

RENTAL Equipment Finance Application Form

Thank you for taking the time to complete this application!

Each applicant must complete a separate application form.

Once complete, please send to your Classic Relationship Manager.

We're here to help, for assistance please call us on **1300 780 895**.

Your Classic Relationship Manager is

Section 1. Application Details

Section 1.1 Applicant Details

Type Of Applicant

- Company
 Sole Trader
 Trust
 Incorporated Association
 Registered Co-op
 Partnership
 Individual
 Public Company
 Unincorporated Association
 Government Body

Full Name Of Applicant

(If you are a company acting as a trustee, provide your name in this format: <Company Name> as trustee for <Trust Name>)

ABN

ACN (Company Applicants Only)

Registration Number (Incorporated Association Applicants)

Registered Trading (Business) Name Of Applicant, if any

Trading Address (PO Box not acceptable)

Registered Office Address (if different from above)

Postal Address (if different from above)

Business Phone Number

Business Fax Number

Key Contact Name:

Key Contact Mobile

Key Contact Position

Key Contact Email

Nature of Business / Principal Activity

Section 1. Application Details

Section 1.2 Transaction Details

Goods Description

Condition: New Used Demo

Supplier Type: Dealer Registered Seller Refinance Private Sale Sale-Back

Supplier Details

Have the goods been delivered/installed? Yes - date of delivery/installation

No - expected date of delivery/installation, if known

Amount To Be Financed (ex GST):

Finance Term: 24 months 36 months 48 months 60 months

Clean Energy Assets Only

72 months 84 months

Clean Energy Assets Only

Product: Rental Stepped Rental

Address of Installation

Is the installation property owned by the applicant or one of the directors/partners? Yes No

Supplier Contact Name

Supplier Contact Email

Section 1.3 Finance Application Purpose

Why are you applying for finance? (tick all that apply)

To finance acquisition of asset/equipment

To raise capital/cash

To obtain a tax benefit

Other (please specify)

How did you get to your current financial position? (tick all that apply)

From business income/earnings

From salary and wages

Other (please specify)

Where will the funds you will use to pay for the finance come from? (tick all that apply)

From business income/earnings

From salary and wages

Other (please specify)

Section 1.4 Privacy and Electronic Identity Verification Consent

We collect, use, hold and disclose your personal and credit information to assess your application for credit. We disclose your information to Veda Advantage Pty Ltd ("Veda"), a credit reporting body, to obtain an individual credit report about you. Our Privacy Policy and Notifiable Matters are available at www.classicfg.com/privacy. They include information about accessing and correcting your information, making a complaint, contacting Veda, direct marketing, payment defaults, serious credit infringements and fraud. You can ask us to provide a hard copy of our Privacy Policy and Notifiable Matters. If we cannot collect, use, hold and disclose your personal and credit information, we will not be able to proceed with your application.

We also need your consent to disclose your name, residential address and date of birth to Veda to verify your identity electronically. If you don't consent, we will need to verify your identity another way.

Please complete all relevant sections and send to your Classic Relationship Manager.

Section 2. Applicant Identification Details

Section 2.1 Applicant Identification and Consent

Person #1 Identification

Relationship To Applicant

Director Individual Proprietor/Owner Trustee Partner Other, please specify

First Name

Middle Name

Surname

Date of Birth

Drivers Licence Number

Residential Address

Phone Number

Mobile

Email

Are you a property owner?

Yes No

If yes, please indicate the property type:

Residential

Commercial

Property Value

Mortgage Value

Person #1 Applicant Acknowledgements, Declaration & Consent

Yes No

I acknowledge and consent to the collection, use, holding and disclosure of my personal and credit information, according to Classic Funding Group's Privacy Policy.

I consent to electronic verification of my identity. Note: if you do not consent to electronic verification of your identity you will need to provide certified copies of supporting documents so that your identity can be verified through other means.

Signature

Date

Send me product/marketing materials or special offers

Person #2 Identification

Relationship To Applicant

Director Individual Proprietor/Owner Trustee Partner Other, please specify

First Name

Middle Name

Surname

Date of Birth

Drivers Licence Number

Residential Address

Phone Number

Mobile

Email

Are you a property owner?

Yes No

If yes, please indicate the property type:

Residential

Commercial

Property Value

Mortgage Value

Person #2 Applicant Acknowledgements, Declaration & Consent

Yes No

I acknowledge and consent to the collection, use, holding and disclosure of my personal and credit information, according to Classic Funding Group's Privacy Policy.

I consent to electronic verification of my identity. Note: if you do not consent to electronic verification of your identity you will need to provide certified copies of supporting documents so that your identity can be verified through other means.

Signature

Date

Send me product/marketing materials or special offers

Please attach a separate page with details if more than 2 persons and tick this box

Please complete all relevant sections and send to your Classic Relationship Manager.