

**APPLICATION REHABILITATION AND ITC CLEARANCE**

*(Administered by New Life Advisers)*

Are you currently or were you previously a client of New Life Debt Advisers

YES

NO

**Applicant Details**

Full Names:		Surname:				
ID Number:		Cell Number				
Work Tel:		Fax Number:				
Residential Address		Postal address: (if different)				
<b>E-mail: NB!</b>						
Occupation:		Branch/Department				
Employer:		Period Employed:				
Marital Status	COP	ANC	Divorced	Single	Salary Pay date:	

**Describe in detail if any of the above information changed since the time of your Sequestration**


**Spouse Details (If married, COP or ANC, must be completed):**

Full Names:		Surname:	
ID Number:		Cell Number	
Work Tel:		Fax Number:	
Residential Address		Postal address: (if different)	
<b>E-mail:</b>			
Occupation:		Branch/Department	
Employer:			

**Describe in detail if any of the above information changed since the time of your Sequestration**


Net Income	Own	Spouse	Office Use	1
<b>Total Net Income After Deductions</b>				

**Living Expenses**

Property Rental(not your Bond )				
Water & Electricity Municipal Rates				
Transport – Petrol entire household				
Clothing for household ( <b>not accounts</b> )				
Groceries				
Telephone				
Maintenance				
School Fees				
Contingencies				
Other				
Other				
Other				
<b>TOTAL LIVING EXPENSES</b>	<b>TOTAL UP</b>		Office Use	<b>2</b>

**Other monthly expenses you need to inform us about**


**Attorney’s details who done the Sequestration Application**

Name of Attorney		Contact Details	
Company			

**Appointed Curator/Trustee Details (only if already appointed)**

Name of Curator/Trustee		Company	
Contact Details		Master Ref. No.	
Date of Sequestration			
Final Distribution of Estate			

**READ CAREFULLY!!!**

**Supporting Documents to be attached with Application Form.**

- **Copy of Identity Document (if married COP then also ID of Spouse)**
- **Pay Slips for 3 months for main applicant**
- **Any account reflecting your RESIDENTIAL ADDRESS.**
- **Copy of your Sequestration Order**

\_\_\_\_\_  
Signature Applicant

\_\_\_\_\_  
Signature Spouse

**Contact me anytime if you need any assistance with the completion of the Application Form**