



# Home loan

## Products

### General

- Standard Variable  
 Fixed Rate  
 Portfolio\*

- Basic  
 Relocation  
 Super Fund Home Loan

### Low Doc

- Low Doc Variable  
 Low Doc Fixed Rate

### Seniors

- Access  
 Access Plus

## Features

\*Please complete the 'Portfolio loans' section below.

- Advantage Package → Please complete details on page 10  
 Professional Package (Low Doc Loans only)  
 Flexible Choice → Please complete details below  
 Family Pledge Option → Please complete details on page 9  
 Interest Offset facility → Please complete details on page 10  
 Interest in Advance (not available for Portfolio Loans)

## Loan details

### Purpose

- Purpose  Buy  Build  Renovate  Refinance  Increase  Other  
 Usage  Owner Occupied  Business  Investment

Please provide details e.g. purchase of existing property, equity release to buy shares etc.

Will you be applying for the first home buyer grant for this loan?  Yes  No

### Amount Requested

Please complete a FHOG application

Loan Amount \$ \_\_\_\_\_ Portfolio Credit limit \$ \_\_\_\_\_

### Product and Repayment

Amount	Loan Term 1-30 years	Repayment Type Principal and Interest, Interest Only or Interest in Advance <sup>1</sup>	Interest Only Term <sup>1</sup>	Interest Rate	Variable or Fixed interest	Fixed Rate Term	Rate Lock? Fee applies <sup>2</sup>	O/O or Inv
\$				%			<input type="checkbox"/> Yes	
\$				%			<input type="checkbox"/> Yes	
\$				%			<input type="checkbox"/> Yes	

1.If Interest Only provide period between 1-5 years for Owner Occupied & 1-15 years for Investment. 2. Rate Lock applies to fixed rate loans only.

I need to have the loan amount by (please specify date):  /  /

## Portfolio Loans

Administration Fee: The administration fee is debited monthly to each sub-account. If you would like to pay the administration fee annually, which will be debited to the primary sub-account, please tick the checkbox:

- Annual Portfolio Administration Fee

Sub-Account holder Name(s)	Limit	O/O or Inv	Variable or Fixed indicate fixed period <sup>1</sup>	Rate Lock? Fee applies <sup>2</sup>	Capitalise interest? <sup>3</sup>	Other <sup>4</sup> Cheque book, Debit card <sup>5</sup> ATM card
#1 All portfolio borrowers	\$			<input checked="" type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM
#2	\$			<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM
#3	\$			<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM
#4	\$			<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM
#5	\$			<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM
#6	\$			<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM
#7	\$			<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM
#8	\$			<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM
#9	\$			<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM
#10	\$			<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Chq <input type="checkbox"/> Debit <input type="checkbox"/> ATM

1. Nominate 1 to 5 years only. 2. Rate Lock applies to fixed rate sub-accounts only. 3. Available on investment sub-accounts only.  
 4. Available on variable rate sub-accounts only. 5. Not available to non-Australian residents.

# Applicant 1/Trustee 1 details

## Personal

Title \_\_\_\_\_ Given names *include first and middle* \_\_\_\_\_  
 Last name \_\_\_\_\_

- Borrower  
 Guarantor

Other Names commonly known as (if any) \_\_\_\_\_

Date of birth \_\_\_\_\_ Australian resident?  Yes  No Australian citizen?  Yes  No

Driver's Licence number \_\_\_\_\_ State of issue \_\_\_\_\_

Marital status  Married  Divorced  De facto  Widowed  Single No. of dependants \_\_\_\_\_ Age of dependants \_\_\_\_\_

## Contact

*The Bank requires a minimum of three years residential details*

Home address - (Not a Post Office box) \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_ Years lived at home address \_\_\_\_\_

Previous home address *if at current home for less than 3 years* \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_ Years lived at previous home address \_\_\_\_\_

Mailing address *if not the same as home address* \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Current residential status  Own  Mortgage  Rent  Live with parents  Other *please provide details* \_\_\_\_\_

Home phone number \_\_\_\_\_ Work phone number \_\_\_\_\_ Mobile phone number \_\_\_\_\_ Fax number \_\_\_\_\_  
 ( ) ( ) ( ) ( )

E-mail address *optional* \_\_\_\_\_

## Employment

*The Bank requires a minimum of three years employment details*

Employment type  Full-time  Part-time  Casual  Self-employed Occupation *- all applicants to complete including self employed* \_\_\_\_\_

Current employer *if self-employed, provide business/trading/company name and ABN and industry* \_\_\_\_\_ Length of employment \_\_\_\_\_

Previous employer 1 *if current employment is less than 3 years* \_\_\_\_\_ Length of employment \_\_\_\_\_

Previous employer 2 *if length of employment already provided is less than 3 years* \_\_\_\_\_ Length of employment \_\_\_\_\_

Base income *gross annual* \$ \_\_\_\_\_ Overtime *gross annual* \$ \_\_\_\_\_ Other allowances *gross annual* \$ \_\_\_\_\_

Other income *gross annual provide details, e.g. bonuses, veteran's pension, second job, Director's Fee, Dividend etc.* \$ \_\_\_\_\_ Rental income *weekly* \$ \_\_\_\_\_

Source of Funds (Refer to the 'Individual' list provided at the end of the document) \_\_\_\_\_

Source of Wealth (Refer to the 'Individual' list provided at the end of the document) \_\_\_\_\_

# Applicant 2/Trustee 2 details

## Personal

Title \_\_\_\_\_ Given names *include first and middle* \_\_\_\_\_  
Last name \_\_\_\_\_

- Borrower  
 Guarantor

Other Names commonly known as (if any) \_\_\_\_\_

Date of birth \_\_\_\_\_ Australian resident?  Yes  No Australian citizen?  Yes  No

Driver's Licence number \_\_\_\_\_ State of issue \_\_\_\_\_

Marital status  Married  Divorced  De facto  Widowed  Single No. of dependants \_\_\_\_\_ Age of dependants \_\_\_\_\_

## Contact

*The Bank requires a minimum of three years residential details*

Home address - (Not a Post Office box) \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_ Years lived at home address \_\_\_\_\_

Previous home address *if at current home for less than 3 years* \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_ Years lived at previous home address \_\_\_\_\_

Mailing address *if not the same as home address* \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Current residential status  Own  Mortgage  Rent  Live with parents  Other *please provide details* \_\_\_\_\_

Home phone number \_\_\_\_\_ Work phone number \_\_\_\_\_ Mobile phone number \_\_\_\_\_ Fax number \_\_\_\_\_  
( ) ( ) ( ) ( )

E-mail address *optional* \_\_\_\_\_

## Employment

*The Bank requires a minimum of three years employment details*

Employment type  Full-time  Part-time  Casual  Self-employed Occupation *- all applicants to complete including self employed* \_\_\_\_\_

Current employer *if self-employed, provide business/trading/company name and ABN and industry* \_\_\_\_\_ Length of employment \_\_\_\_\_

Previous employer 1 *if current employment is less than 3 years* \_\_\_\_\_ Length of employment \_\_\_\_\_

Previous employer 2 *if length of employment already provided is less than 3 years* \_\_\_\_\_ Length of employment \_\_\_\_\_

Base income *gross annual* \$ \_\_\_\_\_ Overtime *gross annual* \$ \_\_\_\_\_ Other allowances *gross annual* \$ \_\_\_\_\_

Other income *gross annual provide details, e.g. bonuses, veteran's pension, second job, Director's Fee, Dividend etc.* \$ \_\_\_\_\_ Rental income *weekly* \$ \_\_\_\_\_

Source of Funds (Refer to the 'Individual' list provided at the end of the document) \_\_\_\_\_

Source of Wealth (Refer to the 'Individual' list provided at the end of the document) \_\_\_\_\_

# Company applicant *if applicable*

## Details

Full Name of Company as registered by ASIC

Full Trading Name/Business Name(s) (if any)

ACN (mandatory)

ABN (if any)

Borrower

Guarantor

Full address of the company's Registered Office, including country - (Not a Post Office box)

Date of Registration

 /  / 

State of Registration

Same as above

Full address of the company's Principal Place of Business, including country (if any) - (Not a Post Office box)

Postal Address

Phone Number

 (  ) 

Fax Number

 (  ) 

Industry

Business Contact Name

Phone Number

 (  ) 

Source of Funds (Refer to the non-individual list provided at the end of the document)

Source of Wealth (Refer to the non-individual list provided at the end of the document)

Company registered at ASIC as: (select one)

Aust. Pty Ltd Proprietary/Private)

Aust. Public

If **Proprietary/Private Company**, please provide:

Full Name of each Director of the Company. If more than 6, copy this page and provide the remaining as an attachment.

Number of Directors?

Full Name of Director (1)

Percentage Shareholding

Full Name of Director (2)

Percentage Shareholding

Full Name of Director (3)

Percentage Shareholding

Full Name of Director (4)

Percentage Shareholding

Full Name of Director (5)

Percentage Shareholding

Full Name of Director (6)

Percentage Shareholding

# Company applicant *if applicable*

**Details**  
*continued*

Provide the following details for all Beneficial Owners.

A Beneficial owner is any individual who owns 25% or more (directly or indirectly) or has control (directly or indirectly) of the company. Control includes the capacity to influence the way a company conducts its affairs through trusts, formal or informal agreements, arrangements, understandings and practices.

Number of Beneficial Owners?

Full Name (1)

Residential Address (1) - (Not a Post Office box)

Other Names commonly known as (if any) (1)

Date of Birth (1)

Full Name (2)

Residential Address (2) - (Not a Post Office box)

Other Names commonly known as (if any) (2)

Date of Birth (2)

Full Name (3)

Residential Address (3) - (Not a Post Office box)

Other Names commonly known as (if any) (3)

Date of Birth (3)

Full Name (4)

Residential Address (4) - (Not a Post Office box)

Other Names commonly known as (if any) (4)

Date of Birth (4)

# Trustee applicant *if applicable*

## Details

Please complete Applicant/Trustee details for ALL Individual Trustee(s)

Full Name of Trust

Full Trading Name/Business Name(s) (if any)

Full address of the Trust's Principal Place of Business - (Not a Post Office box)

Country in which Trust was established

ABN of Trust (mandatory for Regulated Trust)

Industry

Source of Funds (Refer to the non-individual list provided at the end of the document)

Source of Wealth (Refer to the non-individual list provided at the end of the document)

Type of Trust: (select one)

Standard Trust

Regulated Trust\*

Please provide the name of Trust Regulator

Government Superannuation Fund

Please provide, the name of legislation establishing the fund

Registered Managed Investment Scheme

Please provide Australian Registered Scheme Number (ARSN)

If **Standard Trust**, please provide:

Trust description (e.g. unit, testamentary, discretionary, family trust etc.)

Full Name of the Settlor of the Trust (required for Standard trusts excluding. testamentary trusts)

Number of Trust Beneficiaries?  if more than 4, copy this page and provide the remaining as an attachment.

Do the terms of the trust identify the Trust Beneficiaries by reference to membership class?

Yes, provide details of membership class:(e.g. unit holders, family members of a named person)"

AND/OR

No, please provide Full Name (given name/s and family name) for All Trust Beneficiaries

Full Name of Trust Beneficiary (1)

Full Name of Trust Beneficiary (2)

Full Name of Trust Beneficiary (3)

Full Name of Trust Beneficiary (4)

\*Any Trust that is regulated by government legislation, or a commonwealth government regulator, or managed investment scheme (regulated by ASIC or strictly wholesale).

# Trustee applicant *if applicable*

Details  
continued

## Provide the following details for all Beneficial Owners.

A Beneficial owner is any individual who has ownership (directly or indirectly) or has control (directly or indirectly) of the Trust. Control includes the capacity to influence the way in which the trust conducts its affairs, including by having the ability to determine decisions about the trust's financial and operating policies.

Full Name of Beneficial Owner 1

Residential Address - (Not a Post Office box)

Other Names commonly known as (if any)

Date of Birth

Full Name of Beneficial Owner 2

Residential Address - (Not a Post Office box)

Other Names commonly known as (if any)

Date of Birth

Full Name of Beneficial Owner 3

Residential Address - (Not a Post Office box)

Other Names commonly known as (if any)

Date of Birth

Full Name of Beneficial Owner 4

Residential Address - (Not a Post Office box)

Other Names commonly known as (if any)

Date of Birth

### If Trustee is a Company, please provide:

Full Name of Company as registered by ASIC)

Full Business Name/Trading Name of Company (if any)

ACN (mandatory)

ABN (if any)

Full address of the company's Registered Office, including country - (Not a Post Office box)

Date of Registration

State of Registration

Industry

Same as above

Full address of the company's Principal Place of Business, including country (if any) - (Not a Post Office box)

Company registered at ASIC as: (select one)

Aust. Pty Ltd (Proprietary/Private)  Aust. Public"

# Trustee applicant *if applicable*

**Details**  
*continued*

If **Proprietary/Private Company**, please provide:

Full Name of each Director of the Company. *if more than 4, copy this page and provide the remaining as an attachment.*

Number of Directors?

Full Name of Director (1)

Full Name of Director(2)

Full Name of Director (3)

Full Name of Director (4)

Provide the following details for all **Beneficial Owners**.

A Beneficial owner is any individual who owns 25% or more (directly or indirectly) or has control (directly or indirectly) of the company. Control includes the capacity to influence the way a company conducts its affairs through trusts, formal or informal agreements, arrangements, understandings and practices.

Number of Beneficial Owners?

Full Name (1)

Residential Address (1) - *(Not a Post Office box)*

Other Names commonly known as (if any) (1)

Date of Birth (1)

Full Name (2)

Residential Address (2) - *(Not a Post Office box)*

Other Names commonly known as (if any) (2)

Date of Birth (2)

Full Name (3)

Residential Address (3) - *(Not a Post Office box)*

Other Names commonly known as (if any) (3)

Date of Birth (3)

Full Name (4)

Residential Address (4) - *(Not a Post Office box)*

Other Names commonly known as (if any) (4)

Date of Birth (4)

## Other information

**Solicitor/  
Conveyancer**

Company name

Contact name

Company mailing address

State

Postcode

Phone number

Fax number

**Authority to  
forward loan  
documentation**

I authorise St. George Bank to forward all loan documentation including original and copies of my Loan Agreements and mortgage documentation (if applicable) to the party nominated.  
*If not selected, documentation will be issued to the borrowers.*

Solicitor *detailed above*    Broker *detailed below*    Other *detailed below*

Company name

Contact Name

Contact address

State

Postcode

**Builder  
if applicable**

Builder name

Licence number

Builder address

State

Postcode

Phone number

Fax number

**Nearest  
relative  
not living  
with you**

Name *for Applicant 1*

Phone number

Address *not a post office box*

State

Postcode

Name *for Applicant 2*

Phone number

Address *not a post office box*

State

Postcode

**Accountant  
details  
if self-employed/  
sub-contractor/  
investor**

Company name

Contact name

Phone number

Fax number

# Financial Position

## Assets What you own

If you wish to declare additional assets or liabilities, please complete an additional copy of this page. Tick both check boxes to indicate joint ownership of any item.

Item	Details	Value	Owner
Savings		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Property sale proceeds		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Asset sale proceeds		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Gift funds		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Deposit paid		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2

Owned property 1		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Owned property 2		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Owned property 3		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Motor vehicle 1		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Motor vehicle 2		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Home contents		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Super/Life policies		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Shares/Investments		\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2

Total assets \$

## Liabilities What you owe

Item	Details	Monthly payments	Debt to be repaid	Balance Owing	Borrower
Rent			<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Child Maintenance/Alimony			<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Home loan 1 <i>mortgagee &amp; acc. #</i>			<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Home loan 2 <i>mortgagee &amp; acc. #</i>			<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Home loan 3 <i>mortgagee &amp; acc. #</i>			<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Other loans*			<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Other debts~		<i>Card limit</i>	<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Credit card 1		<i>Card limit</i>	<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Credit card 2		<i>Card limit</i>	<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Credit card 3		<i>Card limit</i>	<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2
Store cards			<input type="checkbox"/> Yes	\$	<input type="checkbox"/> App 1 <input type="checkbox"/> App 2

\*Includes Personal loan, vehicle leases, overdrafts, Hire Purchase, Interest free purchase etc

Total liabilities \$

~Includes Tax liability, HECS, HELP etc

## Expenses

My Monthly Expenses (money you spend - do not include loan repayments)

\$ per month

Absolute Basic Expenses (eg groceries, transport, petrol, utilities, rates, clothing)	\$
Education Expenses	\$
Childcare Fees	\$
Insurance (including car, CTP, building, contents, health, income protection)	\$
Mobile Phone / Internet / Pay TV	\$
Other (eg holidays, entertainment, gym membership, cleaning or gardening services)	\$

**Funds position**

Purchase price (house/unit/land)	\$	Loan Amount	\$
Tender/Contract	\$	Own funds	\$
Discharge of Debts*	\$	Deposit Paid	\$
Bank Fees	\$	Net Proceeds	\$
Govt. Fees	\$	Gift	\$
Lenders Mortgage Insurance	\$	Sale of Asset	\$
Insurance	\$	Other borrowing	\$
Legal	\$	First Home Owner Grant	\$
Other (Misc)	\$		\$

\*Important: As you are refinancing an existing loan, you must consider the costs of doing this including any exit and break costs. It is important you take this into account when applying for your loan(s).

Total costs (A) \$

Total available (B) \$

Loan required A-B \$

**Change in Financial Situation**

Significant Changes - App 1

Do you expect any significant change to your financial situation over the next 3 years that would ADVERSELY impact your ability to meet your loan repayments?

Yes     No

If yes, what is the nature of the expected change (select one)?

Temporary decrease in disposable income.  
 Permanent decrease in disposable income.  
 Anticipated large expenditure.

Please specify (one) nature of expected change such as maternity leave, loss of employment, reduced working hours, retirement, full time study, carer responsibilities, medical treatment or end of interest free period:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How will you continue to make payments (select one)?

Using savings  
 Securing additional income  
 My application reflects these changes  
 Reducing expenditure  
 Sale of asset

Significant Changes - App 2

Do you expect any significant change to your financial situation over the next 3 years that would ADVERSELY impact your ability to meet your loan repayments?

Yes     No

If yes, what is the nature of the expected change (select one)?

Temporary decrease in disposable income.  
 Permanent decrease in disposable income.  
 Anticipated large expenditure.

Please specify (one) nature of expected change such as maternity leave, loss of employment, reduced working hours, retirement, full time study, carer responsibilities, medical treatment or end of interest free period:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How will you continue to make payments (select one)?

Using savings  
 Securing additional income  
 My application reflects these changes  
 Reducing expenditure  
 Sale of asset

# Security details

Property 1

Address *include state and postcode*

Unit, Floor and Location *relative to street front*

Type of property

 House  Unit  Land

Year built *approx.*

Living area  
m<sup>2</sup>

Land  
m<sup>2</sup>

No. of living rooms

No. of bedrooms

No. of bathrooms

Construction type

 Brick  Brick veneer  Other

Lot and D.P No.

Car accommodation

 Single garage  Double garage  Other

Other features

 Ducted air conditioning  Inground pool

Other details including size, date and cost *e.g. renovations, granny flats, guest house, pergola, etc.*

Property value

 Purchase price  
 Est. market value

Land value

 Purchase price  
 Est. market value

Construction price

Contact name of vendor or real estate agent *for valuer access*

Phone number

Type of title

 RPA/Torrens  Strata title  Company title  Community title

Other

Mortgagee name

Full name(s) to appear on title after settlement

I will live in this property immediately after settlement

Residential postcode after settlement

(App1)

Family pledge guarantee amount if family pledge is required

Detail any environmental contamination affecting the security of property or neighbouring properties

Property 2

Address *include state and postcode*

Unit, Floor and Location *relative to street front*

Type of property

 House  Unit  Land

Year built *approx.*

Living area  
m<sup>2</sup>

Land  
m<sup>2</sup>

No. of living rooms

No. of bedrooms

No. of bathrooms

Construction type

 Brick  Brick veneer  Other

Lot and D.P No.

Car accommodation

 Single garage  Double garage  Other

Other features

 Ducted air conditioning  Inground pool

Other details including size, date and cost *e.g. renovations, granny flats, guest house, pergola, etc.*

Property value

 Purchase price  
 Est. market value

Land value

 Purchase price  
 Est. market value

Construction price

Contact name of vendor or real estate agent *for valuer access*

Phone number

Type of title

 RPA/Torrens  Strata title  Company title  Community title

Other

Mortgagee name

Full name(s) to appear on title after settlement

I will live in this property immediately after settlement

Residential postcode after settlement

(App1)

Family pledge guarantee amount if family pledge is required

Detail any environmental contamination affecting the security of property or neighbouring properties



**Product**

Vertigo Visa

Minimum credit limit is \$500

Vertigo Platinum Visa

Minimum credit limit is \$6,000

Amplify Visa

Minimum credit limit is \$1,000

Amplify Platinum Visa

Minimum credit limit is \$6,000

Amplify Signature Visa

Minimum credit limit is \$15,000

**Please select the Amplify reward program to be linked to your Amplify card account:**

Amplify Rewards

Amplify Qantas

Please provide details of your Qantas Frequent Flyer membership account\* to which you would like us to transfer all Qantas Points earned:

Qantas Frequent Flyer Membership number

Name as appearing on the Qantas Frequent Flyer Membership card:

First Initial Surname

\*You must be a Qantas Frequent Flyer program member to earn and redeem Qantas Points and your Qantas Frequent Flyer number must be linked to your Amplify account. Qantas Points will be automatically credited to your Qantas Frequent Flyer account each month. Membership is subject to the Qantas Frequent Flyer program terms and conditions, available at [qantas.com/frequentflyer](http://qantas.com/frequentflyer).

If you are not a Qantas Frequent Flyer member, once your card is approved, you will receive an invitation (one per new account) to join Qantas Frequent Flyer program. For a limited time, St.George will waive your membership fee. When you receive your Qantas Frequent Flyer number, please advise St.George so you can earn Qantas Points on eligible purchases made with your Amplify card. Joint account holders may only nominate one Qantas Frequent Flyer account to receive Qantas Points earned on the card account. For further information, Amplify & Amplify Platinum cardholders can call us on 1300 489 586 and Amplify Signature cardholders can call us on 1300 851 324.

I/We would like to apply for:

- The maximum credit limit available to me based on my application details  (tick here to select this option).

OR

- A credit limit up to a maximum of \$ (insert an amount to select this).  
(multiples of \$100, minimum card limits apply).

If you are not eligible for the maximum amount requested you may be offered a lower limit.

Where would you like your card(s) sent? Nominated branch *if card is not to be sent to home address*

Home  St.George branch

**Office/Bank  
use only**

Lender/Originator name

Employee number

Branch number





# Privacy Statement

## Personal Information

We collect personal information from you to process your application, provide you with your product or service, and manage your product or service. We may also use your information to comply with legislative or regulatory requirements in any jurisdiction, prevent fraud, crime or other activity that may cause harm in relation to our products or services and help us run our business. We may also use your information to tell you about products or services we think may interest you.

If you do not provide all the information we request, we may need to reject your application or we may no longer be able to provide a product or service to you.

If you are a proposed guarantor, we collect your personal information in order to assess you as a guarantor, take a guarantee from you and administer that guarantee from you and administer that guarantee. If you do not provide all the information we request, we may be unable to accept you as a guarantor.

We may disclose your personal information to other members of the Westpac Group, anyone we engage to do something on our behalf, rewards program administrators and other organisations that assist us with our business.

We may disclose your personal information to an entity which is located outside Australia. Details of the countries where the overseas recipients are likely to be located are in our privacy policy.

As a provider of financial services, we have obligations to disclose some personal information to government agencies and regulators in Australia, and in some cases offshore. We are not able to ensure that foreign government agencies or regulators will comply with Australian privacy laws, although they may have their own privacy laws. By using our products or services, you consent to these disclosures.

We are required or authorised to collect personal information from you by certain laws. Details of these laws are in our privacy policy.

Our privacy policy is available at [stgeorge.com.au](http://stgeorge.com.au) or by calling 13 33 30. It covers:

- how you can access the personal information we hold about you and ask for it to be corrected;
- how you may complain about a breach of the Australian Privacy Principles or a registered privacy code and how we will deal with your complaint;
- how we collect, hold, use and disclose your personal information in more detail.

We will update our privacy policy from time to time.

## Credit Information

We may:

- obtain consumer credit information about you from a credit reporting body to enable us to assess your creditworthiness;
- obtain information about your commercial activities or commercial creditworthiness from a business which provides information about the commercial creditworthiness;
- exchange personal information and credit information about you with other credit providers to assess your application and creditworthiness and to notify them of any defaults by you;
- give or obtain a banker's opinion about you.

The privacy page of our website [stgeorge.com.au](http://stgeorge.com.au) includes a "Statement of Notifiable Matters". These are matters you should be aware of in relation to the use and disclosure of your credit information. This statement includes:

- details of the credit reporting bodies to which we are likely to disclose your credit information, the types of credit information we may give them and how this information will be used;
- your rights over your credit information, including how you can access and correct your information and make complaints;
- your rights to direct a credit reporting body to limit the use of your information for direct marketing purposes and what protections are available if you believe you are a victim of fraud; and
- information about our Credit Reporting Policy.

You can call us on 13 33 30 or visit us in branch for a hard copy of the Statement of Notifiable Matters.

## Other acknowledgments and consents

- We may confirm the details of the information provided in this application.
- Where you have provided information about another individual, you must make them aware of that fact and the contents of the Privacy Statement.
- This application is not an offer or acceptance of credit.

We will use your personal information to contact you or send you information about other products and services offered by the Westpac Group or its preferred suppliers. Please call us on 13 33 30 or visit any of our branches if you do not wish to receive marketing communications from us.

# Privacy Statement continued

## Our reporting obligations

We are required to identify certain US persons in order to meet account information reporting requirements under local and international laws.

If you or (where you are applying on behalf of an entity) the entity and/or any office bearer\* of the entity and/or any individual who holds an interest in the entity of more than 25% (a Controlling Person) are a US citizen or US tax resident, you must telephone 1300 663 738 at the time of completing this application. When you contact us you will be asked to provide additional information about your US tax status and/or the US tax status of the entity and/or any Controlling Person which will constitute certification of US tax status for the purposes of this application.

Unless you notify us that you or (where you are applying on behalf of an entity) the entity and/or any Controlling Person are a US citizen or US tax resident as specified above, by completing this application you certify that you or (where you are applying on behalf of an entity) the entity and/or any Controlling Person are not a US citizen or US tax resident.

If at any time after account opening, information in our possession suggests that you, the entity and/or any Controlling Person may be a US citizen or US tax resident, you may be contacted to provide further information on your US tax status and/or the US tax status of the entity and/or any Controlling Person. Failure to respond may lead to certain reporting requirements applying to the account.

\*Director of a company, partner in a partnership, trustee of a trust, chairman, secretary or treasurer of an association or co-operative.

## Definitions

'We', 'our', 'us' means St George Bank - A Division of Westpac Banking Corporation ABN 33 007 457 141. 'Westpac Group' means Westpac Banking Corporation and its related bodies corporate.

## Important information about our products and services

### Optional

We will use your personal information to contact you or send you information about other products and services offered by the Westpac Group or its preferred suppliers.

Please tick this box if you do not wish to receive marketing communications from us.

## Nomination

### Nominate a person to receive important information

Each borrower is entitled to receive a copy of notices and other documents under the National Credit Code. By signing this nomination you are giving up the right to be provided with this information direct from us. You may cancel this nomination at any time by advising us in writing.

I nominate \_\_\_\_\_ to receive any notices, and other documents under the National Credit Code on behalf of me for the following facility:

Standard Loan  Credit Card *for portfolio loans, please complete a loan nomination form*

#### Borrower 1

X

Sign here

Full name

\_\_\_\_\_

Date

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

#### Borrower 2

X

Sign here

Full name

\_\_\_\_\_

Date

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

# Business purpose declaration

I/We declare that the credit to be provided to me/us by the credit provider is to be applied wholly or predominantly for:

- business purposes; or
- investment purposes other than investment in residential property.

## IMPORTANT

You should **only** sign this declaration if this loan is wholly or predominantly for:

- business purposes; or
- investment purposes other than investment in residential property.

By signing this declaration you may **lose** your protection under the National Credit Code.

Borrower 1

X

Sign here

Full name

Date

Borrower 2

X

Sign here

Full name

Date

## Declaration

Please take care to ensure all information you give us in this application is correct.

I declare that:

- the information in this application and the financial information supporting it are in all respects correct and complete to the best of my knowledge and belief. I acknowledge that the Bank will rely on this information in deciding whether to lend to me;
- (if an applicant) the product and product options of the loan requested, and any additional products (as shown on page 10 of this application) have been described to me in detail to my satisfaction by a Bank representative and I feel comfortable with the loan/facilities/options for which I apply; and
- I have read and understood the Privacy Statement in this form and I consent to the collection, use and disclosure of personal information in accordance with the Privacy Statement;
- where I have provided information about another individual (for example, a relative), I declare that the individual has been made aware of that fact and the contents of this Privacy Statement;
- I acknowledge that any establishment fees paid in connection with this application, will not be refunded if the loan does not proceed for any reason;
- where I have completed details for the Advantage Package on this application, that I am signing according to the authority to operate held on the Nominated Transaction account from which the payments of the non-refundable Annual Package Fee are to be deducted;
- where I have completed details for the Authority for Automatic Transfer on pages 12-14 of this application, I am signing according to the authority to operate held on the Nominated Transaction account from which repayments are to be deducted;
- where the payment method is to be by Automatic Transfer from another Financial Institution, I have received a Direct Debit Request Service Agreement;
- I acknowledge that the Bank has the right to confirm the details of the information provided in this application;
- I acknowledge that this application form is not to be regarded as an offer or acceptance of credit under any law, or form part of any credit contract that may come into existence between the Bank and me;
- that I understand that only the Bank can decide whether my application is approved and that the person who may have introduced me to the Bank has no authority to give that approval;
- I consent to the Bank giving any guarantor or indemnitor all information, including credit reports and copies of reports as the Bank sees fit, as provided in this Privacy Statement as required under the Code of Banking Practice.
- where I am a personal or sole trader applicant, I acknowledge that I am acting on my own behalf.

# Personal applicant

Each applicant must sign and date this section.

<p><b>Applicant 1</b></p> <p><b>X</b> .....</p> <p>Sign here</p> <p>Full name _____ Date ____ / ____ / ____</p>	<p><b>Applicant 2</b></p> <p><b>X</b> .....</p> <p>Sign here</p> <p>Full name _____ Date ____ / ____ / ____</p>
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## Company details Name/ACN/ABN

### Company details

Name

\_\_\_\_\_

ACN/ABN

\_\_\_\_\_

### Signed in accordance with Section 127(1) of the Corporations Law

*(if only one person signs, that person states that he/she signs in the capacity of sole Director and sole Secretary of the Company)*

**Authorised person** *must be a Director or Secretary*

**X** .....

Sign here

Name \_\_\_\_\_

Position \_\_\_\_\_

**Authorised person** *must be a Director or Secretary*

**X** .....

Sign here

Name \_\_\_\_\_

Position \_\_\_\_\_

#### Source of Funds (Individual)

- Salary/Wages
- Commission
- Bonus
- Business income/earnings
- Business profits
- Investment income/earnings
- Rental income
- Superannuation/pension
- Loan
- Insurance payment
- Compensation payment
- Government benefits
- Sale of assets
- Liquidation of assets
- Redundancy
- Inheritance
- Gift/Donation
- Windfall
- Tax refund
- Additional Sources

#### Source of Funds (Non-Individual)

- Commission
- Bonus
- Business income/earnings
- Business profits
- Investment income/earnings
- Corporate investments earnings
- Rental income
- Loan
- Ext investment/Capital Injection
- Insurance payment
- Compensation payment
- Government grant
- Sale of assets
- Liquidation of assets
- Mergers & Acquisitions
- Controlled money account
- Gift/Donation
- Tax refund
- Additional Sources

#### Source of Wealth (Individual)

- Employment income/earnings
- Redundancy
- Business income/earnings
- Business profits
- Investment income/earnings
- Rental income
- Superannuation/pension
- Insurance payment
- Compensation payment
- Government benefits
- Owns real estate/property
- Sale of assets
- Liquidation of assets
- Inheritance
- Gift/Donation
- Windfall
- None
- Refused to answer
- Additional Sources

#### Source of Wealth (Non-Individual)

- Business income/earnings
- Business profits
- Investment income/earnings
- Corporate investments earnings
- Rental income
- Insurance payment
- Compensation payment
- Owns real estate/property
- Sale of assets
- Liquidation of assets
- Mergers & Acquisitions
- Controlled money account
- Gift/Donation
- None
- Refused to answer
- Additional Sources