



Car Finance Application

In the name of Allah the most beneficent the most merciful

Allah, the most gracious, does not make it compulsory for Muslims to acquire property assets. However, we are encouraged as Muslims, to build a strong and healthy family and community. If you feel that purchasing a car through finance aligns with your goals and you are financially capable to finance the purchase of a property through ICFAL's Islamic financing system, we are here to help you.

Car Finance Application Checklist:

A Finance application is not accepted unless the following documentation is provided with the application:

Please tick the relevant documentation you have provided below:

Prerequisites:

☐ **20% Estimated car price share purchase with ICFAL**

Proof of Income:

☐ **Two of your most recent pay slips**

☐ **Most recent Notice of assessment (NOA) from ATO**

For self employed :

☐ **Accountants Letter stating your estimated revenue, expenses and income after tax for current financial year.**

☐ **Most recent years Financial statements**

Proof of Assets:

☐ **If refinancing, most recent six month statement of current loan**

☐ **Rates notices**

☐ **Current vehicle registrations**

☐ **Bank/Credit card statements**

Car Finance Application:

Member Number : _____

I am applying for the following finance purpose (Please Tick)

☐ Personal Use

☐ Commercial Use

Personal Details (Applicant 1)

First Name: _____

Surname: _____

Date of Birth: _____

Drivers licence Number: _____

Passport Number: _____

A.B.N (If applicable) _____

Address: _____

State: _____

Postcode: _____

Phone: _____

Email Address: _____

Personal Details (Applicant 2)

First Name: _____

Surname: _____

Date of Birth: _____

Drivers licence Number: _____

Passport Number: _____

A.B.N (If applicable) _____

Address: _____

State: _____

Postcode: _____

Phone: _____

Email Address: _____

Employment Details (Applicant 1)

☐ Full Time

☐ Part Time

☐ Self Employed

☐ Other (please write): _____

Employer's name: _____

Employer's address: _____

State: _____

Postcode: _____

Employer's telephone number: _____

Occupation/Job Title: _____

Length of Service: _____

If self employed, please provide Accountant's details:

Accounting firm: _____

Contact name: _____

Telephone number: _____

Employment Details (Applicant 2)

☐ Full Time

☐ Part Time

☐ Self Employed

☐ Other (please write): _____

Employer's name: _____

Employer's address: _____

State: _____

Postcode: _____

Employer's telephone number: _____

Occupation/Job Title: _____

Length of Service: _____

If self employed, please provide Accountant's details:

Accounting firm: _____

Contact name: _____

Telephone number: _____

Previous employment – if under 2 years with present employer

Employer's Name: _____

Occupation/Job Title: _____

Work Number: _____

Length of employment: _____

Previous employment – if under 2 years with present employer

Employer's Name: _____

Occupation/Job Title: _____

Work Number: _____

Length of employment: _____

Details of car purchase

Estimated purchase price:

\$ _____

Your contribution (minimum 20% required):

\$ _____

Proposed length of contract (years):

Monthly Income and Expenses**Monthly income Member 1**

(After tax)

Salary/Wages

\$ _____

Self employment

\$ _____

Government benefits

\$ _____

Other income e.g dividends, investments, rent) (please list):

\$ _____

\$ _____

\$ _____

Total monthly income Member 1

\$ _____

Monthly income Member 2

(After tax)

Salary/Wages

\$ _____

Self employment

\$ _____

Government benefits

\$ _____

Other income e.g dividends, investments, rent) (please list):

\$ _____

\$ _____

\$ _____

Total monthly income Member 2

\$ _____

Number of dependents

Age (years)

Monthly Expenses Member 1

Rent

\$ _____

Mortgage payments

\$ _____

Loan repayments (credit cards, personal loans, other debts)

\$ _____

Insurance (car/house)

\$ _____

Voluntary superannuation payments

\$ _____

Ongoing bills(Phone, internet, utilities, etc)

\$ _____

Other general expenses

\$ _____

Total monthly expenses Member 1

\$ _____

Monthly Expenses Member 2

Rent

\$ _____

Mortgage payments

\$ _____

Loan repayments (credit cards, personal loans, other debts)

\$ _____

Insurance (car/house)

\$ _____

Voluntary superannuation payments

\$ _____

Ongoing bills(Phone, internet, utilities, etc)

\$ _____

Other general expenses

\$ _____

Total monthly expenses Member 2

\$ _____

(Subtract income by expenses)**Total Net Income Member 1**

\$ _____

Total Net Income Member 2

\$ _____

Financial Details (Applicant 1)

Has there ever been or are there now any financial judgements, bankruptcy notices, attachments or legal proceedings against the members?

Member 1 ☐ No ☐ Yes – provide detailsMember 2 ☐ No ☐ Yes – provide details

Do you foresee any major change to your income &/or expenses over the next 12 months that will make it difficult for you to meet your financial commitments?

Member 1 ☐ No ☐ Yes – provide detailsMember 2 ☐ No ☐ Yes – provide details

Have you had any difficulties in making your loan payments (if any) during the last 3 years?

Member 1 ☐ No ☐ Yes – provide detailsMember 2 ☐ No ☐ Yes – provide details**Financial Details (Applicant 2)**

Your Assets – What you own

Please include all assets that you own individually, jointly or with any other parties

Car/Investment Properties

Mem. 1	Mem. 2	Joint	Other (Specify):	Address	Percentage owned %	Present Value\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				\$

Bank Accounts (Please do not include your ICFAL account)

Mem. 1	Mem. 2	Joint	Other (Specify):	Financial Institution Name	Balance
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			\$

Motor vehicles

Make	Model	Year of manufacture	Present Value\$
			\$
			\$

Other Assets (e.g Shares, Investments etc, please do not include usual Car contents)

Description	
	\$
	\$
	\$
	\$

Total Value of Assets owned

\$

Your Liabilities – What you owe

Please include all loans/debts that you own individually, jointly or with any other parties

Car/Investment Loan

Mem. 1	Mem. 2	Joint	Other (Specify):	Financial Institution name	Principle Car <input type="checkbox"/>	Investment property <input type="checkbox"/>	Original loan amount \$	Amount now owing \$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	\$	\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	\$	\$

Other loans

Mem. 1	Mem. 2	Joint	Other (Specify):	Financial Institution Name	Purpose:	Original loan amount \$	Amount now owing \$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				\$	\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				\$	\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				\$	\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				\$	\$

Credit cards

Mem. 1	Mem. 2	Financial Institution name	Card type	Credit limit	Amount owing
<input type="checkbox"/>	<input type="checkbox"/>			\$	\$
<input type="checkbox"/>	<input type="checkbox"/>			\$	\$
<input type="checkbox"/>	<input type="checkbox"/>			\$	\$
<input type="checkbox"/>	<input type="checkbox"/>			\$	\$

Total Value of Liabilities owed

\$

By signing the declaration below, I agree to the following:

Islamic Co-operative Finance Australia Limited (ICFAL) may obtain personal information about me from a credit reporting body

ICFAL may obtain information about me from a credit reporting body to assess my application (in relation to either consumer credit or commercial credit) or to collect any payment that is overdue in relation to credit that ICFAL gives me as a result of making this application.

ICFAL may exchange personal information about me with other credit providers

ICFAL may exchange personal information about me with other credit providers. This information may be used to assess this application, assist me to avoid defaulting on my credit obligations, to notify other credit providers of a default by me, to assess my credit worthiness. This information may include credit eligibility information (that is, information ICFAL obtained from a credit reporting body or based on information obtained from a credit reporting body.)

ICFAL may exchange personal information about me with joint package holders/joint borrowers/joint applicants

If I am a joint applicant under this application ICFAL may exchange personal information about me with my joint applicants to process this application and to provide the finance facility.

For more information about our privacy policy around credit checks and reporting, please visit our website.

Authority to discuss information with accountant or employer

I/We authorise ICFAL to confirm the details contained in my/our Finance Application with my/our accountant, financial adviser or employer.

A copy of this acknowledgement page may be given to my/our accountant, financial adviser or employer as evidence of my/our consent to them confirming with ICFAL any of the details in my/our Finance Application.

Declaration

My/Our signature below evidences my/our understanding and consent to all matters set out in this application and this declaration. By signing below, I/we confirm that the information contained in, and accompanying, the Finance Application and all the information provided by me/us, is true, correct and complete and given in support of this application. I/We also declare that any documents provided containing financial information are true copies of the final signed versions of the original documents.

"...Sufficient is Allah for a witness between me and you. Verily! He is Ever the All-Knower, the All-Seer of His slaves." (Al Israa : 96)

Applicant signature:

Print name:

Date:

Witnessed by:

Print name:

Daytime contract number:

Applicant signature:

Print name:

Date:

Witnessed by:

Print name:

Daytime contact number:
