



# Debt Councillors

NCRDC1486

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 TC DEBT Counsellors

**CHANGE** THE DIRECTION OF YOUR FINANCES

FORM 16

## PERSONAL INFORMATION

Gender:  M  F

Ethnicity:  African  Coloured  Indian  White  Other

Name: ..... Surname: .....

Identity number: .....

Cell Number: ..... WhatsApp Number: .....

Email address: .....

I herewith consent to service of my Debt Review Application and/or all other court documents relating to the said Debt Review Application on me by email

Physical address: - .....

..... Postal Code: .....

## Marital Details:

Marital status: In community / Out of community / Single / Traditional / Divorced / Separated / Deceased

## Spouses Details

Name and Surname: .....

Identity number: - .....

Cell number: .....

Employer name: - .....

**Employment Details:**

Employer name: .....

Work address: - .....Job Title: .....

Applicant's pay date: - Monthly on: ..... December pay date: .....

**Number of Dependants:** .....

**Age of Dependants** .....

**INCOME & EXPENSES**

**(Main Applicant)**

**(Spouse)**

Salary before deductions	R		R	
Salary after deductions	R		R	
Other income (specify)	R		R	

**Expenses**

**Description**

**(Main Applicant)**

**(Spouse)**

	Food/Groceries		R		R	
	Rent		R		R	
	Water/electricity/rates/levies		R		R	
	School Fees		R		R	
	Short-Term Insurance		R		R	
	Vehicle Insurance		R		R	
	Life Insurance		R		R	
	Fuel/Transport		R		R	
	Medical costs		R		R	
	Telephone/Internet		R		R	
	Others (please specify)		R		R	
	<b>TOTAL MONTHLY EXPENSES</b>		<b>R</b>		<b>R</b>	



**PART 4 – DEBTOR OBLIGATIONS** *(Please give details of any overdrafts, the other creditors we will retrieve from your credit report)*

Do you have any bank overdrafts:  Y  N Overdraft Amount: .....

If yes, which bank .....

**Please give brief history/reason for over-indebtedness:**

.....  
.....  
.....

**PART 5 – DECLARATION BY APPLICANT**

1. I undertake to comply with all requests from the debt counsellor to assist him/her to evaluate my state of indebtedness and the prospects for responsible debt restructuring.
2. I hereby consent to the submission of my information to all registered credit bureaus by the debt counsellor.
3. I also consent that the debt counsellor may obtain my credit records from any/all registered credit bureaus and any other registers which may contain any of my credit information.
4. I undertake not to enter into any further credit agreements. Other than a consolidated agreement, with any credit provider until one of the following events has occurred:
  - The debt counsellor rejects my application; or
  - The court determines that I am not over-indebted; or
  - All my obligations under credit agreements as re-arranged are fulfilled;
5. Should I default with my payment/s, TC Debt Counsellors can at their sole discretion immediately suspend provision of services to me the consumer.
6. In the event if termination, TC Debt Counsellors will not be held liable for any legal action taken against me by the Credit Providers.
7. I understand after Form 17.2 with Proposal was done or Court Order obtained, I cannot cancel or withdraw my application for debt review.
8. I can however approach the court to rescind the order or apply for an order which declares I am no longer over-indebted.

I confirm that the information contained in this document is, to the best of my knowledge, true and correct.

Signature: ..... Name: ..... Date \_\_\_/\_\_\_/\_\_\_

Signature: ..... Name: ..... Date \_\_\_/\_\_\_/\_\_\_



**APPLICATION BY CONSUMER FOR DEBT REVIEW IN TERMS OF SECTION 86 OF THE NATIONAL CREDIT ACT, 34 OF 2005**

- 1. On receipt of this application the Debt Counsellor will advise all credit providers and all registered credit bureaus that you have applied for debt review.**
- 2. You will be listed with all registered credit bureaus that you have applied for debt review.**
- 3. This form must be accompanied by a list of all credit providers as well as copies of all creditor statements/ pay slips/ ID/ bank statements/ marriage certificate/ proof of insurance.**

Please Supply The Following.

- Please open a new bank account for alleviation process
- Id Document
- 3 Months Latest Pay Slips
- 3 Months Latest Bank Statements

