

## Debt Freedom

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### 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 counselor will advise all credit providers and all registered credit bureaus that you have applied for debt review;
2. You will be listed with all registered credit bureaus that you have applied for debt review;
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 Counselor, your application will not be accepted.

Full names and surname

Identity number Physical

Address

Postal Code

Postal Address

Postal Code

Telephone number (work) (  )  Telephone number (home) (  )

Cell phone number (  )

E-mail address (if any)

Name of employer

Address of employer



**PART 2 – Income**

**(Please attach a copy of your salary slip)**

Gross salary	R
<b>Deductions</b>	
Tax	R
Medical Aid	R
Pension	R
Other deductions	
<input type="text"/>	R
<input type="text"/>	R
<input type="text"/>	R
<input type="text"/>	R
<b>Total Deductions</b>	<b>R</b>
<b>Other income (specify the source)</b>	
<input type="text"/>	R
<input type="text"/>	R
<input type="text"/>	R
<input type="text"/>	R
<b>Total income</b>	<b>R</b>

**PART 3 – Monthly Commitments**

(Please list all monthly commitments other than outstanding debt, i.e. school fees, traveling costs, medical expenses, etc)

<b>Commitment</b>	<b>Monthly expense</b>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

**PART 4 – Debt Obligations**

(Please provide copies of all outstanding balances due)

Debt Commitment (i.e. personal loan)	Name of creditor	Total amount outstanding	Monthly Commitment

**PART 5 – Declaration by the Consumer**

I declare as follows:

1. I undertake to comply with all requests from the debt counselor to assist him/her to evaluate my state of indebtedness and the prospects for responsible debt restructuring;
2. I hereby consent to the submission of my information to all registered credit bureaus by the debt counselor;
3. I also consent that the debt counselor may obtain my credit record from any/all registered credit bureaus and any other registers which may contain any of my credit information;
4. 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 has occurred:
  - a. The debt counselor rejects my application;
  - b. The court determines that I am not over-indebted; or
  - c. All my obligations under credit agreements as re-arranged are fulfilled
5. I confirm that the information contained in this document is, to the best of my knowledge, true and correct.

Signed at [place]  on this [day]  of [month]  of [year]

Signature