

CAPITAL RAISING SUBMISSION

(DEBT / EQUITY)

INTRODUCER'S DETAILS

Introducers Name _____ Introducer Firm _____

Introducers Address / Postal _____ State _____ Post Code _____

Introducers Telephone No _____ Introducers Fax _____

Introducers Email Address _____ Introducers Mobile _____

Date Submitted to GCC: _____ GCC Person spoke with: _____

Submission Complete: Yes / No _____ Settlement Date Required: _____

Processing Fee received by GCC: Received Yes / No _____ \$ _____

APPLICANT KEY INFORMATION

Client / Company Name _____ ASX Code (if applicable) _____

Company Contact Person _____

Telephone No _____ Fax _____

Email Address _____ Mobile _____

Industry Type _____ Turnover \$ _____

FUNDING SUMMARY – Debt / Equity

Amount of Debt Funding Required \$ _____

Amount of Equity Funding Required \$ _____

Total Amount \$ _____

Brief description / reason for funding requirements:

TYPE OF APPLICANT

<input type="checkbox"/> Public Company	<input type="checkbox"/> Private Company	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trustee	<input type="checkbox"/> Other
---	--	--------------------------------------	----------------------------------	--------------------------------

CORPORATE APPLICANTS

Company Name:		A.B.N:	
Registered Address:			
State		Postcode:	
Name of Trust (if applicable):		Date of Incorporation:	
Telephone Number:		Fax Number:	
Email Address:		Web Page:	
Description of Business:			

PERSONAL PARTICULARS OF DIRECTORS, SHAREHOLDERS AND OTHER PERSONS ACTING AS GUARANTORS TO BE COMPLETED BELOW

PERSONAL DETAILS OF INDIVIDUALS / GUARANTORS / DIRECTORS
(Public Listed Companies – Include Directors Profile and other directorships)

SURNAME:	SURNAME:
First name:	First name:
Date of Birth: Drivers License No:	Date of Birth: Drivers License No:
Marital Status: No of Dependants:	Marital Status: No of Dependants:
Present Address:	Present Address:
State: Postcode: for years	State: Postcode: for years
Previous Address:	Previous Address:
State: Postcode: for years	State: Postcode: for years
Tel Home: Business:	Tel Home: Business:
Mobile: Fax:	Mobile: Fax:
Email:	Email:
Occupation (If self employed job description and industry)	Occupation (If self employed job description and industry)
Employed By:	Employed By:
Since / /	Since / /
Annual Gross Income:	Annual Gross Income:

SUPPORTING INFORMATION

Please complete this section & include an overview of the exist strategy & securities position – Include where appropriate:

- **Exist Strategy**
- **SWOT Analysis**
- **Business Plan**
- **Background on Board of Directors and Key Staff** - current and incoming
- **Corporate Structure** - use diagrams if possible
- **Cashflow Forecasts 1 to 5 years**
- **Financial Statements including full notes to accounts** - last 3 Years
- **Management Accounts** – up to date
- **List of Major Assets and Estimated Market Value**
- **Repayment Capacity**
- **Debt Commitment Schedule** Current finance / bank / other financial commitments / Purpose / Payment Amount etc..
- **Professional Adviser Reports / Valuations / Appraisals Completed**
- **Other Information**, please include any other relevant information
- You agree for us to contact your external accountant and advisers as required.

Please place comments on the exist strategy and security details in this section.

STATEMENT OF ASSETS AND LIABILITIES – DIRECTORS

(not required for public listed companies)

NOTE: EVERY SECTION OF THIS STATEMENT MUST BE COMPLETED, IF SECTION NOT APPLICABLE WRITE "NIL"
Use separate sheet for each company and individual & please sign and date this document

ASSETS		LIABILITIES		
	Value \$	Lender	Monthly Payments	Total Owing \$
Property 1: (Address)		Existing Mortgage: (Lender)		
Property 2:		Existing Mortgage:		
Property 3:		Existing Mortgage:		
Car/s 1.		Lease/ Hire Purchase		
Car/s 2.		Lease/ Hire Purchase		
Furniture/Equipment etc.		Lease/ Hire Purchase		
Caravan, Boat, Motorcycles, etc.		Personal Loans		
Other (give details)		Other (Give details)		
Cash at Bank 1. 2.		Credit Cards (Name of Lender/Limits) 1. 2.		
Deposit Paid		Taxation Liability \$ Years		
Superannuation		Other Liabilities Eg Bank Overdraft (Give details)		
Other		Any contingent liability, partnership or company interests or other eg guarantees (Give details on back page)		
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$	\$
		NET ASSETS	\$	

SIGNATURE (1) _____ PRINT NAME _____ DATE _____

SIGNATURE (2) _____ PRINT NAME _____ DATE _____

PRIVACY DISCLOSURE / AUTHORITY

All applicants / directors / guarantors to sign

**TO: GLOBAL CAPITAL CORPORATION PTY LTD (GCC)
 Level 65 MLC Centre 19-29 Martin Place Sydney NSW 2000
 OR it's authorised agents, other parties described herein or its assigns. For ease of reference herein known as "The Parties":**

I/We _____ of _____ hereby declare,

I/We acknowledge that I/We have made an Application for credit from GCC.
 I/We propose to support the Application for credit with my/our guarantee.
 I/We agree that GCC, including any introducer noted herein, (and any other credit provider who at any time provides or has any interest in the credit sought or advanced to me now or in the near future) can do any of the following:

• Credit Information

Seek and use a report containing information about my/our activities or credit worthiness for the purpose of assessing an application for credit.

If my/our Application is for commercial credit, seek from the Credit reporting agency a credit report about me/us.
 Seek and use credit information about me/us to assess the application.

• Collection of Overdue Payments

Seek and use a credit report about me/us provided by a Credit Reporting Agency to collect overdue payments from me/us.

• Provide Information to Guarantors/Co-Borrowers

Provide information to any person who proposes to guarantee or be a co-borrower, or has guarantee repayments of any Credit Provide to me/us.

• Provide Information for Securitisation

Disclose any report or personal information about me or us. The information may include the kind of information described below:

- 1) identify particulars which are: a) your full name including alias' and DOB b) maximum of three addresses consisting of a current or last known address and two immediately previous addresses c) name of your current or last known employer, and d) your drivers license number.
- 2) the fact that you have applied for credit and the amount.
- 3) the fact that GCC is or proposed to be a current credit provider to you.
- 4) payments which become overdue more than 60 days in which collection action has commenced.
- 5) advise that payments are no longer overdue.
- 6) cheques drawn by you over the amount of \$100.00 which have been dishonored more than once.
- 7) in specified circumstances that in the opinion of GCC you have committed a serious credit infringement.
- 8) that credit provided to you by GCC or by other lenders has been paid or otherwise discharged.

I/We also understand and agree that GCC, including any introducer named herein, may pay any party, or be paid by any party and may retain, processing and other fees, margins and commission, in respect of the credit arranged by GCC.

FULL NAME:	SIGNATURE:	DATE:
FULL NAME:	SIGNATURE:	DATE:

GUARANTOR FULL NAME:	SIGNATURE:	DATE:
GUARANTOR FULL NAME:	SIGNATURE:	DATE: