



# NEW CUSTOMER PACK

Application Form	
Name of Borrower & ABN/ACN	
Name of Guarantors & ABN/ACN	
Registered Address	
Physical Address	
Introducer / Broker Details	Fee / Commission
Accountant Details	
Solicitor Details	
Livestock Agent Details	
Farm Advisor / Agronomist Details	
Description of your agri experience and years of experience	
PIC & NGR Numbers	
Number of Employees	
Percent of production forward sold/hedged	
Contact Details of Individuals / Directors / Trustees / Partners	
Full Legal Name	Surname / First / Middle / Date of Birth
Full Legal Name	Surname / First / Middle / Date of Birth
Phone / Mobile	
Email	



**PRIVACY DECLARATION**

**Please provide:**

- For each Individual/Director/Trustee a certified copy of driver's license
- A certified copy of the Trust Deed or Partnership Deed
- All ABNs for Individuals, Trust and/or Partnerships

I/We acknowledge that certain items of personal and credit-related information about me/us contained in this application, provided by me/us and/or collected from third parties (including my/our organisation and representatives, public sources, our related companies and/or information service providers) might be disclosed to a credit reporting body or certain third parties in accordance with the provisions of the Privacy Act 1988 (Cth).

I/we authorize Thera TFS Pty Ltd (ACN 618 154 215) and its related entities (**Thera TFS**) to give and obtain from credit providers named in my/our credit application, and credit providers that may be named in a credit report issued by a credit reporting body, information about my/our credit arrangements. I/We understand this information can include any credit-related information about my/our credit worthiness, credit standing, credit history, or credit capacity that credit providers are allowed to give or receive from each other under the Privacy Act 1988.

I/we consent to Thera TFS obtaining a credit report about me/us from a credit reporting body. This credit report might contain information about me/us, including default information (min \$150.00 and 60 days overdue). Without limiting the foregoing:

- If Thera TFS considers it relevant to assess my/our application for personal credit, I/we agree to Thera TFS obtaining a report about my/our commercial activities or commercial credit worthiness from a business which provides information about the commercial credit worthiness of persons.
- If Thera TFS considers it relevant to assessing my/our application for commercial credit, I/we agree to Thera TFS obtaining from a credit reporting body a credit report containing personal credit-related information about me/us in relation to any nominated commercial credit provider.
- By signing this declaration, I/we agree that Thera TFS may request information from a credit reporting body and obtain information from credit providers for the purpose specified in this Declaration and in Thera TFS's privacy policy. Without limiting the foregoing, I/we agree that Thera TFS may request, use, and disclose credit-related information for the following purposes:
  - \* To assess an application by me/us for credit.
  - \* To assess an offer by me/us to act as a guarantor.
  - \* To assist me/us avoid defaulting on my/our credit obligations.
  - \* To notify other credit providers of a default by me/us.
  - \* To assess my/our credit worthiness.

I/We consent to Thera TFS in providing or disclosing my/our relevant personal and credit-related information to certain third parties (including their subsidiaries, affiliates, representative and branch offices). We acknowledge that the third parties to whom Thera TFS may provide or disclose my/our personal and credit-related information include but not limited to any actual or potential financier, participant or sub-participant, assignee, novatee or transferee of Thera TFS's rights and/or obligations under any transactions between Thera TFS and me/us. We understand that the types of personal and credit-related information that Thera TFS may provide or disclose to such certain third parties include current and historical information about my/our name, contact details, identification, organisational affiliations, financial information, property details, payment or billing details, historical account information and ongoing account compliance information.

I/we authorise Thera TFS to contact my accountant to obtain a copy of the last set of financial accounts for my/our entity(s). I/we authorise Thera TFS to provide relevant account information, including ongoing account compliance information about my/our Thera TFS account to agents that Thera TFS engages to manage and oversee client accounts, such as brokers and referral agents ("Thera TFS Agents").

I/we authorise Thera TFS Agents to disclose to Thera TFS my/our personal and credit-related information currently held by Thera TFS Agents and any information that they subsequently collect about me/us, including but not limited to property details, contact information, financial details, historical account information and ongoing account compliance information.

I/We declare that I am/we are over the age of 18 and the information contained in this application and attached statements are true and correct in every particular and it is upon this basis that I/we make this application.

**By signing this Declaration**, I/we confirm that Thera TFS has made its privacy policy available to me/us by their website [www.thera-tfs.com](http://www.thera-tfs.com) and email upon request and that Thera TFS Agents have made their privacy policy available to me/us by email upon request. I/we have read the privacy policy of Thera TFS and each relevant Thera TFS Agent and have been informed of my/our rights relating to my/our personal and credit-related information. I/we acknowledge and agree that Thera TFS and Thera TFS Agents may collect, use and disclose my/our personal and credit-related information in accordance with their respective privacy policies. I agree to have my identity information verified with the Issuer or Official Record Holder via third party systems for the purpose of verifying my identity.

**Note: All individual Borrowers and Guarantors MUST sign this Declaration (or consent by email if unable to sign)**

Signature 1. \_\_\_\_\_

Signature 2. \_\_\_\_\_

Print Name \_\_\_\_\_

Print Name \_\_\_\_\_

Dated \_\_\_\_\_

Dated \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Mobile \_\_\_\_\_

Mobile \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_



**Current Statement of Assets & Liabilities**

**For All Personal and Business Assets & Liabilities**

**Assets**

Bank Accounts / Investments / Other Assets	
Cash / Term Investments	\$
Shares	\$
Trade Debtors / Receivables	\$
Inventories (Grain / Cotton / Water)	\$
Livestock	\$

Property & Water Details	
	\$
	\$
	\$
	\$
	\$

Other Assets	
Plant & Equipment	\$
	\$
	\$
	\$
	\$

**Total Assets**      \$

**Liabilities**

Bank Details / Business Liabilities	
Overdrafts / Personal Loans	\$
Credit Cards	\$
Trade Creditors / Payables	\$
Tax Due	\$
	\$

Property Mortgages (Lender / Amount Owng)	
	\$
	\$
	\$
	\$
	\$

Other Liabilities	
Personal / Business Injunctions	\$
Personal / Business Caveats	\$
	\$
	\$
	\$

**Total Liabilities**      \$

**Net Equity**      \$

I / We certify this is a true and correct record and I understand that Thera TFS is relying upon this information in deciding to enter into a financing arrangement with us.

Signed \_\_\_\_\_

Name \_\_\_\_\_

Dated \_\_\_\_\_

<b>Finance Requirements</b>	
Purpose of Funding	
Estimated Enterprise Gross Margin %	
Location address of Commodity or Property to be financed	
Description of Commodities or Property to be financed	
Estimated Required Finance Amount	
Estimated Finance Start Date	
Estimate Funding Period	

### Information Checklist

- Completed New Client Pack
- Most recent two years of financial statements.
- Most recent Management Accounts
- Latest property rates notice.
- Property mortgage bank Letter of Offer.
- Recent property valuation (if available).
- Any commercial agreements (farm lease/agistment, commodity sales etc)
- Trust Deed (if applicants are a Trust)
- Photo ID's (applicants, directors, Trust beneficiaries, guarantors)
- Corporate structure diagram (diagram of all other business and personal interests)
- Statement Of Position (including all personal and business assets & liabilities)
- Financial forecasts, budget or cashflow forecasts
- Accountants letter confirming applicants' ownership of collateral for cashflow funding

#### **Notes**

- From time to time there will be requests for additional information subject to due diligence.
- Photo ID must be valid for more than six months (acceptable ID is Driver's License or Passport).