

No More Debt - Application for Debt Review



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NCRDC2018

HAVE YOU PREVIOUSLY BEEN ON OR ARE YOU ON DEBT REVIEW?	YES	NO
IF SO, PLEASE ATTACH YOUR FORM 17.4 FOR A SUCCESSFUL TRANSFER		

Application Details	Applicant	Spouse / Co-Applicant
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Title:									
Full Names:									
Surname:									
Maiden Name:									
Birth Date:									
ID Number:									
Race:									
Gender:		Male		Female		Male		Female	
Marital Status:	Single		Widow		Divorced				
	Married (In Community of Property)								
	Married (With Antenuptial Contract)								
Residential Address:									
	Postal Code:				Postal Code:				
Postal Address:									
	Postal Code:				Postal Code:				
Residential Ownership:	Owner/Tenant:				Owner/Tenant:				
Period at Address:									
Email:									
Home Number:									
Work Number:									
Cell Number:									
Fax Number:									

Number Of Dependants:					
Dependant Name	Dependant Age	Relationship	Dependant Sex	Dependant ID	Dependant School

New Banking Details:	
Bank Name:	
Branch Name:	
Account Holder Name:	
Account Number:	
Branch Code:	
Account Type:	

Employer:			
Job Description:			
Pay / Employee No:			
Employers Street Address:			
	Postal Code:		Postal Code:
Engagement Date:			
PAY Office Contact:	Tel:	Name:	Tel: Name:

Income	Applicant	Spouse / Co-Applicant	Remarks / Other Info
Gross Salary (Monthly):			Attach a copy of payslip
Overtime:			Average over 6 months
Other Income:			Reason:
Other Income:			Reason:
Other Income:			Reason:
Other Income:			Reason:
Other Income:			Reason:
Total Income:			
Joint Monthly Income:			

Deductions	Applicant	Spouse / Co-Applicant	
PAYE:			SALARY DATE
UIF:			
Medical Aid:			<i>Please confirm date on which debit order must be deducted</i>
Pension:			
Other Deduction:			1ST DEBIT ORDER DATE
Other Deduction:			
Other Deduction:			
Total Deductions:	0.00	0.00	
Net Income:	0.00	0.00	
Joint Net Income:	0.00		

Monthly Living Expenses			
Expense	Actual	Proposed	Reason for High Expenses
Bank Charges			
Cell Phone			
Telephone and Internet Costs			
Clothing			
Contingencies/Family Expenses			
Child Maintenance			
School Fees			
Groceries and Cleaning (<i>Inclusive of Bread, Milk, Meat & Toiletries</i>)			
Rates and Taxes			
Water and Electricity			
Rent			
Transport			
Home Loan Insurance			
Assurance			
Insurance - Life			
Insurance - Vehicle			
Pension and Risk Benefits			
Medical-Aid			
Garden Services/Domestic Worker			
Summons (<i>excluded from Debt Review</i>)			
Total Monthly Expenses:			
Available for Distribution:			

DECLARATION BY THE CONSUMER(S)

I/We declare as follows:

- 1 I/We undertake to comply with all requests from the debt counsellor to assist him/her to evaluate my/our state of indebtedness and the prospects for responsible debt restructuring.
- 2 I/We hereby consent to the submission of my/our information to all registered credit bureaus by the debt counsellor and the registration of the application for debt-review with the National Credit Regulator.
- 3 I/We also consent that the debt counsellor may obtain my/our client records from any/all registered credit bureaus and any other registers which may contain and of my/our credit information.
- 4 I/We agree that my/our financial affairs and circumstances may be communicated to and be made known to all my/our credit providers and/or the latter's employees, agents and/or representatives in so far as it is relevant to my/our application for debt-review.
- 5 I/We acknowledge that my/our personal financial affairs and circumstances may come to the knowledge of the Debt Counsellors assistants, employees, agents and/or representatives in the course of advancing my/our application for debt review and to which I/we consent.
- 6 I/We confirm that I/ We are aware that if we fail to make our monthly payment, the debt counselor / creditors will have the right to terminate the debt review process immediately, and the Creditors can proceed with legal action against me. There will be no refund payable on termination of the debt review process.
- 7 We confirm that it was explained to us that the legal fee payable is for finalizing the debt review Court Application alone. For any other legal work (for example dealing with summons of creditors who are excluded from the debt review process) an additional legal fee will be charged, should I/We choose to instruct Herman Esterhuizen Smalman attorneys. A deposit will be requested for all additional instructions.
- 8 I/We 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:
 - 8.1 The debt counsellor rejects my/our application;
 - 8.2 The court determines that I/we am/are not over-indebted; or
 - 8.3 All my/our obligations under credit agreements as re-arranged are fulfilled.
- 9 I/We the undersigned Consumer(s) hereby agree and undertake to keep the Debt Counsellor indemnified against any and all loss or damage arising from any cause whatsoever which I/we may sustain as a result of my/our application for debt review in terms of the National Credit Act 34 of 2005.
- 10 For any credit providers added subsequent to No More Debt notifying the credit providers, we No More Debt will charge an additional legal fee.
- 11 I/We confirm that the information contained in this document is, to the best of my/our knowledge, true and correct.

on this day of 20

Signature of Principal Applicant : _____

Please initial every page as well

Signature of Spouse (if joint application) : _____

Please initial every page as well