

Form 16

APPLICATION BY CONSUMER FOR DEBT REVIEW

In terms of Section 86 of the National Credit Act 34 of 2005

Please note that:

- 1. On receipt of this application, the Debt Counsellor will advise all credit providers and all registered credit bureaus that you have applied for Debt Review.
- 2. You will be flagged with all registered credit bureaus that you have applied for Debt Review and you will not be able to obtain any further credit.
- 3. This form must be accompanied by a list of all credit providers as well as copies of all documents requested;
- 4. Should any documents not be submitted within 10 days of the Application being received by the Debt Counsellor, your application can be either rejected or suspended.

Part 1 – Personal Information																	
Full Names	Name(s)				Sı	urna	me										
ID Number								G	Gender								
Ethnic Group	African			Coloured Ind			dian		White			other					
																	ı
Marital Status	Single/Widow		Divorced		COP	ANC		African Traditional		al	Muslim Traditional						
Language preference						•			· -					1			_
Dependents	No. Ages					Where do your school-going children stay after school?											
Physical address				•			•							•			
										Po	stal	code					
Postal address													•				

E-mail address	I hereby consent to service of my Debt Review application and/or all other court document relating to the said debt review application on me by e-mail at:							
Employment details	Employer				0	ccupation		
Start date								
Employer address								
					Posta	l code		
Part 2 – Spouse Details (Co	ompulsory i	f married In C	OP or cu	stoma	rv ma	rriagel		
		ii iiiaiiieu iii C	OF OF CU			i i i age j		
Full Names	Name(s)			Surna	me			
ID Number								
Telephone No.	Work			•	Cell			
Employer Name				•		Job Title		
Employer Address								
					Pos	tal code		
	1							
Part 3- Dependents (scho	ol-going, fu	ll-time studen	ts and pa	arents) that	you are ma	aintaining	
Dependent name		Gender	Age	Reas	on			
			•	•				

Contact Numbers

Work

Cell

Postal code

Home

Part 4– Budget (If married Out expenses that you are personal		rty) and single application, please only list
A. Income	Applicant 1	Applicant 2 (only if married in COP)
Gross Salary		
Commission (6 months)		
Overtime (6 months)		
Rental Income		
Child maintenance		
Other Income		
Total Income		
B. Salary Deductions	Applicant 1	Applicant 2
PAYE		
UIF		
Pension / Provident fund		
Medica Aid		
Emolument Attachment Order		
Garnishee Order/s		
Staff loan/s		
Other		
Other		
Total Deductions		
Net Income (A- B)		

C. Living Expenses	Applicant 1	Applicant 2
Groceries		
Property Bond/rental		
Rates/levies/water/		
electricity		
Security		
School fees		
Short term insurance		
Vehicle insurance		
Life insurance		
Fuel/transport		
Child maintenance		
Medical costs		
Clothing		
Telephone and data		
Other (specify)		
Total expenses		
Amount available for Debt Review (Nett salary – C)		

Creditor	Account type	Account number	Outstanding balance	Current instalment	Is there a Section 129 Yes/No

Part 6 – Would you want your Debt Counsellor to investigate the possibility of Reckless Lending?										
Yes		No		Indicate Credit Provider below (if any)						
Creditor		Account	type	Account number	Outstanding balance	Current instalment	Is there a Section 129 Yes/No			

Part 7 – Previous Debt Review information	
Have you previously been under Debt Review?	
Reason you believe why you are over-indebted	
Name of previous Debt Counsellor	
Contact number of previous Debt Counsellor	
Reason for leaving previous Debt Counsellor	
Form 17.4 provided (Yes/No)	
Was a Court Order granted?	
Part 8 – Previous Debt Review information	
Reason you believe why you are over-indebted	

Part 9 – Declaration by the Consumer/s									
I/\	Ne declare as follows:								
1.	I/We undertake to comply with all requests from the Debt Counsellor to assist him/her to evaluate my/our state of indebtedness and the prospects for responsible debt restructuring;								
2.	I/We hereby consent to the submission of my information to all registered credit bureaus by the Debt Counsellor;								
3.	I undertake not to enter into any further credit agreements, other than a consolidated agreement, with any credit provider until one of the following events have occurred:								
a)	The Debt Counsellor rejects my application;								
b)	The Court determines that I am not over-indebt	ed; or							
c)	All my obligations under credit agreements as re	e-arranged are fulfilled.							
PO	WER OF ATTORNEY								
	 I also consent that the Debt Counsellor may act on my behalf and to make enquiries and to obtain my/our personal information at all registered credit bureaus and/or financial institutions to ascertain my/our credit status and counsel me/us in regard to Debt Relief. This authority extends to all and every one of my/our creditors, and to do all such things and act in all circumstances as if I/we were personally present and acting therein, which includes requesting the cancelation and/or stop payments of any debit orders on my/our accounts. To engage an Attorney to obtain the Debt Restructuring Order when necessary. I confirm that the information contained in this document is to the best of my knowledge, true and 								
Signed	correct. ed at on this of 20								
Signatu	ires								
Applica	nt 1:	Applicant 2:							
For Off	ice Use								
Angela	Crowder								
Debt Co	ounsellor								
NCRC38	859								