

NATIONAL CREDIT REGULATOR

COMPLAINT INITIATION FORM

(Initiating a complaint to the National Credit Regulator in terms of S 136 of the Act)

General Information

1. A complainant that wishes to submit a complaint must complete this form in full. For help in filing in this form, please phone the National Credit Regulator on
2. If you are a third party, completing this form on behalf of an individual, kindly refer to regulation XX for details on the documentation that should accompany this form.
3. The complaint form and the documentation must be submitted to the National Credit Regulator at the following address:
Block G
DTI Campus
77 Meintjie Street
Pretoria
or can be faxed to (012) xxx xxxx

Complaint Initiation Form

1. Name of Complainant:
2. ID/Co reg. No.
3. Date:
4. Address:
.....
5. Tel:
- 6.1 Institution to which the complaint relates:
- 6.2 Branch (if relevant):
- 6.3 Person representing institution:
7. Short description of complaint. Add pages is required:
.....
.....
8. I confirm that I want the National Credit Regulator to consider my complaint.
9. I understand that:
 - The National Credit Regulator will handle my complaint according to the requirements of the National Credit Act, 2005.
 - Confidential information may be considered by the National Credit Regulator in the process of handling my complaint.
 - The National Credit Regulator may need to communicate with other organisations in respect of the complaint question and may need to exchange information in this regard.
10. Should the National Credit Regulator require me to issue a statement under oath in respect of information contained in this form, I will do so.

Date: Place:

Name of signatory:

(Complainant or person duly authorised to act on the complainant's behalf - power of attorney complying with Regulation XX must be enclosed)

Signature of call centre operator in the event of the complaint being initiated by a telephone call.

Signature:

NATIONAL CREDIT REGULATOR

REFERRAL TO TRIBUNAL IN TERMS OF SECTION 137 (Application by NCR to Tribunal)

PART 1 - APPLICANT INFORMATION

1.Details of applicant from the National Credit Regulator

Title (Hon/Dr/Mr/Mrs/Miss/Ms) Full name

2.Division of applicant (if applicable)

3.Contact details of applicant

Telephone number (work) ()

Telephone number (cellular) ()

Fax number () Email address

PART 2 - APPLICATION DETAILS

1.Full name of participant / s

2.CIPRO number

3.Sector of industry (if applicable)

4.Application reason

- ☐ For an order resolving a dispute over information held by a credit bureau, in terms of section Part B of Chapter 4
- ☐ For a declaration that all or part of a credit agreement is unlawful in terms of section 89 or 90
- ☐ For an order compelling the delivery of a statement of account or to review a statement in terms of Part D of Chapter 5
- ☐ To review the conduct of a sale of goods in terms of section 129 or 131, or the distribution of proceeds from such a sale
- ☐ For leave to bring a complaint or a debt re-arrangement application directly before the Tribunal
- ☐ For an order condoning late filing

5.Application reason (other)

6.National Credit Regulator reference number (if applicable)

7.Date of application

8.Description of application

9.Order / relief sought

PART 3 - DECLARATION BY APPLICANT

1.The applicant confirms that the information contained in this application is accurate and complete.

Date: Name of authorised signatory:

Signature

PART 4 - LIST OF ATTACHMENTS

Application Forms	Completed	No of forms attached
Part 1 – Applicant Information
Part 2 - Application Details / Information
Part 3 – Declaration by Applicant
Part 4 – List of Attachments

2.Resolution authorising the signatory to sign the application form on behalf of the complainant (power of attorney)

3.Attach letter from respondent

4.Attach any extra details about the complaint in a separate document

Loan contract

Dispute letter

Credit agreement

Statement of account

Sale of goods form

Leave form

Other (specify)

Reference number (official use only)

NATIONAL CREDIT REGULATOR

NOTICE OF NON-REFERRAL ISSUED IN TERMS OF SECTION 139(1)(a) (In respect of non-referral of a complaint)

PART 1 - NON-REFERRAL NOTICE

1. Date of notice
2. Details of complainant
Title (Hon/Dr/Mr/Mrs/Miss/Ms) Full name
3. Trading name or division of complainant (if applicable)
4. Legal registration number
5. Contact details of applicant
Telephone number (work) ()
Telephone number (cellular) ()
Fax number () Email address
6. Section of Act the non-referral applies to
☐ section 141(1)(a)
☐ section 142(1)(a)
7. Description and reason for non-referral

PART 2 - DECLARATION BY NATIONAL CREDIT REGULATOR

1. The National Credit Regulator confirms that the information contained in this form is accurate and complete.

Date:

Name of signatory (duly authorised to act on behalf of the National Credit Regulator)

Signature:

NATIONAL CREDIT REGULATOR

REFERRAL TO TRIBUNAL IN TERMS OF SECTION 140(4) or 141(2) (Application by the National Credit Regulator / Complainant to the Tribunal)

PART 1 - APPLICANT INFORMATION

1. Details of registrant matter relates to:

Name of Registrant

Registrant's NCR registration number

2. Division of NCR referring matter / Name of Complainant

3. Contact details of person referring the matter on behalf of the NCR / Complainant:

Telephone number ()

Telephone number (cellular) ()

Fax number ()

Email address

PART 2 - REFERRAL DETAILS

1. Section of Act the referral applies to

☐ section 142 (1)

☐ section 142 (2)

☐ section 142 (3)

☐ section 143(1)

2. Reason for referral

3. Order / relief sought

4. Has leave of the Tribunal been obtained? (if applicable)

* If you have answered YES to item 8, please give details here

PART 3 - DECLARATION BY APPLICANT

1. The applicant confirms that the information contained in this application is accurate and complete.

Date:

Name of signatory (duly authorised to act on behalf of the National Credit Regulator)

Signature:

PART 4 - LIST OF ATTACHMENTS

Application Forms	Completed	No of forms attached
Part 1 – Applicant Information
Part 2 – Referral Details
Part 3 – Declaration by Applicant
Part 4 – List of Attachments

2.Resolution authorising the signatory to sign the application form on behalf of the complainant

3.Attach letter from respondent

4.Attach any supporting documentation and specify:

- 4.1
- 4.2
- 4.3
- 4.4
- 4.5

Reference number (official use only)

NATIONAL CREDIT REGULATOR

NOTICE OF APPLICATION IN TERMS OF SECTION 141(2)(a) OF THE NATIONAL CREDIT ACT X

In the Consumer Tribunal for the [insert area]CASE NO: X/X.....

In the matter of:- (insert name of applicant)APPLICANT

AND

[insert name of respondent / other interested party]RESPONDENT

TO: THE RESPONDENT [insert area / address]

AND TO: THE CLERK / REGISTRAR National Consumer Tribunal.....

AND TO: (insert name & address of all interested parties)

....."PER HAND/REGISTERED POST"

KINDLY TAKE NOTICE: that application will be made to the above Honorable Court on [day]the
[date]of [month] 2006 at [time]am

or so soon thereafter as the matter maybe heard for an order in the following terms:-

(a)* that this matter be referred to the Consumer Court of [insert area/address];

(b)* that this matter be referred to the National Consumer Tribunal, [insert address].

KINDLY TAKE NOTICE FURTHER THAT the Affidavit of the Applicant [insert Applicant's name]
attached hereto shall be used in support of this application.

KINDLY TAKE NOTICE FURTHER THAT the Applicant chooses the below mentioned address for service upon him/her* of all
notices and pleadings in this matter.

Signed at [place] on this [day] of [month] 2006.

Signature of Applicant

Full name and address of Applicant

(*delete which is not applicable)

NATIONAL CREDIT REGULATOR

NCR REGISTER OF REGISTRANTS IN TERMS OF SECTION 53(1) OF THE NATIONAL CREDIT ACT X

PART A CREDIT PROVIDERS:

Registrant's NCR registration number

Registrant's full name

Registrant's trading name (if applicable)

Registrant's identity number or CIPRO or other official registration number

Activities which registrant is permitted to engage in

Date of registration

Conditions of registration (if applicable)

Physical address

Telephone No. Fax No.

Email address

Contact person

Alterations of registration (if applicable)

PART B DEBT COUNSELLORS:

Registrant's NCR registration number

Registrant's full name

Registrant's trading name (if applicable)

Registrant's identity number

Activities which registrant is permitted to engage in

Date of registration

Conditions of registration (if applicable)

Physical address

Telephone No. Fax No.

Email address

Contact person

Alterations of registration (if applicable)

PART C CREDIT BUREAUS:

Registrant's NCR registration number

Registrant's full name

Registrant's trading name (if applicable)

Registrant's CIPRO or other official registration number

Activities which registrant is permitted to engage in

Date of registration

Conditions of registration (if applicable)

Physical address

Telephone No. Fax No.

Email address

Contact person

Alterations of registration (if applicable)

NATIONAL CREDIT REGULATOR

NATIONAL CREDIT REGISTER IN TERMS OF SECTION 53(1)(b) OF THE NATIONAL CREDIT ACT X

PART A: CREDIT BUREAUS REGISTERED PROVINCIALY

NCR REG NO
NAME OF CREDIT BUREAU
ADDRESS (Physical / postal address)
CONTACT DETAILS (Telephone / fax / email)
STATUS (Eg: current, cancelled, altered)

PART B: CREDIT PROVIDERS REGISTERED PROVINCIALY

NCR REG NO
NAME OF CREDIT PROVIDER
REGISTERED TRADING NAME
ADDRESS (Physical / postal address)
CONTACT DETAILS (Telephone / fax / email)
STATUS (Eg: current, cancelled, altered)

PART C: DEBT COUNSELORS REGISTERED PROVINCIALY

NCR REG NO
NAME OF DEBT COUNSELOR
IDENTITY NUMBER
ADDRESS (Physical / postal address)
PROVINCE LOCATED
CONTACT DETAILS (Telephone / fax / email)
STATUS (Eg: current, cancelled, altered)

NATIONAL CREDIT REGULATOR

APPLICATION FOR INFORMATION IN TERMS OF SECTION 14(c)(ii) OF THE NATIONAL CREDIT ACT

Name of the Applicant:

Address

Telephone number Code: (.....)

To : The National Credit Regulator

Address

Fax number Code: (.....)

Email address

I, the above mentioned Applicant, hereby request the following information
regarding the undermentioned registrant: {insert information required and reason for such request}

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

Name of Registrant

NCR Registration number (if available)

Address of Registrant

.....

Signed at [place] on this [day] of [month] 2006.

Signature of Applicant

Full name of signatory

.....

NCR Form 35

And to : {insert name of the registrant}

Address

.....

I, the above mentioned natural person, in my capacity as{insert capacity}
of the above mentioned registrant hereby give notice to the National Credit Regulator and the Registrant that I have been
disqualified from individual registration in terms of Section 46(3) of the Act.

Signed at [place] on this [day] of [month] 2006.

Signature of individual registrant

Full name of signatory

NATIONAL CREDIT REGULATOR

REGISTER OF MARKETING OPTIONS IN TERMS OF SECTION 74(7)(a) OF THE NATIONAL CREDIT ACT X

Consumer's full name

Consumer's account number

Consumer's contact details

Tick which marketing option was selected by the consumer

- ☐ Date option selected by consumer
- ☐ Consumer declined pre-approved annual credit limit increases
- ☐ Consumer opted to be excluded from telemarketing campaigns by or on behalf of the credit provider
- ☐ Consumer opted to be excluded from marketing or customer list sold or distributed by credit provider
- ☐ Consumer opted to be excluded from distribution of any mass sms or email messages

Name of credit provider

NCR registration number

Contact details

NATIONAL CREDIT REGULATOR

REGISTER OF AGENTS IN TERMS OF SECTION 163(2)(b) OF THE NATIONAL CREDIT ACT X

No.

Full name(s) and surname of agent

Agent's identity number

Date of appointment of agent

Details of activities which agent is authorized to conduct on behalf of credit provider

.....

.....

.....

.....

.....

.....

.....

Name of credit provider

Address

.....

NCR registration number

Contact telephone number Code: (.....)

NATIONAL CREDIT REGULATOR

SHAPE * MERGEFORMAT

Lender Name & Logo

Optional text or corporate id

Agent/employee's photo. Position & size mandatory

Agent:

Name:

ID No/CIPR or other:

Optional text or corporate id

National Credit Regulator's Logo. 22mm in diameter

NATIONAL CREDIT REGULATOR

COMPLIANCE REPORT - debt counselor

Submitted in terms of Regulation xx of the Regulations to National Credit Act x.

TO: THE NATIONAL CREDIT REGULATOR

XXXXXXXXXXXXXXXXXXXX

XXXXXXXXXX

XXX

PERIOD COVERED BY THE RETURN:

From: (dd/mm/yy)

To: (dd/mm/yy)

DEBT COUNSELOR'S NCR REGISTRATION NUMBER:

1.Name and Surname of Debt Counselor

2.Contact details

Telephone Number

Fax Number

Cell Phone Number

Email Address

PART 2: CERTIFICATION OF COMPLIANCE BY THE REGISTERED DEBT COUNSELOR

I, the undersigned (insert name of Debt Counselor* or person authorized to complete the return on behalf of Debt Counselor*)

.....
 in my capacity as the duly registered Debt Counselor*/ the

of the Debt Counselor* (insert capacity of person completing return on behalf of Debt Counselor) do hereby declare that I/the registered debt counselor* have/has* complied with the requirements of the National Credit Act and that I am/we are* not aware of any substantial non-compliance with these requirements for the period (dd/mm/yy) to (dd/mm/yy) (insert the period of this report).

1.1 Is the Debt Counselor's certificate of registration with the National Credit Regulator is displayed prominently at the business premises situate at (insert address)

and which is registered with the National Credit Regulator? Yes No

If not, provide reasons:

1.2 Have the following documents been signed by the consumer and are contained in the files of each individual consumer ? Yes No

1.2.1 The application form for debt restructuring; Yes No

1.2.2 The debt assessment and client in-take form; Yes No

1.2.3 The social contract; Yes No

1.2.4 The power of attorney; Yes No

1.2.5 A copy of the consumer's identity document; Yes No

A copy of the consumer's salary advice/proof of income for three consecutive months; Yes No

Copies of the consumer's bank statements for three consecutive months (if any); Yes No

A print-out from the credit bureau to verify the consumer's financial history; Yes No

Proof of the consumer's expenses including all receipts/statements of account, credit agreements, etc; Yes No

Proof of any letters of demand and any court processes instituted against the consumer including but not limited to summons, default judgments, warrant of executions, etc. Yes No

If the answer to any of the above questions was 'no', please provide reasons:

.....

1.3 The terms and conditions of the documents referred to in items 1.2.3 and 1.2.4 have been explained to the consumer prior to the signature of the said documents.

Complete and accurate records are maintained, reflecting:

The debt assessment done in relation to each individual consumer applying for debt restructuring;

The number of consumers serviced;

The number of cases pending in each instance where the:

Debt Counselor is awaiting reply from credit provider;

Debt Counselor awaiting further information from consumer;

The number of case files closed in each instance where:

The case has been finalized;

The consumer absconded/renege

The consumer requested withdrawal from the programme

The category of age group of consumers serviced.

The category of gender of consumers serviced.

The category of race of consumers serviced.

The category of gross income of consumers serviced.

The category of employment sector of consumers serviced.

The total number of consumers that defaulted under the programme.

The category of debts incurred by the consumers serviced.

The total number of consumers referred to other organizations and reasons for the referral.

Signed at [place] on this [day] of [month] 2006.

Signature of Debt Counselor or authorized representative

Name of Debt Counselor or authorized representative

NATIONAL CREDIT REGULATOR

DRP RETURN NUMBER- {assign form number}
 QUARTERLY STATISTICAL RETURN VERSION {No} – RELEASED [DATE]

PART 1: PERSONAL DETAILS OF REGISTERED DEBT COUNSELOR

TITLE [TICK THE APPROPRIATE ONE] : MISS/MRS/MR

NAME & SURNAME

IDENTITY NUMBER

PHYSICAL ADDRESS

NCR REGISTRATION NUMBER

PERIOD COVERED BY RETURN

FROM : (dd/mm/yy)

TO: (dd/mm/yy)

PART 2: REPORTING PERIOD ANALYSIS

	CURRENT PERIOD	YEAR TO DATE
2.1 Total No of clients serviced:		
New clients
Clients carried forward from previous return
2.2 Total number of enquiries:		
current quarter
previous quarter
2.3 Total number of repeat visits from existing clients:		
Current quarter
Previous quarter
2.4 Total number of matters finalized:		
Current quarter
Cumulatively

NCR Form 42

2.5.1 Total number of matters pending:

Current quarter	.....	.....
Previous quarter	.....	.....

2.5.2 Reasons:

% per category

- | | |
|--|-------|
| i. awaiting reply from credit providers on proposed negotiations | ..... |
| ii. awaiting instructions from consumer | ..... |
| iii. other (specify) | ..... |

2.6. Total number of matters closed:

2.6.1 Current quarter

Previous quarter

2.6.2 Reasons:

% per category

- | | |
|--|-------|
| i. consumer reneged/absconded | ..... |
| ii. consumer requested withdrawal from programme | ..... |

2.6.3 Reasons for withdrawal from programme:

% per category

- | | |
|---|-------|
| i. consumer received financial aid from family | ..... |
| ii. consumer re-arranged directly with creditor | ..... |
| iii. other (specify) | ..... |

Category of age of clients serviced:

Age	No. of clients	% of clients
21- 25
26- 35
36- 45
46- 55
56- 65

Category of gender of clients serviced:

Gender	No. of clients	% of clients
Male
Female

Category of race of clients serviced:

Race	No. of clients	% of clients
Asian
African
Coloured
White

Category of gross income* of clients:

Gross	No. of clients	% of clients
R1 to R1000
R100 to R1500
R1501 to R3000
R3001 to R4000
R4001 to R5000
R5001 to R6000
R6001 to R7000
R7001 to R10 000

[*includes income received from employer, maintenance, child support grant, old age pension, other pension/provident fund, etc]

Category of sector in which clients are employed:

Sector	No. of clients	% of clients
Domestic
Civil service
Retail
Mining
Hospitality
Motor industry
Financial services
Non-Governmental
Other (specify)

NCR Form 42

2.15 Referrals to other organizations:

Reason for referral	No of clients referred
To apply for old age pension
To apply for maintenance
To apply for child support grant
To apply for disability grant
Other (specify)

PART 3: CLIENT RISK ANALYSIS

Total number of clients who defaulted:

	No of clients	% of clients
Current quarter
Cumulatively

PART 4: DEBT CATEGORY ANALYSIS

Category of debts:

Debt	No. of clients Owing such debts	% of clients Owing such debts
Micro Loan
Retail account
Insurance policies
Municipal accounts
Maintenance orders
Medical
School fees
Cell phone
Other (specify)

National Credit Regulator FORM 39 STATISTICAL RETURN

Line

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1 Name of Registered Entity		
2 NCR Registration Number		
6 Start of reporting period	dd/mm/yyyy	
7 End of reporting period	dd/mm/yyyy	
4 Name/ designation person completed this form		
5 E-Mail		
6 Contact telephone number	Code	Number

1 Summary of All Credit Agreements

Section 1: Summary Of Credit Agreement/ transaction flow

Information provided in Section 1 relates to credit agreements entered into and credit facilities utilised during the quarter

1.1 Applications and Rejections

1.1.1 Number of applications for credit and credit facilities received	Number	
1.1.2 Number of applications rejected	Number	

1.2 Credit agreements entered into and credit facility transactions effected

1.2.1 Total Rand value of credit agreements entered into during quarter	R	
1.2.2 Total Number of credit agreements entered into during quarter	Number	
1.2.3 Total rand value of credit facility transactions utilised	R	
1.2.4 Total number of credit facility transactions effected	Number	

1.3 Provincial Distribution of credit agreement and credit facility transactions

	Eastern Cape	Free State	Gauteng	Kwa Zulu Nat.	Limpopo
1.3.1 R' value of credit agreements					
1.3.2 R' value of credit facility trans.					
	Mpumalanga	Northern Cape	North West	Western Cape	
1.3.3 R' value of credit agreements					
1.3.4 R' value of credit facility trans.					

1.4 Gender, Low Income, Historically Disadvantaged Persons

	Number	Rand Value
1.4.1 Number of applications received from HDPs		
1.4.2 Number of applications from HDPs rejected		
1.4.3 Credit agreements with/ facility transactions by HDPs		
1.4.4 Credit agreements with/ facility transactions by low income		
1.4.5 Credit agreements with/ facility transactions by women		
1.4.6 Credit agreements/ facility transactions with juristic persons		
1.4.7 Credit agreements/ facility trans. with residents of rural/ low density areas		

Information provided in section 2.1 to 2.4 are numbers as at the end of the quarter.

2 Section 2: Summary of Debtors book

2.1 Total Gross value of debtors book on last day of quarter	Rand	
2.2 Minus: Total Provision for doubtful debt on last day of quarter	Rand	
2.3 Equals: Net value of debtors book on last day of quarter	Rand	
2.4 Number of accounts that make up the debtors book	Number	
2.5 Rand value of write-offs during quarter	Rand	
2.6 Number of accounts written-off during quarter	Number	

**National Credit Regulator
FORM 39 STATISTICAL RETURN**

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- 1 Name of Registered Entity
2 NCR Registration Number
3 Start of reporting period dd/mm/yyyy
4 End of reporting period dd/mm/yyyy

Mortgage Agreement

3 Section 3: Credit Agreements Entered into during quarter

3.1 Value and Volume of credit agreements entered into during quarter

		0K-R50K	R51K-R100K	R101K-R150K	R151K-R350K	R351K-R700K	≥700K
3.1.1	R Value						
3.1.2	Number						
3.1.3	Ave Term						

3.2 Gender, Low Income, Historically Disadvantaged Persons, Low density areas

	Agreements entered into during quarter	Number	Rand Value
3.2.1	Number of applications received from HDP's		
3.2.2	Number of applications from HDP's rejected		
3.2.3	Credit agreements entered into with HDP's		
3.2.4	Credit agreements entered into with low income persons		
3.2.5	Credit agreements with residents of rural/ low density areas		
3.2.6	Credit agreements with juristic persons		
3.2.7	Credit agreements with women		

3.3 Income Categories of clients- Gross Income Categories of Individuals

	R0 - R3500	R3501-R5500	R5501-R7500	R7501-R10K	R10.1K- R15K	>R15000	Total
R Value							
Number							

4 Section 4: Summary of Debtors book

4.1	Total Gross value of debtors book on last day of quarter	Rand	
4.2	Minus: Total provision for doubtful debt on last day of quarter	Rand	
4.3	Equals: Net value of debtors book on last day of quarter	Rand	
4.4	Number of accounts that make up the debtors book	Number	
4.5	Rand value of write-offs during quarter	Rand	
4.6	Number of accounts written-off during quarter	Number	

4.7 Age Analysis of Debtors Book

	Current	30 Days	31 to 60 Days	61- 90 Days	90-120	120+	Total
R Value							
Number							

**National Credit Regulator
Mortgages Continue**

This section on pricing to be completed once a year (1 Jan.- 31 Dec.)

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1 Name of Registered Entity

2 NCR Registration Number

3 Start of reporting period dd/mm/yyyy

4 End of reporting period dd/mm/yyyy

5

Section 5: Pricing

Pricing: This section to be completed once a year for 1 January to 31 December

5.1 Initiation Fee

Indicate the initiation fee that will be charged in case of agreements for the following amounts

	R50 000	R100 000	R150,000	R350,000	R700,000	R1000 000
Initiation fee						

5.2 Monthly service fee

	0K-R50K	R51K-R100K	R101K-R150K	R151K-R350K	R351K-R700K	≥700K
Lowest fee						
Highest Fee						
Average						

5.3 Interest rate:

	0K-R50K	R51K-R100K	R101K-R150K	R151K-R350K	R351K-R700K	≥700K
Lowest rate						
Highest rate						
Average						

**National Credit Regulator
FORM 39 STATISTICAL RETURN**

Industry groups: 0
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Line

1 Name of Registered Entity

2 NCR Registration Number

3 Start of reporting period dd/mm/yyyy

4 End of reporting period dd/mm/yyyy

Credit Facilities

6 Section 6: Credit Facility Transactions effected

6.1 Value, Volume of credit facility transactions effected

Bank products	Overdraft	Credit	Garage	Other	Total
Value of credit used	Bank Account	Card	Card	Facility	
Rand Value of credit used					
Number of facility transactions					

Retail and Other Products	Storecard	Storecard	Storecard	Storecard	Services
	Furniture	Clothing	Other Durable	Other Semi Durable	
Rand Value of credit used					
Number of facility transactions					

6.2 Gender, Low Income, Historically Disadvantaged Persons, Low density areas

	Number	Rand Value
Number of applications received from HDPs		
Number of applications from HDPs rejected		
Credit facility transactions by HDPs		
Credit facility transactions by low income people		
Credit facility transact. by residents in rural/low dens. areas		
Credit facility transactions by women		
Credit facility transactions by juristic person		

6.3 Income Categories. Gross Income Categories of individuals

	R0 - R3500	R3501-R5500	R5501-R7500	R7501-R10K	R10.1K- R15K	>R15000	Total
R Value							
Number							

6.4 Facility Limits

Total Rand Value of credit facility limits	Rand	
Total Rand Value of credit facility limits for HDPs	Rand	
Average credit limit all credit facility accounts	Rand	
Average credit limit for HDP credit facility accounts	Rand	

7 Debtors Book

Total Gross value of debtors book on last day of quarter	'Rand	
Minus: Total provision for doubtful debt on last day of quarter	'Rand	
Equals: Net value of debtors book on last day of quarter	'Rand	
Number of accounts that make up the debtors book	'Number	
Rand value of write-offs during quarter	'Rand	
Number of accounts written-off during quarter	'Number	

Age Analysis of Debtors Book

	Current	30 Days	31 to 60 Days	61- 90 Days	90-120	120+	Total
R Value							
Number							

**National Credit Regulator
CREDIT FACILITIES CONTINUE**

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Line

1 Name of Registered Entity

2 NCR Registration Number

3 Start of reporting period

dd/mm/yyyy

4 End of reporting period

dd/mm/yyyy

8**Section 8: Pricing****Pricing: This section to be completed once a year for 1 January to 31 December****Initiation Fee**

Indicate the initiation fee that will be charged for credit facilities with the following limits

	R1,500	R3,000	R5,000	R10,000	R15,000	R20,000
Initiation fee						

Monthly service fee

Of facilities in the following credit limit categories report lowest, highest and AVE fees

	0K-R1500	R1501- R3000	R3001-R5000	R5001-R10000	R10001-R20000	R20K+
Lowest fee						
Highest Fee						
Average						

Interest rate:

Of facilities in the following credit limit categories report lowest, highest and AVE rates

	0K-R1500	R3,000	R5,000	R10,000	R10001-R20000	R20K+
Lowest rate						
Highest rate						
Average						

**National Credit Regulator
FORM 39 STATISTICAL RETURN**

Industry group: 0

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Line

1 Name of Registered Entity

2 NCR Registration Number

3 Start of reporting period

dd/mm/yyyy

4 End of reporting period

aa/mm/yyyy

UNSECURED CREDIT TRANSACTIONS - LONG

9

Section 9: Credit Agreement Flow

9.1 Value and Volume according to TERM

Medium	4.1 - 6 Months	9 & 12 Months	18 Months	24 Months	36 Months	Total
R' Value						
# of Loans						
Long Term	3.1-5 Years	5.1-10 Years	10.1- 20 Years	>20.1 Years	Total	
R' Value						
# of Loans						

9.2 Value and Volume according to Size bands

	0K-R3K	R3.1K-R5K	R5.1K-R8K	R8.1K-R10K	R10.1K-R15K	R15.1K+
R' Value						
# of Loans						
AVERAGE						

9.3 Gender, Low Income, Historically Disadvantaged Persons, Low density areas

	Number	Rand Value
Number of applications received from HDP's		
Number of applications from HDP's rejected		
Credit agreements entered into with HDP's		
Credit agreements entered into with low income people		
Credit agreements with residents in rural/low density areas		
Credit agreements with women		
Credit agreements with juristic persons		

9.4 Income Categories of clients- Gross Income Categories

	R0 - R3500	R3501-R5500	R5501-R7500	R7501-R10K	R10.1K- R15K	>R15000	Total
R Value							
Number							

9.5 Purpose of credit

	Housing and related	Education	Small business	Emergency (See below)	Service	Other	Total
R Value							
Number							
Emergency loans analysis							
	Death/Funeral	Medical	Income loss	Loss-theft or fire	Other Emergency	Total	
Rand Value							
Number							

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Line

- 1 Name of Registered Entity
 2 NCR Registration Number
 3 Start of reporting period dd/mm/yyyy
 4 End of reporting period dd/mm/yyyy

10 Section 10: Summary of Debtors book

- 8.1 Total gross value of debtors book on last day of quarter Rand
 8.2 Minus: Total provision for doubtful debt on last day of quarter Rand
 8.3 Equals: Net value of debtors book on last day of quarter Rand
 8.4 Number of accounts that make up the debtors book Number
 8.5 Rand value of write-offs during quarter Rand
 8.6 Number of accounts written-off during quarter Number

8.7 Age Analysis of Debtors Book

	Current	30 Days	31 to 60 Days	61- 90 Days	90-120	120+	Total
R Value							
Number							

11 Section 11 Pricing

Pricing: This section to be completed once a year for 1 January to 31 December

- 3 Start of reporting period dd/mm/yyyy
 4 End of reporting period dd/mm/yyyy

9.1 Initiation Fee

Indicate the initiation fee that will be charged in case of agreements for the following amounts

	3000	5000	R8,000	R10,000	R15,000	R20,000
Initiation fee						

9.2 Monthly service fee

	0K-R3K	R3.1K-R5K	R5.1K-R8K	R8.1K-R10K	R10.1K-R15K	R15.1K+
Lowest fee						
Highest Fee						
Average						

9.3 Interest rate:

	0K-R3K	R3.1K-R5K	R5.1K-R8K	R8.1K-R10K	R10.1K-R15K	R15.1K+
Lowest rate						
Highest rate						
Average						