



# APPLICATION FOR SMART BUSINESS FINANCE

Date: \_\_\_/\_\_\_/\_\_\_

## Borrower Details

Full name of borrower (company, partnership, sole trader or Incorporated Association or Business):

Trading as (registered businesses only):

Is this trading name registered under the *Business Act 1963*? (Please tick (✓) the appropriate box):  Yes  No

Current Trading Address:

Current Address of Registered office (Incorporated Company/Association/Business only):

Current Postal address:

Date business commenced trading: \_\_\_/\_\_\_/\_\_\_  
(earning income)

Date business commenced trading at **current** trading address: \_\_\_/\_\_\_/\_\_\_

Business occupation/industry:

Contact name: \_\_\_\_\_ Email address: \_\_\_\_\_

Contact number: \_\_\_\_\_ Number of Employees: \_\_\_\_\_ Annual turnover: K \_\_\_\_\_

## Management and Ownership Details (if not a sole trader)

### 1. COMPANIES, OR

Name	Director/Company Secretary	Nationality
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name	Shares Held	Nationality
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### 2. PARTNERSHIPS, OR

Names of all partners	Details of Partnership Agreement (if any)	Nationality
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### 3. INCORPORATED ASSOCIATIONS/INCORPORATED BUSINESS GROUPS / BODIES INCORPORATED BY SPECIFIC STATUTE

Name	Office held	Nationality
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Finance Details

Indicate the type and amount of finance required:

Facility type (e.g. overdraft, loan, lease)	Amount	Loan term (years)	Purpose
_____	K _____	_____	_____
_____	K _____	_____	_____
_____	K _____	_____	_____
_____	K _____	_____	_____

Will this proposed loan(s) refinance or repay any existing loan(s)?  Yes  No

If YES, please provide following details:

	Loan 1	Loan 2	Loan 3
Borrower:	_____	_____	_____
Lender:	_____	_____	_____
Loan Amount:	K _____	K _____	K _____
Monthly Repayment:	K _____	K _____	K _____

## Security Details

Brief description of proposed security for finance (e.g. mortgage over residential property, charge over cash deposit, fixed and floating charge over company assets, etc)

If property, please provide full description of improvements, together with title details

Lot/Section

_____	_____
_____	_____
_____	_____

Insurance details for proposed security (Policy details and insured value)

\_\_\_\_\_

## External Registered Accountant Details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Facsimile: \_\_\_\_\_

Email address: \_\_\_\_\_

## Contingent Liability

Have the business owners/partners/directors provided any guarantees or security to support any debt or liability not disclosed in any company Balance Sheet supplied to the Bank in support of this application, or in their personal Asset & Liability Statement supplied to the Bank in support of this application?

Yes (Give Details)  No

\_\_\_\_\_  
\_\_\_\_\_

Have the business owners/partners/directors, in any capacity, ever been bankrupt, insolvent, under administration, had their estate assigned or had an unsatisfied judgement against them for debt or any other reason?

Yes (Give Details)  No

\_\_\_\_\_  
\_\_\_\_\_

## Privacy and Consent Statement

By signing this form, the signatories hereby authorise Bank of South Pacific Limited (Bank) to obtain from any party (including any credit reference, checking or reporting organisation) such financial and personal information about the intended borrower, each of the signatories personally, and their respective affairs as the Bank may, in its absolute discretion, consider necessary or desirable in order to assess this application for finance.

## Declaration

I/We have read, understood and accept the Bank's Privacy and Consent Statement.

I/We acknowledge that the Bank may receive or pay commissions in respect of this application.

I/We declare that the information in the application is true and correct and I/we have not withheld any information which may affect the Bank's decision. I/We acknowledge that the provision of false information may lead to the cancellation of the facilities granted.

### SIGNING INSTRUCTIONS

- If the application is made on behalf of a sole trader, the sole proprietor must sign.
- If the application is made on behalf of a company, either the sole director (who is also the company secretary), or 2 directors, or a director and the company secretary must sign.
- If the application is made on behalf of a partnership, all proprietors of the business entity must sign unless the Partnership Agreement provides otherwise
- If the application is made on behalf of an Incorporated Association, please specify the entity (including the authority upon which the application is made

Full name

Title (i.e. Director/Partner)

Signature

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