

IF THERE ARE MORE THAN 2 APPLICANTS PLEASE COMPLETE THIS FORM TWICE AND ENSURE THERE IS AN INCOME & EXPENDITURE FORM FOR EACH HOUSEHOLD

Intermediary details

Company name :		Consultant/Advisor name:	
Telephone contact number:		Email Address:	
FCA number:	Directly Authorised <input type="checkbox"/>	Appointed Representative <input type="checkbox"/>	
Network/Mortgage club:			
Application is Advised (All residential & CBTL cases must be on an advised basis) <input type="checkbox"/>			
How was the sale made? Face to Face <input type="checkbox"/> Telephone <input type="checkbox"/> Internet <input type="checkbox"/> Post <input type="checkbox"/> Intermediary <input type="checkbox"/> Other <input type="checkbox"/>			
Your Broker Fee: £	Paid: Up front <input type="checkbox"/>	On Offer <input type="checkbox"/>	On Completion <input type="checkbox"/> Add to Loan (if possible) <input type="checkbox"/>

Intermediary Declaration

I confirm that all applicants, the security property and the loan details conform to Mortgage lending guidelines. Yes No

Credit decisions and the prevention of fraud

Please tick the box to confirm that you have consent from your client(s) for credit searches to be conducted and that you have informed them of the consequences; that they authorize Promise Solutions, it's subsidiaries and their Finance Providers to disclose the information they have provided today, to credit reference agencies who will keep a visible record of the information and search made.

By proceeding you confirm that you have supplied your client(s) with a copy of 'A Guide to the use of your Personal Information' and Promise Solutions Privacy Policy and have their consent to the disclosure and use of their personal information in this way.

I have obtained the applicant(s) consent to proceed with the credit searches described above and informed them of the consequences

Signature : _____ Date: _____

Loan details

Type of Mortgage: Purchase Remortgage Right to Buy Help to Buy Shared Ownership

Purchase price/estimated property value £ _____

Loan amount Required £	Term (years)
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Source(s) of Deposit (purchase only) Own Savings £ Current Equity £ Family Gift £ Other £

Repayment type: Capital Repayment Interest Only Part & Part

If Interest Only what is the repayment strategy? E.g. Sale and downsize / Endowment/Investment:

Existing Mortgage Lender: _____ Amount Outstanding: £ _____

Are there any other charges on the property?

Lender: _____ Amount Outstanding: £ _____

Other: _____ Amount Outstanding: £ _____

Is the applicant an Ex-Pat ? Y N

Personal details - Applicant 1				Personal details - Applicant 2			
Title (Mr/Mrs/Miss/Ms/Dr)				Title (Mr/Mrs/Miss/Ms/Dr)			
First name				First name			
Middle name(s)				Middle name(s)			
Surname				Surname			
Have you been known by any other name(s)? (maiden/alias)		Yes <input type="checkbox"/> No <input type="checkbox"/>		Have you been known by any other name(s)? (maiden/alias)		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, former name:				If yes, former name:			
Date of birth		N.I. No.		Date of birth		N.I. No.	
Expected retirement age				Expected retirement age			
Marital status				Marital status			
Number of dependents under 18				Number of dependents under 18			
Number of dependents over 18				Number of dependents over 18			
Nationality				Nationality			
Rights to reside in the UK?		Yes <input type="checkbox"/> No <input type="checkbox"/>		Rights to reside in the UK?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Current resident in the UK?		Yes <input type="checkbox"/> No <input type="checkbox"/>		Current resident in the UK?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Length of residency in UK				Length of residency in UK			
From birth?		Yes <input type="checkbox"/> No <input type="checkbox"/>		From birth?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If no, please complete		Years	Months	If no, please complete		Years	Months
Do you currently hold a mortgage or own a property?		Yes <input type="checkbox"/> No <input type="checkbox"/>		Do you currently hold a mortgage or own a property?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Current address Applicant 1				Current address Applicant 2			
Address				Address			
Postcode				Postcode			
Contact No				Contact No			
Email				Email			
Residential status	Owner with a mortgage	<input type="checkbox"/>		Residential status	Owner with a mortgage	<input type="checkbox"/>	
	Owner without a mortgage	<input type="checkbox"/>			Owner without a mortgage	<input type="checkbox"/>	
	Privately renting	<input type="checkbox"/>			Privately renting	<input type="checkbox"/>	
	Living with parents	<input type="checkbox"/>			Living with parents	<input type="checkbox"/>	
	Living with friends/relatives	<input type="checkbox"/>			Living with friends/relatives	<input type="checkbox"/>	
	Tied accommodation	<input type="checkbox"/>			Tied accommodation	<input type="checkbox"/>	
	Local authority renting/ housing association	<input type="checkbox"/>			Local authority renting/ housing association	<input type="checkbox"/>	
Time at address		Years	Months	Time at address		Years	Months
Previous address Applicant 1				Previous address Applicant 1			
Address				Address			
Postcode				Postcode			
Time at address		Years	Months	Time at address		Years	Months
WE NEED A MINIMUM OF 3 YEARS ADDRESS HISTORY FOR EACH APPLICANT – PLEASE PROVIDE DETAILS OF ANY OTHER PREVIOUS ADDRESSES IN THE ADDITIONAL INFORMATION SECTION 11							

INCOME DECLARATION: Are you aware of any changes to income that will affect ability to repay the mortgage? If yes Please give details in additional information

Applicant 1	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Applicant 2	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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**Employment - current employment - We require 3 years employment history – Please continue in additional info section
If either applicant is a 25% or more share owner please complete the Self-Employed section**

Employed - applicant 1		Employed - applicant 2	
Employment type (e.g. permanent, temporary)		Employment type (e.g. permanent, temporary)	
Job title		Job title	
Time with current employment/contract	Years	Time with current employment/contract	Years
Months		Months	
Total Gross salary per annum	£	Total Gross salary per annum	£
Net Monthly salary	£	Net Monthly salary	£
Employer Name/Address		Employer Name/Address	

Previous employment (Please continue in additional info if necessary)

Employment type (e.g. permanent, temporary)		Employment type (e.g. permanent, temporary)	
Job title		Job title	
Time with previous employer	Years	Time with previous employer	Years
Months		Months	
Employer Name/Address		Employer Name/Address	

Self Employed Applicant 1		Self Employed Applicant 2	
Name of Business		Name of Business	
Type	Sole trader <input type="checkbox"/> Partner <input type="checkbox"/> Director <input type="checkbox"/> Limited Company <input type="checkbox"/>	Type	Sole trader <input type="checkbox"/> Partner <input type="checkbox"/> Director <input type="checkbox"/> Limited Company <input type="checkbox"/>
Date commenced trading		Date commenced trading	
Last 2 years' net profit	£	Last 2 years' net profit	£
	Year		Year
	£		Year
% share of business		% share of business	

Other income Applicant 1 – Gross Annual		Other income Applicant 2 – Gross Annual	
Other annual income?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Other annual income?
	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Source of other income	Maintenance	£	Source of other income
	Dividend	£	Dividend
	Working/child tax credit	£	Working/child tax credit
	Private/occupational pension	£	Private/occupational pension
	Rental income net of mortgage payment	£	Rental income net of mortgage payment
	Investment income	£	Investment income
	Other	£	Other

Limited company details

Registered name

Trading name (if different)

Principal activity of the company

Company telephone number (including STD code)

Registered address

Correspondence address (if different)

Company registration number

Business start date (DD/MM/YY)

Number of Directors

Are Directors Guarantees available?

Last 2 Years Net Profit

£

Year

£

Year

Accountant Details

Firm name

Firm address

Telephone number (including STD code)

Accountant Acting

Accountant Qualifications

How long acting for client

Credit historyHas the company ever been refused a mortgage on this or any other property? Yes No Has the company ever had a judgement for debt recorded against it? Yes No

Has the company ever failed to keep up payments under any present or previous mortgage / loan or rental agreement?

If you have answered "Yes" to the company credit history questions, please enter details below:

Please provide details in the additional information page if there are more than 2 Directors

Directors Details - Director 1			Directors Details - Director 2		
Title (Mr/Mrs/Miss/Ms/Dr)			Title (Mr/Mrs/Miss/Ms/Dr)		
First name			First name		
Middle name(s)			Middle name(s)		
Surname			Surname		
Have you been known by any other name(s)? (maiden/alias) Yes <input type="checkbox"/> No <input type="checkbox"/>			Have you been known by any other name(s)? (maiden/alias) Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, former name:			If yes, former name:		
Date of birth			Date of birth		
N.I. No.			N.I. No.		
Expected retirement age			Expected retirement age		
Marital status			Marital status		
Dependents	Under 18	Over 18	Dependents	Under 18	Over 18
Nationality			Nationality		
Rights to reside in the UK? Yes <input type="checkbox"/> No <input type="checkbox"/>			Rights to reside in the UK? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Current resident in the UK? Yes <input type="checkbox"/> No <input type="checkbox"/>			Current resident in the UK? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Length of residency in UK			Length of residency in UK		
From birth? Yes <input type="checkbox"/> No <input type="checkbox"/>			From birth? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If no, please complete			If no, please complete		
	Years	Months		Years	Months
Do you currently hold a mortgage or own a property? Yes <input type="checkbox"/> No <input type="checkbox"/>			Do you currently hold a mortgage or own a property? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Current address Director 1			Current address Director 2		
Address			Address		
Postcode			Postcode		
Contact No			Contact No		
Email			Email		
Residential status			Residential status		
Time at address			Time at address		
	Years	Months		Years	Months

Property details	
Have you found a property? Yes <input type="checkbox"/> (please complete the section below) No <input type="checkbox"/>	
Property address	
Postcode	Year built
Property jurisdiction England/Wales <input type="checkbox"/> Scotland <input type="checkbox"/> Ireland <input type="checkbox"/>	
Date of original purchase (remortgage only)	
Type of property Semi detached house <input type="checkbox"/> Maisonette <input type="checkbox"/> Detached house <input type="checkbox"/> Purpose built flat <input type="checkbox"/> Number of floors in block _____ Terraced house <input type="checkbox"/> Converted flat <input type="checkbox"/> Which floor is flat on _____ End terrace <input type="checkbox"/> Number of bedrooms _____	
Type of sale Buying through estate agent <input type="checkbox"/> Buying from business <input type="checkbox"/> Private sale <input type="checkbox"/> Buying from builder <input type="checkbox"/> Buying from landlord as tenant <input type="checkbox"/> Purchase from relative <input type="checkbox"/> *If the property is a new build it will need to have an acceptable Warranty/Guarantee in place	Monthly Rental Income _____ Projected <input type="checkbox"/> Actual <input type="checkbox"/> Has you or any family member lived in the property (CBTL) Y/N Will the property be let to a family member Y / N Is there an AST in place Y / N If yes how long is the AST for _____ Is the property Ex Local authority Y / N Date of Property Purchase ___/___/____ Is the Property a HMO Y/N Do you have / require a licence Y/N *additional properties to be secure against please use additional info
Are you related to the vendor? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Tenure Freehold <input type="checkbox"/> Leasehold <input type="checkbox"/> - how many years are left on lease _____ yrs	
Is Property in preemption? Y / N Anything unusual about the property/construction? Y / N If yes provide details in additional info	
Valuation Type: Standard <input type="checkbox"/> Homebuyers Report <input type="checkbox"/>	

Income & Expenditure

A. Monthly Income	
Applicant 1 Net monthly Salary/Wages	£
Applicant 2 Net monthly Salary /Wages	£
Working Tax Credit	£
Child Benefit	£
Child Tax Credit	£
Maintenance	£
Private Pension	£
State Pension	£
Investment Income	£
Other (please state)	£
Other (please state)	£
Other (please state)	£
Other (please state)	£
Other (please state)	£
Other (please state)	£
A. Total Monthly Income	£

C. Dependents Please list anyone living in the property under the age of 16	
Full name	D-O-B
Please list anyone living in the property over age of 16	
Full name	D-O-B

B. Basic Household Expenditure	
Current Mortgage / Rent payment	£
Shared Ownership Rent	£
Ground rent / service charge	£
Second mortgage or other secured loan	£
Mortgage Repayment Vehicle/endowment	£
Pension/Life Insurance	£
Council Tax	£
Gas, Electric, Heating Fuels	£
Water	£
Communication - Internet / Mobile phones/landline	£
TV - Sky/cable /rental/license etc.,	£
Car Expenses – Fuel, tax and insurance	£
Other Travel e.g Bus/Rail expenses	£
Household insurance – Buildings/contents	£
Housekeeping (food and Toiletries)	£
Child minding / childcare/clubs etc.,	£
Maintenance payments	£
Costs for medical/care assistance/prescriptions	£
Clothing	£
Entertainment & Recreation (incl., alcohol, smoking etc.,)	£
Pets (food, vet bills, pet insurance)	
Other regular expenses not covered above	
Total Monthly Spend	£

How many cars in household	
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D . Credit that will continue after completion of this mortgage e.g. Hire Purchase for car, Credit Cards		
Creditor	Balance Owed	Monthly Repayment
1	£	£
2	£	£
3	£	£
4	£	£
5	£	£
6	£	£
D. Total monthly repayments		£ 0.00

It is important to complete the items above as accurately as possible taking into consideration all of your average monthly expenditure. I/we confirm that the above information is a true reflection of our expenditure. I/we are not aware of any impending changes to my/our circumstances of income. If I/we become aware of any changes to our income prior to the loan completing, I/we will notify Promise Solutions.

Additional Information

If you need to enter any additional information to support this case please enter it here.

Signed:

Signed :

Date :

Date :

YOUR HOME MAY BE REPOSSESSED IF YOU DO NOT KEEP UP REPAYMENTS ON A MORTGAGE OR ANY OTHER DEBT SECURED ON IT

Promise Solutions

Existing residential property portfolio details

Date completed	<input type="text"/>							
Name of applicant	1.	2.	3.	4.				
Name of company				Broker name and contact details				
Property address (First line including postcode)								
Applicant (enter 1, 2, 3, 4)								
Limited Company?	<input type="checkbox"/> Yes <input type="checkbox"/> No Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No Name:
Estimated Valuation	£	£	£	£	£	£	£	£
Monthly rent received	£	£	£	£	£	£	£	£
Monthly mortgage payment	£	£	£	£	£	£	£	£
Current mortgage balance	£	£	£	£	£	£	£	£
Is the property an HMO (licensed or unlicensed)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of bedrooms								
Property type	<input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> Flat	<input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> Flat	<input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> Flat	<input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> Flat	<input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> Flat	<input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> Flat	<input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> Flat	<input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> Flat
Property style	<input type="checkbox"/> Detached <input type="checkbox"/> Semi-Detached <input type="checkbox"/> End Terraced <input type="checkbox"/> Terraced <input type="checkbox"/> Converted Flat <input type="checkbox"/> Purpose Built Flat	<input type="checkbox"/> Detached <input type="checkbox"/> Semi-Detached <input type="checkbox"/> End Terraced <input type="checkbox"/> Terraced <input type="checkbox"/> Converted Flat <input type="checkbox"/> Purpose Built Flat	<input type="checkbox"/> Detached <input type="checkbox"/> Semi-Detached <input type="checkbox"/> End Terraced <input type="checkbox"/> Terraced <input type="checkbox"/> Converted Flat <input type="checkbox"/> Purpose Built Flat	<input type="checkbox"/> Detached <input type="checkbox"/> Semi-Detached <input type="checkbox"/> End Terraced <input type="checkbox"/> Terraced <input type="checkbox"/> Converted Flat <input type="checkbox"/> Purpose Built Flat	<input type="checkbox"/> Detached <input type="checkbox"/> Semi-Detached <input type="checkbox"/> End Terraced <input type="checkbox"/> Terraced <input type="checkbox"/> Converted Flat <input type="checkbox"/> Purpose Built Flat	<input type="checkbox"/> Detached <input type="checkbox"/> Semi-Detached <input type="checkbox"/> End Terraced <input type="checkbox"/> Terraced <input type="checkbox"/> Converted Flat <input type="checkbox"/> Purpose Built Flat	<input type="checkbox"/> Detached <input type="checkbox"/> Semi-Detached <input type="checkbox"/> End Terraced <input type="checkbox"/> Terraced <input type="checkbox"/> Converted Flat <input type="checkbox"/> Purpose Built Flat	<input type="checkbox"/> Detached <input type="checkbox"/> Semi-Detached <input type="checkbox"/> End Terraced <input type="checkbox"/> Terraced <input type="checkbox"/> Converted Flat <input type="checkbox"/> Purpose Built Flat