BETTER CHOICE HOME LOANS APPLICATION FOR ACCREDITATION



Please read before considering accreditation with Better Choice to ensure we are the right lender for you and your customer base.

At Better Choice we have recently streamlined our operations and pivoting away from Prime lending and are striving to become the top lender for Alt Doc and Specialist lending in both residential and commercial sector.

Additionally, we are excited to have recently announce the launch of a very competitive Commercial Easy Refi for self-managed super funds (SMSF). Even though many other lenders have pulled out of the SMSF market, Better Choice is still going strong, assisting brokers in refinancing their SMSF loans to more favourable terms with less hassle.

ACCCREDITATION QUESTIONNAIRE

How long have you been in the finance industry? What is your typical customer type(s)? Select all that apply.

Less than 12 months Alt Doc SMSF

1 to 3 Years Specialist Self-Employed

3 - 5 Years Commercial Credit Impaired

5 - 10 Years

More than 10 Years

When dealing with a lender, what matters most to you? Select all that apply.

Product Range BDM Support

Policies Credit Team Access

Loan Application Process Ongoing Training

Who are your current lenders of choice for Specialist & Alt Doc deals?

Who are your current lenders of choice for Commercial Lending, Lease Doc and SMSF?

BETTER CHOICE HOME LOANSAPPLICATION FOR ACCREDITATION



APPLYING INTRODUCER TO COMPLETE PAGE 2, AGGREGATOR TO COMPLETE PAGE 3. BOTH PAGES MUST BE COMPLETED FOR ACCREDITATION WITH BETTER CHOICE HOME LOANS AND MUST BE SUBMITTED BY THE AGGREGATOR

COMPANY DETAILS				
Aggregator:	1			
Sub Aggregator:				
Individual / Company Name:	†			
Trading Name:				
ACN / ABN:				
Business Address:	†			
Suburb/State/Postcode:	†			
Postal Address (if different):				
Suburb/State/Postcode:	†			
Telephone #:	†			
Fax #:				
Email:	†			
Company Director/s:	Full Name			
	Full Name			
LOAN WRITERS				
Include ALL persons (Credit Representatives, staff etc) who will be submitting loans				
First Name:			Surname:	
D.O.B:			ACL/CRN:	
Address:			L	1
Phone:			Mobile:	I
Email:				
Preferred Password (6 characters or me	ore):			
	,			,
First Name:			Surname:	
D.O.B:			ACL/CRN:	
Address:				1
Phone:			Mobile:	
Email:			,	
Preferred Password (6 characters or more):				
First Name:			Surname:	
D.O.B:			ACL/CRN:	
Address:			7.027 0	
Phone:			Mobile:	1
Email:			THOUSE.	1
Preferred Password (6 characters or me	ore).		I	
Treferred Lassword to characters of the	J1C/.			
By signing the below I confirm: I have watched the introducer video & that all information I have provided to Better Choice Home Loans Pty Ltd in support of my application for accreditation as a broker to their business is true and correct.				
APPLICANT SIGNATURE				
Cignothuro of Arrelinents				
Signature of Applicant:				
Name of Applicant:			Date:	
DIRECTOR SIGNATURE				
Signature of Director:				
Name of Director:			Date:	1

BETTER CHOICE HOME LOANS APPLICATION FOR ACCREDITATION



Phone: 1300 334 336 Fax: 1300 434 336

Email: accreditations@betterchoice.com.au

Website: www.betterchoice.com.au

Office: Level 5, 50 Cavill Avenue Surfers Paradise QLD 4217

Postal: PO Box 845 Surfers Paradise QLD 4217

AGGREGATOR USE ONLY

The aggregator must confirm the below for all loan writers on this Accreditation Application:

I/We acknowledge and confirm that the following required checks and documents are held by the aggregator for the loan writer/s to support this accreditation request:

Police Check (if not clear, the police check must be provided with this accreditation application).

Bankruptcy Check

Professional Indemnity Insurance for a minimum \$2M for any one claim and \$6M in the aggregate (Minimum 84 months run off cover for the PI Insurance required)

AFCA External Dispute Resolution Membership

Industry membership with MFAA/FBAA

Certificate IV in Finance and Mortgage Broking or Diploma

Separation Letter(s) - only applicable for transfers - must have no adverse circumstances. (If adverse, separation letter must be provided with this accreditation application)

If any of the above are not held, please provide the reason:

Aggregator Accreditation application submitted by:

Authorised signatory of Aggregator Accreditations

Please email completed form to accreditations@betterchoice.com.au.

Accreditation applications will not be processed without full completion of the above and signed by the Aggregator.