

Please complete this form in **BLOCK CAPITALS** and in **black ink**

For details of how we will use your information, please complete our CUSTOMER PRIVACY NOTICE and our TERMS OF BUSINESS document

Name of Firm	
Name & Title of Firm Contact	
Trading Style	Sole Trader/Trading Company/Group/SPV/MPV/NFP Charity
Company Registration No (if applicable)	
Registered Address of Firm	
Postcode	
Telephone Number	
Mobile Number	
How did you start the firm? (i.e. Self-Financed, Management Buy Out, Acquisition)	
How long has the firm been running?	
What is the firm structure today? E.g. is it part of a group of companies?	
What is the main activity of the firm?	
Is the company registered as a Special Purpose Vehicle (SPV) or a Multiple Purpose Vehicle (MPV)? If an SPV, how has this been registered with Companies House?	
Additional Information (e.g. Has the registered number been recorded or Certificate of Incorporation/Memo & Articles of Association been seen/copied?)	

DIRECTORS/SHAREHOLDERS

Name of directors /shareholders				
Date of birth				
Smoker	YES/NO	YES/NO	YES/NO	YES/NO
Role in firm Area of involvement in firm				
Date commenced Expected Retirement Age				
% Shareholding				
Salary (PA)				
Bonus/Dividend				

BRIEFING TRADING SUMMARY (LAST 3 YEARS)

Can you supply copies of published and/or management accounts? YES/NO

If yes you do not need to complete the following section

Financial year ends on		Corporation Tax	%
Year			
Issued share capital			
Authorised share capital			
Turnover	£	£	£
Gross profit	£	£	£
Net profit after tax	£	£	£
If a company, was a Dividend paid?	YES / NO	YES / NO	YES / NO
Name and Address of Firm's Accountants			
Telephone Number			

Do they give financial guidance to the shareholders/directors? YES/NO

Do they act as auditors? YES/NO

Do they act as tax planners? YES/NO

How many employees are there? Full time Part time
(Excluding directors)

PROPERTY DETAILS

Property Address:		Property Address:	
Value	£	Value	£
Loan o/s	£	Loan o/s	£
Monthly payments	£	Monthly payments	£
Product type, rate and term o/s		Product type, rate and terms o/s	
ERC period remaining		ERC period remaining	
Rent	£	Rent	£
Review	YES/NO	Review	YES/NO

Property Address:		Property Address:	
Value	£	Value	£
Loan o/s	£	Loan o/s	£
Monthly payments	£	Monthly payments	£
Product type, rate and term o/s		Product type, rate and terms o/s	
ERC period remaining		ERC period remaining	
Rent	£	Rent	£
Review	YES/NO	Review	YES/NO

Property Address:		Property Address:	
Value	£	Value	£
Loan o/s	£	Loan o/s	£
Monthly payments	£	Monthly payments	£
Product type, rate and term o/s		Product type, rate and terms o/s	
ERC period remaining		ERC period remaining	
Rent	£	Rent	£
Review	YES/NO	Review	YES/NO

PROPERTY PORTFOLIO

Total number of properties?	
Total value of portfolio?	
Total loan amount outstanding?	
Total gross rental income received?	
Total net rental income received?	
Completed GOFS Portfolio Schedule?	YES/NO

CREDIT HISTORY

	Director 1	Director 2	Director 3	Director 4
Have you ever had a mortgage or loan application refused?	Y / N	Y / N	Y / N	Y / N
Have you ever had a judgement for (a guarantor) debt or loan default registered against you?	Y / N	Y / N	Y / N	Y / N
Have you ever been declared bankrupt?	Y / N	Y / N	Y / N	Y / N
Have you ever failed to keep up repayments under any previous or current mortgage?	Y / N	Y / N	Y / N	Y / N
Have you ever failed to keep up repayments under any previous or current rental or loan agreement?	Y / N	Y / N	Y / N	Y / N

Have there been any company defaults?	Y / N – If yes please give details
<u>Additional Details:</u>	

NEW / RE-FINANCE REQUIREMENTS

Reason for mortgage	Purchase/Remortgage/debt consolidation capital raising/ bridging loan/ other _____
Address of property to be mortgaged	
Will the property be rented out or developed and sold?	
Price of property being purchased	
How much do you wish to borrow	
Amount of deposit	
Source of deposit	
Do you wish to add any other outstanding debts to the amount	
Preferred mortgage term and reason	
Are funds available to pay fees in connection with mortgage	
How are improvements being funded?	
Do you require an interest only or capital and repayment mortgage?	

PROPERTY TO BE MORTGAGED

Property type	
Property Tenure	Freehold / Leasehold
Property location	Eng/ Wal/ Scot/ NI/ other
If leasehold, how long is left on the lease	_____ years
Number of bedrooms	
Floors in the building	
Year property was built	
Has the property been extended	Y / N
Is the property of a non-standard construction (i.e. thatched roof, barn Conversion etc.)	Y / N

Additional Notes: (property to be Mortgaged)

KEY INFORMATION ABOUT THE TYPE OF MORTGAGE APPLICABLE TO YOU

In order to give you a high standard of service, we need to understand your requirements, attitudes and objectives to help us to provide you with a mortgage fitting your needs and relevant to your circumstances. State a reason where you answer 'Yes'.

1. Might income or expenditure change significantly within the foreseeable future?	
a. Income	Y / N
Approximate timescale / Amount / Reason:	
b. Expenditure	Y / N
Approximate timescale / Amount / Reason:	
2. Is there any plans to pay off some or all of the mortgage in the foreseeable future?	
Y / N	Approximate Amount £
Approximate timescale / Amount / Reason:	
3. Mortgage Requirements	
a. An upper limit on your mortgage costs for a specific period	Y / N
Reason and for how long:	
b. To fix your mortgage costs for a specific period	Y / N
Reason and for how long:	
c. A rate linked to the Bank of England base rate	Y / N
Reason and for how long:	
d. A discount on your mortgage repayments in the early years	Y / N
Reason and for how long:	
e. Access to an initial cash sum (known as a cashback)	Y / N
Reason	

4. Which of the following are important to you	
a. No early repayment charge on your mortgage at any point	Y / N
b. No early repayment charge overhang after selected rate ends	Y / N
c. Speed of mortgage completion	Y / N
d. Ability to add fees to the loan	Y / N
e. Ability to make underpayments or overpayments	Y / N
f. Free legal fees	Y / N
g. No valuation fee	Y / N
h. Have valuations fees refunded	Y / N

RECOMMENDATION

Lender Selected	
Product Details	
Does affordability & eligibility meet lender's criteria?	
Was roll up of fees requested and were implications discussed?	
Is client proceeding with this recommendation?	
If not confirm reasons or detail execution only instructions	Y / N
Details of research conducted Retained on file Y / N	

BUILDINGS & CONTENTS

Do you hold or will you be arranging suitable cover to protect the property, and where relevant, its contents?

Yes / No

KEY PEOPLE

Apart from Directors list the people who have a key role in your firm

Name of person				
Date of birth				
Smoker	YES/NO	YES/NO	YES/NO	YES/NO
Job title				
Area of involvement in firm				
Salary (per annum)				
Benefits				

If you lost one of these key people due to illness or death would you be able to maintain your profitability and future plans?	
Have you insured against this risk?	YES/NO
If Yes please give details?	
If NOT does this concern you?	YES/NO

SHARE PURCHASE/PARTNERSHIP PROTECTION

Do the Directors have Wills? YES/NO
 Is there a Company agreement? YES/NO
 If so what type? Buy & Sell/Cross Option/Automatic Accrual

Name	What would the directors like to happen to their interests in the firm in the event of their death or incapacity?	
Name	What currently happens to your interest in the firm should you die Suddenly?	How would this affect control and to what extent?
Solicitor Firm:		
Solicitors Name:		
Telephone:		

BANKERS

Name of main Bank	
Name of Bank Manager	
Contact details	
What services do they provide?	

PRINCIPAL ASSETS

Premises			
Description (Factory, office, warehouse, etc.)			
Total Value £	£		
Owner occupied	Yes <input type="checkbox"/> No <input type="checkbox"/>	Subject to mortgage	Yes <input type="checkbox"/> No <input type="checkbox"/>
Leased	Yes <input type="checkbox"/> No <input type="checkbox"/>	Unexpired term of lease years	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other major assets			

VALUE £ _____	Cash/Bank deposits	Quoted Investments	Other
	£	£	£

VALUE OF BUSINESS

Approximately, what is the current value of the business?			
What share valuation, if applicable		Date of valuation	
Corporation Tax – District and reference number(if applicable)			

DIRECTORS LOAN ACCOUNT

Are there any personal loans from Directors Shareholders? If yes, please give details.	YES/NO		
Director/Shareholder			
Inception date		Amount Outstanding	£
Repayment period			
arrangements are there to repay in the event of Death			

COMMERCIAL LOANS

Does the business have any outstanding loans? If yes, please give details: YES/NO

	Banks	Mortgages	Overdrafts	Other
Inception date				
Amount	£	£	£	£
Current interest rate				
Repayment period (years)				
Who is guarantor?				
Repayment/interest only				
Are there any other loans being considered? If yes, please give details.	YES / NO			
Other relevant information e.g. life policies to cover loans?				
Loan Details				

EMPLOYEE BENEFITS

Permanent Health Insurance					
Provider	Level of benefits	Deferment period	Number of Members	Review date	Total annual Premium
<u>Additional Notes:</u>					

Group Life Assurance				
Provider	Level(s) of Benefits	No of members	Review date	Total annual Premium
<u>Additional Notes:</u>				

DIRECTOR DECLARATION

I/we confirm that the information I/we have provided is to the best of my knowledge correct. I/we have provided this information understanding that it is used to form the basis of any advice and recommendations made to the firm and that I/we am/are not under any obligation to take up any recommendations made.

I/we understand that recommendations may be made which involve a regular financial commitment or the investment of capital. Accordingly, I/we understand that I/we must be sure of the firm's ability to meet that commitment having given consideration to all other expenditure, and the provision of any emergencies, which may require access to funds.

I/we confirm I/we have received a Business Card and Initial Disclosure Document. I/we understand that the Initial Disclosure Document should be read carefully.

ADDITIONAL CLIENT DECLARATION

I/we further declare that I/we did **not wish to disclose** certain financial information and I/we am/are aware that this may prevent my Adviser from being able to identify areas where it might have been appropriate to make recommendations, or, which could have an effect on any recommendations made.

NB. Please understand that we reserve the right to decline to give advice if full information is not provided.

We will be storing the information from this on computer, the purpose being to enable accurate advice to be offered to you. We may wish to write to you informing you of products or services available.

However, if you do not wish to benefit from this service, please tick this box.

	DIRECTOR 1	DIRECTOR 2
Print Name		
Signature		
Consultant		
Date		

	DIRECTOR 3	DIRECTOR 4
Print Name		
Signature		
Consultant		
Date		