

Driver's Personal Information

In completing this form, I acknowledge I have read, understood and agree with the [SalaryMasters Privacy Policy](#). Please download this interactive form to your computer and once you have completed your personal information details, please save and export a PDF and email to customercare@salarymasters.com.au. A SalaryMasters consultant will contact you once finance approval has been obtained.

Your Details			
First Name <i>(incl middle name if applicable)</i>		Date of Birth	/ /
Last Name		Preferred Name <i>(if applicable)</i>	
Residential Address			
Contact Number		Email Address	
Postal Address			
Driver's Licence Number		Expiry Date	/ /
Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> De Facto
	Number of Dependents:		
Residency Details			
Australian Residency Status	<input type="checkbox"/> Australian Citizen	<input type="checkbox"/> Working Visa: Expiry	/ /
	<input type="checkbox"/> Permanent Resident	<i>(Please provide Passport and Visa)</i>	
Are you a resident in another country other than Australia for greater than 3 months of the year?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, which country
Are you a citizen of another country other than Australia?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, which country
Residential Status	<input type="checkbox"/> Own - outright	<input type="checkbox"/> Own – mortgage	<input type="checkbox"/> Rent <input type="checkbox"/> Live with Relatives
Time at current Residential Address <i>(if less than 5 years complete below)</i>			
Previous Residential Address			
Time at Previous Residential Address			
Your Employment Details			
Company Name		Payroll Number	
Work Address			
Position/Title		Work Number	
Annual Gross Salary	\$	Vehicle Allowance <i>(if applicable)</i>	\$
Employment Start Date	/	/	
Employment Status	<input type="checkbox"/> Full Time	<input type="checkbox"/> Contract	Contract End Date / /
	<input type="checkbox"/> Part-time		
Previous Employer <i>(complete if current employment is less than 5 years)</i>			
Address			
Length of Employment			
Position/Title			

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Monthly Income		Monthly Expenses	
Your Gross Salary	\$	Mortgage/Rent	\$
Partner's Gross Salary	\$	Investment Property(s) Repayment	\$
Rental Income	\$	Other Loan Repayments <i>(Including: Motor Vehicle, Personal & Recreational loans)</i>	\$
Government Benefits	\$	General Living Expenses*	\$
Other Income	\$	School Fees and Childcare	\$
Total	\$	Total	\$

* General Living expenses includes groceries, bills, insurance, clothing, entertainment, transport, medical, subscriptions, discretionary spending and so forth.

Asset Details		Owned Outright	Liabilities	
Home property value	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No	Home Property Loan**	\$
Investment Property(s)	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No	Investment Property(s)**	\$
Recreational Assets <i>(boats/RVs)</i>	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other Loans** <i>(Including: recreational asset loan, motor vehicle & personal loans)</i>	\$
Motor Vehicle(s)	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No	Credit Card Limit	\$
Shares/trust managed funds	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No	Interest Free Loans <i>(Including: Credit Line, Store cards, Afterpay etc)</i>	\$
Cash in bank	\$		Overdraft	\$
Superannuation	\$		Total	\$
Home contents	\$			
Total	\$			

** Full value to be entered if you share the asset/liability with someone else. No need to pro-rata your share.

Applicant Signature _____ Date _____ / ____ / ____