

ICHINEN AUTOS (N.Z.)

ICHINEN AUTOS (N.Z.) - APPLICATION FOR CREDIT

P: 09 580 0050 F: 09 580 0052 E: sales@ichinenautos.co.nz W: www.ichinenautos.co.nz

The form is shown on the next few pages; please fill in in the form as much information as possible.

Once you have completed the form, please either fax it through, together with the supporting documentation to 09 580 0052, or scan and email to sales@ichinenautos.co.nz

Supp	porting Dcumentation Required
	Application Form Filled Out and Signed
	Copy Drivers License (overeas or international driver's license is acceptable)
	Additional photo ID. (copy of passport, firearms license, 18+ card), this is required to satisfy the new AML government compliance requirements
	Proof of Address. A copy of a utilities bill or account not more than 4 weeks old. This can also be a payslip or bank statement as long as your full address is shown on the payslip or statement.
	Copy of latest payslip (if you are receiving a benefit then please supply a letter of confirmation form WINZ)
	Copies of 2 months of your latest bank statements.
	If possible, information on the vehicle being purchased (Make, Model, Year, Mileage etc)
	If possible, information on the purchase transaction (Purchase Price, Deposit, Trade In etc)
	If you have an overseas or international driver's license then please send a copy of the date stamp in your passport showing the last date of entry into NZ.
	If you have a Student, Work, or Visitors Visa or have Permanent Residence, then please send a copy of this from your passport.
	Having all the correct supporting documentation will ensure that we can process your application very quickly.
	Do not hesitate to contact us on 09 580 0050 or sales@ichinenautos.co.nz if you have any queries.
	Regards

The ICHINEN AUTOS (N.Z.) Team

Fax to 09 580 0052



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Purchase	Details		Vehicle		Dealer	Dealer				
Purchase Price \$			Make <u>:</u>		Dealer_:					
Deposit \$		Model :		Sales Person :						
Trade in (Nett) \$			Year <u>:</u>		Phone :	Phone :				
Amount to Finance \$		Odo <u>:</u>		Mobile <u>:</u>						
Applicant										
1 ,	Applican <u>t :</u>	(Surname)	(First Names)							
2 1	Marital Sta	tus :	Number of Dependents:							
3 ,	Joint Applic	ant Name : (Surname)		(Fir	rst_Names)					
4 i	Date of Bir	th : (Applic <u>ant)</u>	(Joint Applicant)							
5 1	Driver's Li	cence No :		L/R/F Spo	ouse :		L/R/F			
6 1	6 Email Address : (Applicant) (Joint Applicant)									
7	Current Ac	ldress <u>:</u>								
(Own Home / Tenancy / Boarding? Years :									
8 1	Previous A	.ddress <u>:</u>				Years :				
9 1	Phone No:	(<u>Private</u>)	(Business)	(Mobile)					
10	Nearest Re	elativ <u>e :</u>			P <u>h</u> :					
	Who does no Address:	t live with you)			Relationship <u>:</u>					
Employme	nt									
11 (Present Er If applicant is	nploye <u>r:</u> a beneficiary, please include a let				Years :				
,	Address :				Occupati <u>on :</u>		Full/Part time			
12 (Previous E	mployer :				Years				
13 ,	Joint Appli	cants Employe <u>r :</u>				_ Years :				
,	Addre <u>ss :</u>				Occupati <u>on :</u>		_Full/Part time			
14 ,	Joint Appli	cants Previous Employe	r:			Years :				



Financial Information

Date : _____

						7773				
<u>Assets</u>				<u>Liabilities</u>						
Home	\$		_	Mortgage	\$					
Furnishing	\$		_	HP/Credit Cards	\$					
Bank Account	\$		_	Bank OD	\$					
Car	\$		_	Other Loans	\$					
Other	\$		_		\$					
TOTAL	\$		TOTAL		\$					
<u>Income</u> weekly / monthly				Expenses weekly / monthly						
Take Home Pay	\$		_	Mortgage/Rent	\$					
Partners Pay	\$		_	HP/Credit	\$					
Other Income	\$	_from	_	Living Expenses	\$					
	\$	from	_	Loans	\$	to				
				Loans	\$	to				
TOTAL	\$		-	TOTAL	\$					
Supporting Documents - please attach all supporting documents to the application										
☐ Drivers Licence	☐ Payslip	☐ 2 months	Bank State	ments D VOSA	☐ CIN card	l				
Acknowledgements										
Privacy Act 1993 : I / We	:									
a) warrant that the inform	mation provided in th	nis application is true	e and correct	;						
 a) warrant that the information provided in this application is true and correct; b) authorise ICHINEN AUTOS (N.Z.) or any of its agents ("ICHINEN AUTOS") to contact my / our employer, any credit agency and other source (each a "Source") to obtain, check and exchange (both now and in the future) information in connection with this application and any agreement that I / we may hereafter enter into with ICHINEN AUTOS; 										
c) acknowledge that my / our signature on this application shall operate as an authority to each Source to provide ICHINEN AUTOS with any information anout me / us which ICHINEN AUTOS may require in connection with this application or any such agreement;										
d) acknowledge that this application will form part of any agreement I / we may hereafter enter into with ICHINEN AUTOS and that the authorisation set our above will be deemed to be incorporated into that agreement;										
e) authorise ICHINEN AL product information . e	-	· ·	•	ne information provided in rial.	this application to d	contact you with				
f) You are entitled , under (a) have access to per	You are entitled, under the provisions of the Privacy Act 1993, to: (a) have access to personal information held by ICHINEN AUOTS about you; and (b) request correction of any personal information held by ICHINEN AUTOS about you; in either case in accordance with the provisions of that Act									
Signed :										
Applicant <u>:</u> Joint Applicant :										