

Commercial Loan Application

What is this form used for?

This form contains all the necessary application information required by us to fully understand your applicants business. This form is divided into 3 parts. Each part of the application has its own specific purpose.

Part A is for you to inform us about your applicants business.

Part B is to provide us with the details of all Owner(s)/Director(s)/Partner(s).

Part C is to provide us with personal financial details of all Owner(s)/Director(s)/Partner(s). It is important to note that if applicants share their personal assets and liabilities with another Owner/Director/Partner in this application, then applicants must jointly complete Part C. In all other cases, each Owner/Director/Partner is required to individually complete a separate Part C.

What you need to provide with this application?

You **must** provide the following documentation to support your applicant's application for business credit:

- Copies of business financial statements, not more than 20 months old, including the Balance Sheet, Profit and Loss statement and any notes to the accounts.
- The Personal Income Tax Assessment Notice from the same financial year as the business financial statements or a copy of a recent payslip for all individuals noted in this application.
- Copies of bank/loan/credit card/store card statements for all non-Commonwealth Bank accounts:
 - for the last 12 months, if refinancing from another lender; or
 - for the last 3 months, if refinance from another lender is not involved.
- Completed original 'Client Disclosure and Acknowledgement' form.

To be completed by Nominee

Nominee number Nominee name (Nominee name must correspond with specified Nominee number)

Business Intermediary name

Business address

Business phone number Business fax number Mobile number

Email

Nominee Disclosure

I confirm all applicable requirements have been satisfied, including but not limited to the sighting of original documentation for all savings, income, financial details and that I am not a related party to the client(s) or transaction.

Nominee signature Date

Commercial Loan Application Business Details

About your business

1 Please provide us with the names of the Owners/Directors/Partners in your business

Surname

Given name/s

Surname

Given name/s

Surname

Given name/s

Surname

Given name/s

2 Details of the primary contact person for this application

Name

Contact number

3 Is the business entity a ...

Company Please provide us with your company name

Partnership

Sole Trader

4 Please provide us with the trading name of your business

5 Is there a trust involved in your business?

No

Yes Are the proposed borrowings to be in this trust name?

No

Yes Please provide us with the trust name

6 Does your business have an ...

ACN/ARBN? No

Yes Please provide us with the ACN/ARBN

ABN? No

Yes Please provide us with the ABN

7 Are you a Commonwealth Bank business customer?

No Who do you do your business banking with?

The length of time with this financial institution...

Yrs

mths

Yes Please provide us with your business account details

BSB

Account number

8 What is the principal activity of your business?

9 Please provide us with details about your business

When was your business established?

nth/

yr

Number of full time employees (or equivalent)

Are your business premises...

owned

leased

home office

other, please specify

10 Your business address

Postcode

11 Your business postal address (if same as Q10, write 'As above')

Postcode

About this loan application (all amounts to nearest dollar)

12 What is the purpose and amount of loan you wish to apply for?

Purpose of loan	Details of loan	
<input type="checkbox"/> Purchase of business	Amount requested	\$
	Purchase price	\$
	Deposit paid	\$
	Type of business	
<input type="checkbox"/> Purchase of property	Amount requested	\$
	Purchase price	\$
	Deposit paid	\$
	Address of property	
Is the premises for...		Owner occupied <input type="checkbox"/> Investment <input type="checkbox"/> Please provide the estimate monthly rental income \$
<input type="checkbox"/> Refinancing of existing borrowings	Amount requested	\$
<input type="checkbox"/> Purchase of vehicle or equipment	Is purchase:	<input type="checkbox"/> Hire Purchase <input type="checkbox"/> Lease <input type="checkbox"/> Other
	Amount requested	\$
	Trade in/Deposit paid	\$
	Are goods...	<input type="checkbox"/> New <input type="checkbox"/> Used
	Description of goods/equipment (i.e. Make/Model/Year of manufacture)	
Name of supplier		
<input type="checkbox"/> Guarantee	Amount requested	\$
	Who is the guarantee in favour of?	
<input type="checkbox"/> Other	Amount requested	\$
	Please specify details	

About this loan application (continued) (all amounts to nearest dollar)

13 What security will you be offering for the loan/s requested in Q12?

Real estate

▶ Go to Q14

Cash deposits/investment (e.g. term deposits)

Please provide us with details

Type	Held with?	Amount
	<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other	\$
	<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other	\$
	<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other	\$
	<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other	\$

▶ Go to Q15

Other

Please provide us with details

▶ Go to Q15

No security to be offered

▶ Go to Q15

14 Please provide details of real estate offered for security

Details of real estate

Real estate 1

Real estate 2

Estimated market value	\$		\$
Owner's name/s			
Address of real estate			
Is there a mortgage currently over the real estate?	No <input type="checkbox"/> Yes <input type="checkbox"/> Who with? <input type="text"/> Amount \$ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Who with? <input type="text"/> Amount \$ <input type="text"/>	
Type of real estate	Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Rural <input type="checkbox"/>	Is this vacant land? <input type="checkbox"/> Yes <input type="checkbox"/> No	Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Rural <input type="checkbox"/> Is this vacant land? <input type="checkbox"/> Yes <input type="checkbox"/> No

Your existing business facilities

15 Do you have any existing **business** facilities with the Commonwealth Bank or another financial institution?

No Go to Q16

Yes Please provide us with details of your existing business facilities

Held with?	Type of facility	Current limit	Current balance	Monthly repayment	Facility to be repaid by this credit request?
<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Total			\$ <input type="text"/>	\$ <input type="text"/>	

Accountant details

16 Do you have an accountant?

No

Yes We may need to contact your accountant to confirm your financial details

Name of company		
Contact name		
Telephone		
Facsimile		
Postal address		
		Postcode

Please attach the following items to this application:

- a most recent two full financial years financial statements.
- b most recent two full financial years tax return for each Owner/Director/Partner.
- c most recent payslip for each Owner/Director/Partner independently employed.

Note The most recent full financial years financial statements and tax returns must be from the same financial year.

Director(s)/Owner(s)/Partner(s) Declaration

I/We apply for consideration of a loan and certify that the foregoing information/statements are complete, accurate and up-to-date in every detail.

I/We acknowledge that this application is not a legally binding contract to lend and any contractual obligation in respect of any financial undertaking will be set out in subsequent documents.

Name and signature of Director(s)/Owner(s)/Partner(s) giving his/her consent.

Signature of Director/Owner/Partner	Date	Signature of Director/Owner/Partner	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname of Director/Owner/Partner		Surname of Director/Owner/Partner	
<input type="text"/>		<input type="text"/>	
Given name/s of Director/Owner/Partner		Given name/s of Director/Owner/Partner	
<input type="text"/>		<input type="text"/>	
Signature of Nominee as Witness		Signature of Nominee as Witness	
<input type="text"/>		<input type="text"/>	
Signature of Director/Owner/Partner	Date	Signature of Director/Owner/Partner	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname of Director/Owner/Partner		Surname of Director/Owner/Partner	
<input type="text"/>		<input type="text"/>	
Given name/s of Director/Owner/Partner		Given name/s of Director/Owner/Partner	
<input type="text"/>		<input type="text"/>	
Signature of Nominee as Witness		Signature of Nominee as Witness	
<input type="text"/>		<input type="text"/>	

Commercial Loan Application Personal Details (Part B)

Personal details of Owner(s)/Director(s)/Partner(s)

1 Please provide us with your personal details

Owner/Director/Partner 1

Mr Mrs Miss Ms Other

Given name/s

Surname

Date of birth

Marital status

Married Single

De facto Other

Gender

Female Male

Driver's licence number

Number of dependants

Age/s of dependant/s

Owner/Director/Partner 2

Mr Mrs Miss Ms Other

Given name/s

Surname

Date of birth

Marital status

Married Single

De facto Other

Gender

Female Male

Driver's licence number

Number of dependants

Age/s of dependant/s

2 Details where we may contact you

Work phone number

Home phone number

Mobile number

Email address

Work phone number

Home phone number

Mobile number

Email address

3 What is your current residential address?

Postcode

The length of time at your current residential address

 yrs/ mths

Postcode

The length of time at your current residential address

 yrs/ mths

4 Have you lived at the above address for 2 years or more?

Yes Go to Q5

No What was your previous residential address?

Postcode

The length of time at your previous residential address

 yrs/ mths

Yes Go to Q5

No What was your previous residential address?

Postcode

The length of time at your previous residential address

 yrs/ mths

Owner/Director/Partner 1

Owner/Director/Partner 2

5 Are you living ...

- in a rented accommodation
- in a home you are buying or own
- as a boarder
- in other type of accommodation, please specify below

- in a rented accommodation
- in a home you are buying or own
- as a boarder
- in other type of accommodation, please specify below

6 How long have you been managing your current business?

 yrs/ mths yrs/ mths

7 Have you been managing your current business for less than 3 years?

- No Go to Q8
 Yes Please provide us with your previous occupation/situation

How long were you in this previous occupation or situation?

 yrs/ mths

- No Go to Q8
 Yes Please provide us with your previous occupation/situation

How long were you in this previous occupation or situation?

 yrs/ mths

8 Do you have any **personal** accounts with the Commonwealth Bank?

- No Who do you do your personal banking with?

The length of time with this financial institution.

 yrs/ mths

- Yes Please provide us with your **personal** account details

BSB

Account number

- No Who do you do your personal banking with?

The length of time with this financial institution.

 yrs/ mths

- Yes Please provide us with your **personal** account details

BSB

Account number

9 Have you ever been

bankrupt? Yes No
 a Director of a company that has been in liquidation or receivership? Yes No

I certify the above information is correct.

Signature of Owner/Director/Partner 1

Date

Signature of Nominee as Witness

bankrupt? Yes No
 a Director of a company that has been in liquidation or receivership? Yes No

I certify the above information is correct.

Signature of Owner/Director/Partner 2

Date

Signature of Owner/Director/Partner 1

Commercial Loan Application Financial Details (Part C)

About the Owner(s)/Director(s)/Partner(s) personal financial details (all amounts to nearest dollar)

Important Notes

If your personal assets/liabilities are shared with another Owner/Director/Partner in this application (for example husband and wife, or in a de facto relationship), please **jointly** complete only one set of personal financial details below.

In all other cases, each Owner/Director/Partner is required to individually complete a separate financial details section.

1 Name(s) of Owner(s)/ Director(s)/Partner(s) involved

2 Please provide us with details of your gross annual income	Type of income	Gross annual amount
	<input type="checkbox"/> Salary (including bonus, etc)	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Spouse/Partner's salary	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Rental income	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Drawings from business/dividend	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Pension/Family allowance	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Other	\$ <input style="width: 100px;" type="text"/>
	Total	\$ <input style="width: 100px;" type="text"/>

3 Please provide us with details of your personal assets and investments	Type of asset/investment	Estimated value	
	Cash/Deposits	\$ <input style="width: 100px;" type="text"/>	
	Own home	\$ <input style="width: 100px;" type="text"/>	
	Investment property	\$ <input style="width: 100px;" type="text"/>	
	Investments (e.g. shares, etc)	\$ <input style="width: 100px;" type="text"/>	
	Superannuation	\$ <input style="width: 100px;" type="text"/>	
	Other (e.g. boat, motor vehicle)	\$ <input style="width: 100px;" type="text"/>	<input style="width: 150px;" type="text" value="Specify type"/>
	Total Asset/Investment	\$ <input style="width: 100px;" type="text"/>	

4 Please provide us with details of your existing personal borrowings	Type of credit	Held with?	Credit limit	Balance	Monthly Repayment Amount
	<input type="checkbox"/> Home loan	<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other		\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Home loan	<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other		\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Home loan	<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other		\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Home loan	<input type="checkbox"/> Commonwealth Bank <input type="checkbox"/> Other	\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Store card	Specify <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>
	<input type="checkbox"/> Other	Specify <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>
	Total			\$ <input style="width: 100px;" type="text"/>	\$ <input style="width: 100px;" type="text"/>

I certify the above information is correct.

Signature of Owner/Director/Partner

Date

Signature of Nominee as Witness

I certify the above information is correct.

Signature of Owner/Director/Partner

Date

Signature of Nominee as Witness

Commercial Loan Application Financial Details (Part C)

About the Owner(s)/Director(s)/Partner(s) personal financial details (all amounts to nearest dollar)

Important Notes

If your personal assets/liabilities are shared with another Owner/Director/Partner in this application (for example husband and wife, or in a de facto relationship), please **jointly** complete only one set of personal financial details below.

In all other cases, each Owner/Director/Partner is required to individually complete a separate financial details section.

1 Name(s) of Owner(s)/ Director(s)/Partner(s) involved

2 Please provide us with details of your gross annual income		Type of income	Gross annual amount
<input type="checkbox"/>	Salary (including bonus, etc)		\$
<input type="checkbox"/>	Spouse/Partner's salary		\$
<input type="checkbox"/>	Rental income		\$
<input type="checkbox"/>	Drawings from business/dividend		\$
<input type="checkbox"/>	Pension/Family allowance		\$
<input type="checkbox"/>	Other		\$
Total			\$

3 Please provide us with details of your personal assets and investments		Type of asset/investment	Estimated value
	Cash/Deposits		\$
	Own home		\$
	Investment property		\$
	Investments (e.g. shares, etc)		\$
	Superannuation		\$
	Other (e.g. boat, motor vehicle)		\$
Total Asset/Investment			\$

Specify type

4 Please provide us with details of your existing personal borrowings		Type of credit	Held with?	Credit limit	Balance	Monthly Repayment Amount
<input type="checkbox"/>	Home loan	<input type="checkbox"/> Commonwealth Bank	<input type="checkbox"/> Other		\$	\$
<input type="checkbox"/>	Home loan	<input type="checkbox"/> Commonwealth Bank	<input type="checkbox"/> Other		\$	\$
<input type="checkbox"/>	Home loan	<input type="checkbox"/> Commonwealth Bank	<input type="checkbox"/> Other		\$	\$
<input type="checkbox"/>	Home loan	<input type="checkbox"/> Commonwealth Bank	<input type="checkbox"/> Other	\$	\$	\$
<input type="checkbox"/>	Store card	Specify <input type="text"/>		\$	\$	\$
<input type="checkbox"/>	Other	Specify <input type="text"/>		\$	\$	\$
Total					\$	\$

I certify the above information is correct.
Signature of Owner/Director/Partner

Date

Signature of Nominee as Witness

I certify the above information is correct.
Signature of Owner/Director/Partner

Date

Signature of Nominee as Witness