

APPLICATION CHECKLIST AND SUMMARY



PO Box 4295, Shortland Street
 Auckland 1140, New Zealand
 Enquiries 0800 003 391
 Telephone 09 580 0989
 Facsimile 09 580 0969
 www.libfin.co.nz

To: Liberty Financial – Underwriting Team
Fax number: (0800) 388 188
From:
Company:
Phone: **Facsimile:**
Sent on behalf of: **Date & pages:**

APPLICATION CHECKLIST & NOTES

Application checklist (as applicable)	<input type="checkbox"/> Latest months bank statements	<input type="checkbox"/> Declarations completed and signed	<input type="checkbox"/> Brokerage authority
	<input type="checkbox"/> 6 months refinance statements	<input type="checkbox"/> Legible Passport or Drivers license	<input type="checkbox"/> Contract of sale
	<input type="checkbox"/> Work and Income statements	<input type="checkbox"/> Most recent payslips	<input type="checkbox"/> Tax returns
Special notes (explain if checklist is incomplete)			
Solicitor name			
Phone/Fax	Company name		

VALUATION PAYMENT METHOD (Select one method - minimum \$475 per security)

Credit card	<input type="checkbox"/> Visa	No: Amount: \$ Exp: / Name: Signature:	Direct deposit	Bank: BNZ, Auckland
	<input type="checkbox"/> MasterCard			BSB: 02-0108 Acct No: 0154343 00
	Bank: Branch: Deposit amount: \$ Deposit date:			
			Cheque	Payable to: Secure Funding Limited
			Arrange valuation	<input type="checkbox"/> On further instruction <input type="checkbox"/> On conditional approval <input type="checkbox"/> Now

APPLICATION OVERVIEW

Loan amount		<input type="checkbox"/> Private (Fixed IO	<input type="checkbox"/> Star (variable)	<input type="checkbox"/> Nova (variable)
Security value		6 month periods)	<input type="checkbox"/> P&I; or	<input type="checkbox"/> P&I; or
Loan purpose	<input type="checkbox"/> Purchase	<input type="checkbox"/> Prepaid interest	<input type="checkbox"/> IO for	<input type="checkbox"/> IO for
	<input type="checkbox"/> Refinance		for first 6 months	Loan term
	<input type="checkbox"/> Other	Finance date:		Settlement date: