



APPLICATION FOR INTRODUCER ACCREDITATION

Legal Name: _____

TRADING AS: _____

ABN: _____ ACN: _____

Finance Brokers Licence No: _____ State of Incorporation: _____

Business Address: (Including State & Postcode)

Mailing Address: (Including State & Postcode)

Telephone: _____ Fax: _____ Mobile: _____

Email: _____ Website: _____

Directors/Partner Details: (If more than 2 Directors/Partners please provide all details on additional pages)

1. Full legal name: _____

Home Address: _____

DOB: _____ Drivers Licence: _____ Level of Ownership: _____%

Home Phone: _____ Mobile: _____ Position: (Director/Partner etc) _____

2. Full legal name: _____

Home Address: _____

DOB: _____ Drivers Licence: _____ Level of Ownership: _____%

Home Phone: _____ Mobile: _____ Position: (Director/Partner etc) _____

History of Operations: Describe your business, how long you have operated this business, the profile of your client base and/or introduce base, any specific industry focus or specialty and any other information you think is relevant to this Application)

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Current Financiers with whom business is conducted:

Company: _____ Contact: _____ Ph. _____

Company: _____ Contact: _____ Ph. _____

Company: _____ Contact: _____ Ph. _____

Declaration by Directors:

It is our responsibility as Directors of the company to ensure our employees are acting in good faith, are disclosing all relevant information they know, or should know have not omitted information that would otherwise be relevant to an Application and have applied due diligence so as to obtain further information they may be required as a result of a Client's responses to other questions. We acknowledge and bear responsibility for actions and omissions of our Employees and understand we are responsible for the quality and content of Applications submitted to Service Finance Corporation Ltd, where there is reasonable suspicion of fraudulent activity whether it be perpetrated by a Client, Office or Employee of our company.

Signature of Director

Signature of Director

Print Name

Print Name

Dated: _____

Privacy Act Authorisation – Authorisation by Applicant/Guarantor/Indemnifier

You acknowledge that:

- Service Finance Corporation Ltd and its related companies (“we”) collect information about You for the purposes listed below;
- If you do not give all the information requested, we may not be able to process your application;
- We may obtain and use information about You or disclose it to the organisation set out below however, if the information is relevant to Your credit history, credit capacity, credit standing or credit worthiness, we will not do so unless the credit reporting requirements of the Privacy Act are satisfied.

You may:

- Gain access to Your information held by Us or any Principal or Assignees of Us by contacting Us on (08) 9221 1066; and
- Request that information about You is amended or updated so that it is correct and current.

You consent to us obtaining information about You from and disclosing it to:

- Any credit reporting agency or another credit provider;
- Organisations that provide services to us in respect of You (such as collections agents);
- To investigate and respond to matters if we believe or another believes a serious credit infringement has occurred in respect of You ; and
- As part of carrying on our business, including and restructure or sale.

I/We also certify that I/We are not an undischarged bankrupt and the information provided in this application form is true and correct.

By signing this Privacy Act Authorisation form I/We certify that the above information is true and correct (All parties to sign)

Signature of Director

Signature of Director

Print Name

Print Name

Dated: _____

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