

Data Capture Form

This form is for intermediaries' internal use only and is not approved for issuing to customer(s). The information on this form may be used to assist the intermediary if an application is made to Nationwide. This form should not be used as an indication of Nationwide's lending criteria, which you can find by visiting nationwide-intermediary.co.uk/lending-criteria

Before you complete this form for the applicant, please make sure they have seen 'How Nationwide uses your information' by visiting nationwide.co.uk/privacy, and they have understood how their information will be used.

1. Applicant Details	Applicant 1	Applicant 2												
Title	_____	_____												
Forename	_____	_____												
Second name	_____	_____												
Surname	_____	_____												
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female												
Country of birth	_____	_____												
Date of birth	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y
D	D	M	M	Y	Y									
D	D	M	M	Y	Y									
Postcode	_____	_____												
	Details of Financial dependants	Details of Financial dependants												
	Aged from 0-5 <input type="checkbox"/> Aged from 6-11 <input type="checkbox"/>	Aged from 0-5 <input type="checkbox"/> Aged from 6-11 <input type="checkbox"/>												
	Aged from 12-17 <input type="checkbox"/> Aged 18 and above <input type="checkbox"/>	Aged from 12-17 <input type="checkbox"/> Aged 18 and above <input type="checkbox"/>												
Are you intending to port any loans?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide _____	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide _____												
	the existing mortgage account number _____ The bank account number the Direct Debit is taken from _____	the existing mortgage account number _____ The bank account number the Direct Debit is taken from _____												
Application type	<input type="checkbox"/> New purchase <input type="checkbox"/> Remortgage <input type="checkbox"/> Additional borrowing													
What is this property application for?	<input type="checkbox"/> Owner occupation	<input type="checkbox"/> Second property												
If a second property application, please indicate what the intended use of the property is?	<input type="checkbox"/> Main residence <input type="checkbox"/> Home for dependant relative	<input type="checkbox"/> Holiday home in the UK <input type="checkbox"/> Second property due to work location												
Applicant type	<input type="checkbox"/> First time buyer <input type="checkbox"/> Existing Nationwide borrower <input type="checkbox"/> Borrower with another lender <input type="checkbox"/> Previous Nationwide borrower <input type="checkbox"/> Previous borrower with another lender	<input type="checkbox"/> First time buyer <input type="checkbox"/> Existing Nationwide borrower <input type="checkbox"/> Borrower with another lender <input type="checkbox"/> Previous Nationwide borrower <input type="checkbox"/> Previous borrower with another lender												
Property ownership type	<input type="checkbox"/> Standard <input type="checkbox"/> Shared ownership	<input type="checkbox"/> Right to Buy <input type="checkbox"/> Equity share <input type="checkbox"/> Restricted Resale Price <input type="checkbox"/> Genuine bargain price												
Does the applicant own a mortgage free property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No												
If yes, what is the estimated value?	£ _____													
Purchase Right To Buy	Loan amount? _____	£ _____												
	Discounted purchase price? _____	£ _____												
	What is the full market value of the property? _____	£ _____												
Remortgage Right To Buy	Original Date of Purchase? _____	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y						
D	D	M	M	Y	Y									
	Loan amount? _____	£ _____												
	Current estimated value? _____	£ _____												
	What is the amount being transferred from another lender? _____	£ _____												
Purchase shared ownership detail	What is the purchase price of your share? _____	£ _____												
	What is the full market value of the property? _____	£ _____												
Remortgage Shared Ownership Details	What is the amount being transferred from another lender? _____	£ _____												
Is the property to be used for residential purposes?		<input type="checkbox"/> Yes <input type="checkbox"/> No												
Loan amount		£ _____												
Repayment Type*	<input type="checkbox"/> Interest Only <input type="checkbox"/> Capital and Interest <input type="checkbox"/> Part and Part *If Part & Part please state the split	Repayment £ _____ Interest only £ _____												
What is the purchase price or current estimated value?		£ _____												
Term of mortgage		<table border="1"><tr><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>	Y	Y	M	M								
Y	Y	M	M											
If applicable - what is the amount being transferred from another lender?		£ _____												
Purchase equity share detail	What type of equity share scheme is it? <input type="checkbox"/> Builder's equity loan	<input type="checkbox"/> Housing Association/Local Authority/National Gov't <input type="checkbox"/> Developer and HCA/GLA Co-Funded												
	What is the purchase price of the share? _____	£ _____												
	What is the full market value of the property? _____	£ _____												
	Equity shareholder name _____													
	What date does the equity share loan first become due for repayment? _____	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y						
D	D	M	M	Y	Y									



Restricted resale price	What is the purchase price?	£
	What is the full market value of the property?	Please state the % restriction
Genuine bargain price	What is the purchase price?	£
	What is the full market value of the property?	£
Security Details		
Have you found a property yet?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, property type:	<input type="checkbox"/> Terraced house <input type="checkbox"/> Semi detached <input type="checkbox"/> Detached house <input type="checkbox"/> Terraced bungalow <input type="checkbox"/> Semi detached bungalow <input type="checkbox"/> Converted flat/maisonette <input type="checkbox"/> Purpose built flat/maisonette	
Is the property a new build/newly converted or refurbished?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Tenure:	<input type="checkbox"/> Freehold <input type="checkbox"/> Leasehold <input type="checkbox"/> Commonhold <input type="checkbox"/> Ownership Scotland	
Does this application relate to a special scheme?	<input type="checkbox"/> None <input type="checkbox"/> Help to Buy	

2. Details of property to be mortgaged

Is the mortgage for the applicants existing residence?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
House number		
House name		
Flat		
Street		
Town		
County		
Postcode		
Which area of the UK is the property in?	<input type="checkbox"/> England & Wales <input type="checkbox"/> Northern Ireland <input type="checkbox"/> Scotland	
Region of the security address e.g. South West, North East, Greater London		
Tenure	<input type="checkbox"/> Freehold <input type="checkbox"/> Commonhold <input type="checkbox"/> Leasehold <input type="checkbox"/> Ownership Scotland	
What is your relationship to the seller?	<input type="checkbox"/> No relationship <input type="checkbox"/> Family member <input type="checkbox"/> Partner <input type="checkbox"/> Friend <input type="checkbox"/> Business associate <input type="checkbox"/> Work colleague <input type="checkbox"/> Employer <input type="checkbox"/> Landlord	
If Leasehold, how many years remaining on the lease?		
What will the new or extended term of the lease be at the time of completion?		

3. Source of Deposit (record each source separately).

Part 1 – What is the source of your deposit?		
<input type="checkbox"/> Savings account in UK or EEA <input type="checkbox"/> Builder cashback <input type="checkbox"/> Vendor cashback or incentive <input type="checkbox"/> Savings account outside of UK or EEA <input type="checkbox"/> Gift* <input type="checkbox"/> Equity <input type="checkbox"/> LSAP		
* If Gift, please complete the Gifted Deposit declaration form.		
How much is from this source?	£	
What is/will be your monthly repayment (Loans only)?	£	
If from Equity, what is the sale price of the property?	£	
Part 2 – What is the source of your deposit? (Please tick one box)		
<input type="checkbox"/> Savings account in UK or EEA <input type="checkbox"/> Builder cashback <input type="checkbox"/> Vendor cashback or incentive <input type="checkbox"/> Savings account outside of UK or EEA <input type="checkbox"/> Gift* <input type="checkbox"/> Equity <input type="checkbox"/> LSAP		
* If Gift, please complete the Gifted Deposit declaration form.		
How much is from this source?	£	
What is/will be your monthly repayment (Loans only)?	£	
If from Equity, what is the sale price of the property?	£	
Part 3 – What is the source of your deposit? (Please tick one box)		
<input type="checkbox"/> Savings account in UK or EEA <input type="checkbox"/> Builder cashback <input type="checkbox"/> Vendor cashback or incentive <input type="checkbox"/> Savings account outside of UK or EEA <input type="checkbox"/> Gift* <input type="checkbox"/> Equity <input type="checkbox"/> LSAP		
* If Gift, please complete the Gifted Deposit declaration form.		
How much is from this source?	£	
What is/will be your monthly repayment (Loans only)?	£	
If from Equity, what is the sale price of the property?	£	

4. Remortgage with Capital Raising

Indicate purpose of Capital Raising

Repay unsecured debts	<input type="checkbox"/>	Amount for this purpose	£
Other personal consumption	<input type="checkbox"/>	Amount for this purpose	£
Non structural home improvement	<input type="checkbox"/>	Amount for this purpose	£
Structural home improvement	<input type="checkbox"/>	Amount for this purpose	£



Buy out partner's interest (non-borrower)	<input type="checkbox"/>	Amount for this purpose £
Buy a share in freehold	<input type="checkbox"/>	Amount for this purpose £
Buy freehold title or new extended lease	<input type="checkbox"/>	Amount for this purpose £
Buy land to extend security	<input type="checkbox"/>	Amount for this purpose £
Buy property for main residence & let current property	<input type="checkbox"/>	Amount for this purpose £
Purchase land/property separate from the security	<input type="checkbox"/>	Amount for this purpose £
Pay off second charge	<input type="checkbox"/>	Amount for this purpose £

5. Additional Borrowing (Further Advance)

Non-structural home improvements	<input type="checkbox"/>	Amount for this purpose £
Structural home improvements	<input type="checkbox"/>	Amount for this purpose £
Purchase land/property separate from the security	<input type="checkbox"/>	Amount for this purpose £
Buy a share in the freehold	<input type="checkbox"/>	Amount for this purpose £
Buy out partner's interest (non-borrower)	<input type="checkbox"/>	Amount for this purpose £
Other personal consumption	<input type="checkbox"/>	Amount for this purpose £
Repay unsecured debts	<input type="checkbox"/>	Amount for this purpose £

6. Nationality: Inside of the EEA

	Applicant 1	Applicant 2
Nationality	<input type="text"/>	<input type="text"/>
Second Nationality (if applicable)	<input type="text"/>	<input type="text"/>
Are you a permanent UK resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If not a permanent resident – Will a family member who is a permanent UK resident be a joint party to this mortgage and occupy the property on completion?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you changed your name in the last 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Title <input type="text"/>	Title <input type="text"/>
	Forename <input type="text"/>	Forename <input type="text"/>
	Second name <input type="text"/>	Second name <input type="text"/>
	Surname <input type="text"/>	Surname <input type="text"/>
	Gender <input type="text"/>	Gender <input type="text"/>

Nationality: Outside of the EEA

	Applicant 1	Applicant 2
Are you seeking asylum in the UK?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you hold refugee status as recognised under the 1951 UN conventions and its 1967 protocol?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have indefinite leave to remain in the UK?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have 25% deposit from your own resources?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Nationality: Outside of the EEA (cont)

	Applicant 1	Applicant 2
Is your salary paid into a UK bank account?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a tier 1/tier 2 work permit/visa?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you legally been a UK resident for at least three years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you hold diplomatic immunity status?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you changed your name in the last 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Title <input type="text"/>	Title <input type="text"/>
	Forename <input type="text"/>	Forename <input type="text"/>
	Second name <input type="text"/>	Second name <input type="text"/>
	Surname <input type="text"/>	Surname <input type="text"/>
	Gender <input type="text"/>	Gender <input type="text"/>

**7. Please note only UK addresses accepted
Address Details – Current Address**

	Applicant 1	Applicant 2
House number	<input type="text"/>	<input type="text"/>
Flat	<input type="text"/>	<input type="text"/>
House name	<input type="text"/>	<input type="text"/>
Street	<input type="text"/>	<input type="text"/>
District	<input type="text"/>	<input type="text"/>
Town	<input type="text"/>	<input type="text"/>
County	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
How long were you at this address?	<input type="text"/> Y <input type="text"/> Y <input type="text"/> M <input type="text"/> M	<input type="text"/> Y <input type="text"/> Y <input type="text"/> M <input type="text"/> M



Occupancy Status

- Owner occupier
- Council tenant
- Private tenant
- Living with friends/relative
- Provided by employer
- Renting from a Housing Association

- Owner occupier
- Council tenant
- Private tenant
- Living with friends/relative
- Provided by employer
- Renting from a Housing Association

Is there a letting agent?

- Yes No

- Yes No

Address Details – Previous Address 1

Applicant 1

Applicant 2

House number

Flat

House name

Street

District

Town

County

Postcode

How long were you at this address?

Y	Y	M	M
---	---	---	---

Y	Y	M	M
---	---	---	---

Occupancy status

- Owner occupier
- Council tenant
- Private tenant
- Living with friends/relative
- Provided by employer
- Renting from a Housing Association

- Owner occupier
- Council tenant
- Private tenant
- Living with friends/relative
- Provided by employer
- Renting from a Housing Association

Address Details – Previous Address 2

Applicant 1

Applicant 2

House number

Flat

House name

Street

District

Town

County

Postcode

How long were you at this address?

Y	Y	M	M
---	---	---	---

Y	Y	M	M
---	---	---	---

Occupancy status

- Owner occupier
- Council tenant
- Private tenant
- Living with friends/relative
- Provided by employer
- Renting from a Housing Association

- Owner occupier
- Council tenant
- Private tenant
- Living with friends/relative
- Provided by employer
- Renting from a Housing Association

8. Employment Details

Applicant 1

Applicant 2

Main Employment

How are you employed?

- Permanent Temporary
- Fixed term contract Sub contractor fixed term
- Sub contractor open ended Sole trader
- Partner Director 20% or less shareholding
- Director more than 20% shareholding
- Not employed Retired Student
- Homemaker

- Permanent Temporary
- Fixed term contract Sub contractor fixed term
- Sub contractor open ended Sole trader
- Partner Director 20% or less shareholding
- Director more than 20% shareholding
- Not employed Retired Student
- Homemaker

Occupation

Industry

Annual salary

£

£

Bonus

£

£

Frequency

- Annually Quarterly Monthly
- Four weekly Weekly

- Annually Quarterly Monthly
- Four weekly Weekly

Overtime

£

£



Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly																				
Commission	£	£																				
Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly																				
Time with current employer	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M										
	Y	Y	M	M																		
	Y	Y	M	M																		
If less than 1 year - are you in a probation period?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
Do you have a previous employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
If yes	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M
	Y	Y	M	M																		
	Y	Y	M	M																		
	Y	Y	M	M																		
	Y	Y	M	M																		
How were you employed?																						
Employment type																						
Gross annual income	£	£																				
Occupation																						

Fixed Term Contract

How long have you been contracting?	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M										
	Y	Y	M	M																		
	Y	Y	M	M																		
What is the remaining term on current contract?	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M										
	Y	Y	M	M																		
	Y	Y	M	M																		
Contract likely to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
Time with current employer	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M										
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	Y	Y	M	M																		
If less than 1 year - are you in a probation period?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
Do you have a previous employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
If yes	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M
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	Y	Y	M	M																		
	Y	Y	M	M																		
	Y	Y	M	M																		
How were you employed?																						
Employment type																						
Gross annual income	£	£																				
Occupation																						

Sub Contractor Open Ended

Are you treated as employed for tax purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
If Yes - annual salary	£	£																				
Bonus	£	£																				
Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly																				
Overtime	£	£																				
Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly																				
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If No - Net profit before tax latest period	£	£																				
If No - Net profit before tax previous period	£	£																				
Time with current employer	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M										
	Y	Y	M	M																		
	Y	Y	M	M																		
If less than 1 year - are you in a probation period?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
Do you have a previous employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
If Yes	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M
	Y	Y	M	M																		
	Y	Y	M	M																		
	Y	Y	M	M																		
	Y	Y	M	M																		
How were you employed?																						
Employment type																						
Gross annual income	£	£																				
Occupation																						



Sub Contractor Fixed Term

How long have you been contracting?		Y	Y	M	M		Y	Y	M	M	
What is the remaining term on current contract?		Y	Y	M	M		Y	Y	M	M	
Current contract likely to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No										<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you treated as employed for tax purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No										<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes - annual salary	£										£
Bonus	£										£
Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly					<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly					
	<input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly					<input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly					
Overtime	£										£
Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly					<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly					
	<input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly					<input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly					
Commission	£										£
Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly					<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly					
	<input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly					<input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly					
If No - Net profit before tax latest period	£										£
If No - Net profit before tax previous period	£										£
Time with current employer		Y	Y	M	M		Y	Y	M	M	
If less than 1 year - are you in a probation period?	<input type="checkbox"/> Yes <input type="checkbox"/> No										<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a previous employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No										<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes	Start date	Y	Y	M	M	Start date	Y	Y	M	M	
	End date	Y	Y	M	M	End date	Y	Y	M	M	
How were you employed?											
Employment type											
Gross annual income	£										£
Occupation											

Sole Trader (Self Employed)

How long have you been trading?		Y	Y	M	M		Y	Y	M	M	
Have you become a partner in a professional practice?											
Net profit before tax - latest period	£										£
Net profit before tax - previous period	£										£

Partner (Self Employed)

<input type="checkbox"/> Yes		Y	Y	M	M		Y	Y	M	M	
How long have you been trading?		Y	Y	M	M		Y	Y	M	M	
Have you become a partner in a professional practice?											
Share of net profit before tax - latest period	£										£
Share of net profit before tax - previous period	£										£

Director / Shareholder with more than 20% shareholding

<input type="checkbox"/> Yes		Y	Y	M	M		Y	Y	M	M	
How long have you been trading?		Y	Y	M	M		Y	Y	M	M	
Salary (including dividends) - latest period	£										£
Salary (including dividends) - previous period	£										£
Not employed	<input type="checkbox"/> Yes										<input type="checkbox"/> Yes
Retired	<input type="checkbox"/> Yes										<input type="checkbox"/> Yes
Student	<input type="checkbox"/> Yes										<input type="checkbox"/> Yes
Homemaker	<input type="checkbox"/> Yes										<input type="checkbox"/> Yes



Employment Details

Applicant 1

Applicant 2

Secondary Employment

How are you employed?

- Permanent Temporary
- Fixed term contract Sub contractor fixed term
- Sub contractor open ended Sole trader
- Partner Director 20% or less shareholding
- Director more than 20% shareholding
- Not employed Retired Student
- Homemaker

- Permanent Temporary
- Fixed term contract Sub contractor fixed term
- Sub contractor open ended Sole trader
- Partner Director 20% or less shareholding
- Director more than 20% shareholding
- Not employed Retired Student
- Homemaker

Occupation

Annual salary

£ _____

£ _____

Bonus

£ _____

£ _____

Frequency

- Annually Quarterly Monthly
- Four weekly Weekly

- Annually Quarterly Monthly
- Four weekly Weekly

Overtime

£ _____

£ _____

Frequency

- Annually Quarterly Monthly
- Four weekly Weekly

- Annually Quarterly Monthly
- Four weekly Weekly

Commission

£ _____

£ _____

Frequency

- Annually Quarterly Monthly
- Four weekly Weekly

- Annually Quarterly Monthly
- Four weekly Weekly

Time with current employer

_____ | Y | Y | M | M

_____ | Y | Y | M | M

If less than 1 year - are you in a probation period?

Yes No

Yes No

Do you have a previous employer?

Yes No

Yes No

If yes

Start date _____ | Y | Y | M | M

Start date _____ | Y | Y | M | M

End date _____ | Y | Y | M | M

End date _____ | Y | Y | M | M

How were you employed?

Employment type

Gross annual income

£ _____

£ _____

Occupation

Fixed Term Contract

How long have you been contracting?

_____ | Y | Y | M | M

_____ | Y | Y | M | M

What is the remaining term on current contract?

_____ | Y | Y | M | M

_____ | Y | Y | M | M

Contract likely to be renewed?

Yes No

Yes No

Time with current employer

_____ | Y | Y | M | M

_____ | Y | Y | M | M

If less than 1 year - are you in a probation period?

Yes No

Yes No

Do you have a previous employer?

Yes No

Yes No

If yes

Start date _____ | Y | Y | M | M

Start date _____ | Y | Y | M | M

End date _____ | Y | Y | M | M

End date _____ | Y | Y | M | M

How were you employed?

Employment type

Gross annual income

£ _____

£ _____

Occupation

Sub Contractor Open Ended

Are you treated as employed for tax purposes?

Yes No

Yes No

If Yes - annual salary

£ _____

£ _____

Bonus

£ _____

£ _____

Frequency

- Annually Quarterly Monthly
- Four weekly Weekly

- Annually Quarterly Monthly
- Four weekly Weekly

Overtime

£ _____

£ _____

Frequency

- Annually Quarterly Monthly
- Four weekly Weekly

- Annually Quarterly Monthly
- Four weekly Weekly

Commission

£ _____

£ _____



Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly																				
If No - Net profit before tax latest period	£	£																				
If No - Net profit before tax previous period	£	£																				
Time with current employer	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M										
	Y	Y	M	M																		
	Y	Y	M	M																		
If less than 1 year - are you in a probation period?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
Do you have a previous employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
If Yes	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M
	Y	Y	M	M																		
	Y	Y	M	M																		
	Y	Y	M	M																		
	Y	Y	M	M																		
How were you employed?																						
Employment type																						
Gross annual income	£	£																				
Occupation																						

Sub Contractor Fixed Term

How long have you been contracting?	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M
	Y	Y	M	M								
	Y	Y	M	M								
What is the remaining term on current contract?	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M
	Y	Y	M	M								
	Y	Y	M	M								
Current contract likely to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No										
Are you treated as employed for tax purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No										
If Yes – annual salary	£	£										
Bonus	£	£										
Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly										
Overtime	£	£										
Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly										
Commission	£	£										
Frequency	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Four weekly <input type="checkbox"/> Weekly										

Sub Contractor Fixed Term (cont)

	Applicant 1	Applicant 2																				
If No - Net profit before tax latest period	£	£																				
If No - Net profit before tax previous period	£	£																				
Time with current employer	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M										
	Y	Y	M	M																		
	Y	Y	M	M																		
If less than 1 year - are you in a probation period?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
Do you have a previous employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																				
If Yes	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M	Start date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table> End date <table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M		Y	Y	M	M
	Y	Y	M	M																		
	Y	Y	M	M																		
	Y	Y	M	M																		
	Y	Y	M	M																		
How were you employed?																						
Employment type																						
Gross annual income	£	£																				
Occupation																						

Sole Trader (Self Employed)

How long have you been trading?	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M
	Y	Y	M	M								
	Y	Y	M	M								
Have you become a partner in a professional practice?												
Net profit before tax - latest period	£	£										
Net profit before tax - previous period	£	£										

Partner (Self Employed)

	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes										
How long have you been trading?	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M	<table border="1"><tr><td></td><td>Y</td><td>Y</td><td>M</td><td>M</td></tr></table>		Y	Y	M	M
	Y	Y	M	M								
	Y	Y	M	M								
Have you become a partner in a professional practice?												
Share of net profit before tax - latest period	£	£										
Share of net profit before tax - previous period	£	£										



Director / Shareholder with more than 20% shareholding	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
How long have you been trading?	_____	_____
	Y Y M M	Y Y M M
Salary (including dividends) - latest period	£ _____	£ _____
Salary (including dividends) - previous period	£ _____	£ _____
Not employed	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Retired	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Student	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Homemaker	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

9. Other Income (Monthly)	Applicant 1	Applicant 2
Do you have any other income?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Investment income	£ _____	£ _____
Maintenance income	£ _____	£ _____
Rental income from an unencumbered property	£ _____	£ _____
Pension income	£ _____	£ _____
Child Benefit	£ _____	£ _____
State Disability benefit	£ _____	£ _____
Please tell the applicant their response may include sensitive information that we refer to as 'special category data', such as health related matters. We'll assume they're happy for us to record this information and we'll only use it to process their application.		
Universal credit/tax credit	£ _____	£ _____
Reduction in Income- are you aware of any changes to your income that is likely to affect your ability to meet your monthly mortgage repayment?		
If yes provide details _____		

Retirement Details	Applicant 1	Applicant 2
At what age do you plan to retire? _____		
If the term of the mortgage extends into the customer(s) retirement and retirement is within the next 10 years, please provide details of the retirement income.		
Annual investment income (including dividends)	£ _____	£ _____
Annual maintenance income	£ _____	£ _____
Annual rental income from an unencumbered property	£ _____	£ _____
Annual pension income (including annuities)	£ _____	£ _____
Annual Child Benefit	£ _____	£ _____
Annual State Disability benefit	£ _____	£ _____
Please tell the applicant their response may include sensitive information that we refer to as 'special category data', such as health related matters. We'll assume they're happy for us to record this information and we'll only use it to process their application.		
Annual universal credit/tax credits	£ _____	£ _____
Reduction in Income- are you aware of any changes to your income that is likely to affect your ability to meet your monthly mortgage repayment?		
If yes provide details _____		

10. Outgoings – Monthly Outgoings/Loans	Applicant 1	Applicant 2
Personal loans/hire purchase with more than 6 months to run	£ _____	£ _____
Total monthly payment for any personal loans/hire purchase being cleared on or before completion	£ _____	£ _____
Secured loans with more than 6 months to run	£ _____	£ _____
Total monthly payment for any secured loans being cleared on or before completion	£ _____	£ _____
Deferred purchase agreements with more than 6 months to run	£ _____	£ _____



Total monthly payment for any deferred purchase agreements being cleared on or before completion	£	£
Student loan payment	£	£
Total monthly payment for any student loan being cleared on or before completion	£	£
Childcare	£	£
School fees	£	£
CSA/Maintenance	£	£
Additional costs for financial dependants	£	£
Regular travel	£	£

Outstanding Credit Card Balances	Applicant 1	Applicant 2
Total outstanding credit card balances	£	£
Credit card balances being cleared on or before completion	£	£

Increase in Outgoings	Applicant 1	Applicant 2
Are you aware of any changes to your income that is likely to affect your ability to meet your monthly mortgage repayment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If yes provide details

Annual Property Outgoings	Applicant 1	Applicant 2
Enter details of cost associated with property you are buying		
Council Tax	£	£
Ground Rent	£	£
Service Charge	£	£
Building Insurance	£	£
Shared Ownership Rent	£	£

11. Existing Mortgage Details	Applicant 1	Applicant 2
Which applicant is party to this mortgage?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Existing lender name		
Existing mortgage account number		
What is your current outstanding balance?	£	£
What is the balance that will be continuing?	£	£
Of this continuing balance, how much is interest only?	£	£
Is the property let?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a tenancy agreement in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the monthly mortgage repayment?	£	£
What is the monthly rental income?	£	£
Remaining Mortgage Term	Years: Months:	Years: Months:
Which applicant is party to this mortgage?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Existing lender name		
Existing mortgage account number		
What is your current outstanding balance?	£	£
What is the balance that will be continuing?	£	£
Of this continuing balance, how much is interest only?	£	£
Is the property let?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a tenancy agreement in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the monthly mortgage repayment?	£	£
What is the monthly rental income?	£	£
Remaining Mortgage Term	Years: Months:	Years: Months:



Which applicant is party to this mortgage?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Existing lender name	_____	_____
Existing mortgage account number	_____	_____
What is your current outstanding balance?	£ _____	£ _____
What is the balance that will be continuing?	£ _____	£ _____
Of this continuing balance, how much is interest only?	£ _____	£ _____
Is the property let?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a tenancy agreement in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the monthly mortgage repayment?	£ _____	£ _____
What is the monthly rental income?	£ _____	£ _____
Remaining Mortgage Term	Years: _____ Months: _____	Years: _____ Months: _____

12. Existing Mortgage (Interest Only)

Applicant 1

Applicant 2

How have you chosen to repay your existing mortgage?	<input type="checkbox"/> Repayment	<input type="checkbox"/> Repayment
	<input type="checkbox"/> Investment backed (interest only)	<input type="checkbox"/> Investment backed (interest only)
	<input type="checkbox"/> Part investment backed, part repayment	<input type="checkbox"/> Part investment backed, part repayment
If part investment backed, what is the value of this part?	£ _____	£ _____
If investment backed (interest only), how do you intend to repay the capital element of the mortgage?	<input type="checkbox"/> New ISA	<input type="checkbox"/> New ISA
	<input type="checkbox"/> New endowment policy	<input type="checkbox"/> New endowment policy
	<input type="checkbox"/> New pension plan	<input type="checkbox"/> New pension plan
	<input type="checkbox"/> Existing ISA	<input type="checkbox"/> Existing ISA
	<input type="checkbox"/> Existing endowment policy	<input type="checkbox"/> Existing endowment policy
	<input type="checkbox"/> Existing pension plan	<input type="checkbox"/> Existing pension plan
	<input type="checkbox"/> Sale of second property	<input type="checkbox"/> Sale of second property
	<input type="checkbox"/> Sale of main residence	<input type="checkbox"/> Sale of main residence
Estimated second property value?	£ _____	£ _____
Are all persons named on this repayment strategy also applicants for this borrowing application?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the endowment/pension/ISA is linked, please list the policies to be used:	Policy provider: _____	Policy provider: _____
	Policy start date: _____	Policy start date: _____
	Policy maturity date: _____	Policy maturity date: _____
	Latest estimated maturity value: £ _____	Latest estimated maturity value: £ _____
	Monthly cost: £ _____	Monthly cost: £ _____

13. Credit Check

Applicant 1

Applicant 2

Have you ever been bankrupt or entered into a voluntary agreement with a creditor in the last 6 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Details of bankruptcy or arrangements with creditors	_____	_____
	_____	_____
Have you ever had a county court judgement against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had a property repossessed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please be aware that a Decision In Principle will leave a soft footprint against the applicant(s) credit record

14. Product Selection

All existing borrowing (i.e. the amount being ported) will be kept on the existing repayment type and if any part of it is on interest only you must have acceptable repayment vehicle(s) in place. All further borrowing must be taken on a capital and interest repayment basis.

Single product selection

Product description	<input type="checkbox"/> Fixed <input type="checkbox"/> Tracker
Product term	<input type="checkbox"/> 2 year <input type="checkbox"/> 3 year <input type="checkbox"/> 5 year
Product code	_____
Product fee	<input type="checkbox"/> Add to loan <input type="checkbox"/> Pay up front



15. Fee Payment

Booking Fee

Credit / Debit card details will be required for all fees paid upfront

16. Landlord / Letting Agent Details

Name _____

Building name _____

Building number _____

Flat _____

Street _____

District _____

Town _____

County _____

17. Applicant's Contact Details

Applicant 1

Applicant 2

What is the applicant's preferred method of contact? Home Work Mobile Email Home Work Mobile Email

Home telephone number _____

Work telephone number _____

Mobile phone number _____

Email address _____

Do you prefer contact through Typetalk? Yes No Yes No

Do you prefer to receive your correspondence in a special format? None required Audio None required Audio
 Large print Braille Large print Braille

If the applicant prefers either Typetalk or special correspondence, please tell them we'll only use this information to help complete what they've asked us to do (which may also include sharing it with other organisations that act on our behalf).

Does the applicant(s) have a different correspondence to their current address? Yes No Yes No

If yes – Building name _____

Building number _____

Flat _____

Street _____

District _____

Town _____

County _____

Postcode _____

Telephone number _____

18. Existing Mortgage Details

Existing lender name _____

Existing mortgage account number _____

Outstanding balance £ _____ £

Balance continuing £ _____ £

Existing lender name _____

Existing mortgage account number _____

Outstanding balance £ _____ £

Balance continuing £ _____ £



19. Existing Personal Loans/ Hire Purchase	Applicant 1	Applicant 2
Which applicant is party to this loan?	<input type="checkbox"/>	<input type="checkbox"/>
Lender name	_____	_____
Monthly payment	£ _____	£ _____
Approximate balance	£ _____	£ _____
	Applicant 1	Applicant 2
Which applicant is party to this loan?	<input type="checkbox"/>	<input type="checkbox"/>
Lender name	_____	_____
Monthly payment	£ _____	£ _____
Approximate balance	£ _____	£ _____
	Applicant 1	Applicant 2
	Applicant 1	Applicant 2
Which applicant is party to this loan?	<input type="checkbox"/>	<input type="checkbox"/>
Lender name	_____	_____
Monthly payment	£ _____	£ _____
Approximate balance	£ _____	£ _____
	Applicant 1	Applicant 2
	Applicant 1	Applicant 2
Which applicant is party to this loan?	<input type="checkbox"/>	<input type="checkbox"/>
Lender name	_____	_____
Monthly payment	£ _____	£ _____
Approximate balance	£ _____	£ _____
	Applicant 1	Applicant 2
	Applicant 1	Applicant 2
Which applicant is party to this loan?	<input type="checkbox"/>	<input type="checkbox"/>
Lender name	_____	_____
Monthly payment	£ _____	£ _____
Approximate balance	£ _____	£ _____
	Applicant 1	Applicant 2
	Applicant 1	Applicant 2
Which applicant is party to this loan?	<input type="checkbox"/>	<input type="checkbox"/>
Lender name	_____	_____
Monthly payment	£ _____	£ _____
Approximate balance	£ _____	£ _____
	Applicant 1	Applicant 2
	Applicant 1	Applicant 2
Which applicant is party to this loan?	<input type="checkbox"/>	<input type="checkbox"/>
Lender name	_____	_____
Monthly payment	£ _____	£ _____
Approximate balance	£ _____	£ _____
	Applicant 1	Applicant 2
	Applicant 1	Applicant 2
Which applicant is party to this credit card?	<input type="checkbox"/>	<input type="checkbox"/>
Company name	_____	_____
Monthly payment	£ _____	£ _____
Balance being cleared	£ _____	£ _____
	Applicant 1	Applicant 2
	Applicant 1	Applicant 2
Which applicant is party to this credit card?	<input type="checkbox"/>	<input type="checkbox"/>
Company name	_____	_____
Monthly payment	£ _____	£ _____
Balance being cleared	£ _____	£ _____
	Applicant 1	Applicant 2
	Applicant 1	Applicant 2
	Applicant 1	Applicant 2
Company/business name	_____	_____
Building number	_____	_____
Building name	_____	_____
Floor/unit/flat	_____	_____
Street	_____	_____
Town	_____	_____
County	_____	_____
Postcode	_____	_____



Accountants Details	Applicant 1	Applicant 2
Name	_____	_____
Telephone number	_____	_____
E-mail address	_____	_____
Building number	_____	_____
Building name	_____	_____
Floor/unit/flat	_____	_____
Street	_____	_____
Town	_____	_____
County	_____	_____
Postcode	_____	_____

Secondary Employment details	Applicant 1	Applicant 2
Company/business name	_____	_____
Building number	_____	_____
Building name	_____	_____
Floor/unit/flat	_____	_____
Street	_____	_____
Town	_____	_____
County	_____	_____
Postcode	_____	_____

Accountants Details	Applicant 1	Applicant 2
Name	_____	_____
Telephone number	_____	_____
E-mail address	_____	_____
Building number	_____	_____
Building name	_____	_____
Floor/unit/flat	_____	_____
Street	_____	_____
Town	_____	_____
County	_____	_____
Postcode	_____	_____

24. Bank Details

Bank details will be required for the payment of the mortgage

Sort code

Account number

Date of payment Direct Debits are usually collected on 1st of the month unless you ask for a different day (2-28).

25. Details of property to be mortgaged (if not already completed in section 2)

Is the mortgage for the applicants existing residence? Yes No Yes No

House number _____

House name _____

Flat _____

Street _____

Town _____

County _____

Postcode _____

Which area of the UK is the property in? England & Wales Northern Ireland Scotland

Region of the security address e.g. South West, North East, Greater London _____

Tenure Freehold Commonhold Leasehold Ownership Scotland

If Leasehold, how many years remaining on the lease? _____

What will the new or extended term of the lease be at the time of completion? _____



26. Property Description

What is the property type? Terraced house Semi detached house Detached house Terraced bungalow
 Semi detached bungalow Converted flat / maisonette Purpose built flat / maisonette

What year was the property built?

Number of bedrooms

How many floors does the property have?

Purchase only – Is the property a new build, newly converted or refurbished? Yes No

Does the property have a garage or parking space? Yes No

Does the property have a basement or cellar? Yes No

Is the property under construction or major redevelopment? (or due to be) Yes No

Is the property a listed building? Yes No

Is the property habitable? Yes No

Is the plot size greater than 1 acre? Yes No

If plot size is greater than 1 acre, will any of the land be used for business/ commercial/ agricultural purposes? Yes No

Is the property subject to any agricultural restrictions? Yes No

If plot size is greater than 1 acre please provide details of agricultural restrictions

Is the wall construction brick, block or stone? Yes No

Is the roof construction tile or slate? Yes No

Has the property been flooded in the last 5 years? Yes No

Is the property at risk of coastal or river erosion? Yes No

Has the property suffered from subsidence, heave or landslip? Yes No

Have significant structural alterations been made to the property that are not visible from the road? Yes No

27. Valuation Details

Please select the valuation type you require Mortgage Valuation Report Home Survey Level 2 Report Transcript (Scotland only)

Credit / Debit card details may be required for payment of fees

Property Access Details (Details of Estate Agent or other)

Contact name

Company name (if applicable)

Daytime telephone number

Evening telephone number

E-mail address

Is there any supporting information for the valuer?

Property Access Address (Details of Property)

Building number

Flat

Building name

Street

Town

County

Postcode

28. Other Occupants

Any persons aged 17 or over that will be living at the property on completion of this mortgage

Title

Forename

Surname

Title

Forename

Surname



