

## **ENQUIRY FORM**

TEL: (01980) 861030 FAX: (01980) 861031

BROKER INFORMATION												
Name:		Company Name:			Network:							
Tel:	el:			Please s	select							
FCA Number:	Level Advice:	Level Advice:										
E-mail:												
LOAN INFORMATION												
Loan Type: (Please select)  Broker / Advice Fee:												
Purpose of loan:		Amo	ınt:	t: Term:								
<b>Product:</b>	No ERC's		Fees:	Fees: Added: Paid Up Front:								
Variable Rate	Ability to overpay			Product fee	Product fee							
Fixed	Lowest monthly repayment			Broker/Advice								
Discounted	Lowest overall estimated cost of loan			Valuaton fee	Valuation fee							
No. of years	No. of years Speed and ease of completion			Telegraphic tr	- ·							
Speed and ease of completion Mortgage reference Mortgage re												
1ST APPLICANT INFORMATION												
Title:	Forename(s):			Surname:								
Date of birth:	Marital s			Maiden/previous name:								
Nationality:	How long in UK: Permanent right to reside: (Please select)											
E-mail:				Mobile t								
Current address:	rrent address: Postcode:											
Time at current address:	Previous address (if current address is less than 3 years):											
Postcode: Time at previous address:												
EMPLOYMENT INFORMATION												
Are you: (Please select)				Occupation:								
Basic Income:		in current emp	· -									
Other Income:			Sourc	e of income:								
If s/employed, income verifi	cation: (Please	<u> </u>	NITT YNI		YEAR END DATE :							
T'41		2ND APPLICA	NT IN	Surname:								
Title:	Forename(s)											
Date of birth:	Marital Status: Maiden/previous name:											
Nationality:	How long in UK: Permanent right to reside: (Please select)											
E-mail:				Mobi	ile tel:							
Current address:		11 46			Post code:							
Time at current address:	Previo			nt address less than 3 yrs):								
Postcode: Time at previous address:												
EMPLOYMENT INFORMATION												
Are you: (Please select)			Occuj	Occupation:								
Basic Income:			Time	Time in current employment:								
Other Income:			Sourc	Source of income:								
If s/employed, income verification (Please select)  YEAR END DATE:												
SECURITY / PROPERTY DETAILS												
Date Purchased:	Pu	rchase Price:			Current Value:							
Security Address:	110											
Property Type:	R	edrooms:		Freehold Leasehold								
1 3 31												
Construction Type:				Ex Local Authority:								
Please provide details of others living in the property, other than the applicants (INCLUDING CHILDREN):												
Name:			Age:									
Name:					Age:							
Name:					Age:							

				TGAGE DETAILS				
Current lender:		Product:		St	Start date:			
Outstanding balance:			Redemption figure	:	Те	erm remaining:		
Monthly payment:		Capital Repaymen	t Interest Only	Ex	Existing interest rate:			
	(	CREDIT HIS	STORY (CCJ'S, DE	FAULTS, ARREARS	S. IVA. BK	0)		
Type/Lender			Amount	Date Registered/Sa				
1 ype/ Echaci		1 mount	Date Registered/Satisfied		Tredemption figure			
		EXISTING	G CREDIT COMMI	TMENTS / BTL MOI	RTGAGES			
Type/Lender Current Balance		Monthly Payment	Rental Income		deemed?	Redemption figure		
Type/Delider Current Bulance		Dalance	- Wienting Tayment	Tental meone		decined.	reachiption figure	
					Yes N	lo		
					Yes N	١o		
					Yes N	lo		
	ABBITI			. 11 /5 .				
	ADDITI	ONAL INFO	ORMATION (i.e Pre	evious addresses/Exit	route for <b>B</b>	ridge etc)		
plained that a creditable to see in the fit that if false and employ the Lender other count that if this how this mand that if this how this mand that furthe telephoning I confirm that I am 1. obtain credit or law enfor 2. take up refers 3. hold the infers I confirm that I have may be used by you or the relevant personal data in this information with another organisation. I confirm that the another organisation.	am author it search w iture and; or inacci yment ref and othe tries; a joint ap ay affect ed the clie on paymen r details of g Knight acting wi t reference rement ag rences to formation of we explain u or any o company is applicat ill be discl on should applicant(s	will be carried urate inform ferencing ag or organisation the each individent of their rate of an apport how the information of the each individual of their rate of an apport how the information within my authors esearches, we gencies. We rify the information your recorded to the apport your associan writing, in and conflosed to you they so requires) understand	nation is identified, dencies to prevent frations may access and eare may be a link bellual; right to request a copportate fee; information held by formation held by formation given; rd and/or computer syphicant(s) how their periate companies to offer I confirm that I have offer that this information held by the companies to offer I confirm that I have offer that this information held by the companies to offer I confirm that I have offer that this information how they can require.	stem.  rsonal data will be used by products to the application has been obtained for uses the information from the products of	ofraud proceed claims) ded by frace claims) ded by fracecords at case about the cies may be other credit default (s) unleading of the carry of the c	evention, la and money and preventi credit and f m by any cre e used can be search, or to have agreed ass the applicant(s) applicant(s) ave it delete	h others may be wenforcement laundering; ion agencies from fraud agencies and redit or fraud be obtained by o fraud prevention the information cant(s) inform(s) to process their is/are aware that ed or transferred to	
constitute a firm of	fer of loan	n. The lende	er may also require fur	ther information as neo Funding to release info	cessary.	_		
	/ <del>-</del> -	0' \				D-t-		
Signature of introduc	er (Tick to	Sign)				Date		

## **Household Information Applicant 1 Applicant 2** First Name First Name Surname Surname Date of Birth (dd/mm/yyyy) Date of Birth (dd/mm/yyyy) Anticipated Retirement Age Anticipated Retirement Age Age of dependant(s) No of dependants aged 18 or under All figures should be NET PER MONTH i.e after all deductions of tax, National Insurance and **Net Monthly Income** pension contributions **Applicant 1** Applicant 2 Occupation Occupation **Employed Net Monthly Income Employed Net Monthly Income** Self-employed Net Monthly Income Self-employed Net Monthly Income Nature of Business (if self-employed) Nature of Business (if self-employed) State Pension State Pension Private Pension(s) Private Pension(s) DWP **DWP** Tax Credit Tax Credit Working Family Tax Credits Working Family Tax Credits Child Benefit Child Benefit Net Rental Income (less deductions) Net Rental Income (less deductions) Other Income Other Income Other Income (please specify) Other Income (please specify) Total - Applicant 1 £ Total - Applicant 2 £ Total Monthly Net Income **Monthly Household Expenditure** Household Housekeeping Shared Ownership Rent / Ground Rent / Shopping (food, toiletries, nappies, Service Charge cigarettes, alcohol, cleaning, etc) Council Tax Clothing Gas, Electricity, Heating Fuels **Entertainment & Recreation** Child Related Expenses (child care, maintenance, school meals & fees, etc) Water TV, Internet, Sky/Cable, Telephone, Mobile Costs for Medical / Care Assistance Other Expenses Total £ Total Insurance **Travel** Pension / Life Insurance / Mortgage Repayment Vehicle How many cars do you have? Car Expenses (MOT, tax, insurance, fuel, **Buildings & Contents Insurance** Other Travel Expenses Total Total

£

**Total Declared Monthly Household Expenditure**