

# My Credit File – Standard File Service



Please complete all details and send to the address or fax number below.  
The identity information is required to assist us in locating your file.

## Your Information

Title:  Surname:  First Name(s):

Any other name(s) you have used:  Date of Birth:  DD / MM / YY Gender:  M  F

Drivers Licence Number:   I do not currently hold a drivers licence

Previous Drivers Licence Number: \*

Current Residential Address:   
  
  
Post Code:

Current Postal Address (if different):   
  
  
Post Code:

Previous Address(es) for the last five years (most recent to oldest):   
  
  
Post Code:

Post Code:

Daytime Phone Number:  Evening Phone Number:  Mobile Phone Number:  Fax Number:

Email Address:

Current Employer:  Name of the organisation to which you last applied for credit:

Your Reason for the Request:

Refused Credit  BY WHOM  Legal Right  Gaming Licence

\* If you have previously held a drivers licence in another state and are unable to provide the licence number, please send a copy of your current drivers licence, passport, birth certificate or utility bill along with your file request.

Please send my creditfile via:

Post  Fax  Email

Signature:  Date:  DD/MM/YY

Please forward your completed application to:

Fax (02) 9951 7880 Post Veda Advantage Information Services & Solutions, PO Box 964, North Sydney, NSW, 2059