type="checkbox"/> Credit Code - Owner Occupied (Individual)	<input type="checkbox"/> Variable	<input type="checkbox"/> Self-Employed
<input type="checkbox"/> Credit Code - Investment (Individual)	<input type="checkbox"/> Principal & Interest	
Loan Purpose (Please state Loan Purpose - If not enough space attach separate A4 Sheet)		

Loan required \$	Estimated value \$	Date required
Options	<input type="checkbox"/> Right to Repay <input type="checkbox"/> No Right to Repay	Term <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 Years

## Serviceability

Annual Income	\$	Annual Expenses (estimate)	\$
Total Assets	\$	Total Liabilities	\$

## Introducer

Name
Address
Telephone
Brokerage <input type="checkbox"/> Yes <input type="checkbox"/> No %
Finance Fee Facility <input type="checkbox"/> Yes <input type="checkbox"/> No %

\* Email address and at least one phone number required



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