

*The*  
  
*Business*  
  
*Mortgage*  
  
*Company*  


**COMMERCIAL  
FINANCE  
APPLICATION FORM**



**DETAILS OF PROFESSIONAL INTRODUCER**

Broker ID

Broker Name

Firm

Address

Telephone  Postcode

Fax

Email

Network Member?  Network Name?

Direct FSA Regulated?  FSA No.

Non FSA Regulated?

CCL no.

**PRODUCT DETAILS**

# APPLICANT

Are you applying as an individual, a partnership or a limited company?

Individual  Partnership Number of partners  Limited company Number of directors

Applicant(s) name (including full company name if 'trading as')

Company registration number

Registered office address

Postcode

Type of business  Year established

Address for correspondence

Postcode

Telephone number  Fax number

# PROPOSAL

Loan required £  Term  years

Purpose for which advance is required and method of repayment (eg. capital repayment, endowment or other)

If refinance please state amount of any outstanding loan/charge including name & address of lender

If you require more funding than is needed to repay existing loans, please define the amounts and purpose (using the continuation sheet if necessary)

If you are purchasing a business, please provide the name and address of the vendor

Please state purchase price and name and address of vendor's accountants and confirm the source of your deposit

# SECURITY

Address of property against which security is to be taken

	<b>Postcode</b>

Estimated value

£	Date purchased (if applicable)	/	/
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Business / property type

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Tenure

Freehold		Leasehold	
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If leasehold, state unexpired term

	years	Rent	£		p.a.
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Give a brief description of property (stating age, accommodation, type of structure etc.)

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Name, address and telephone number of contact to arrange for access to the property for valuation

	<b>Postcode</b>

Do you or a related person dwell or intend to dwell in part of the property? If so, does this part exceed 40% of the total area?

<b>Yes / No</b>
<b>Yes / No</b>

## RELEVANT BUSINESS EXPERIENCE

Please use this section to provide brief details of each of the director's/partner's appropriate business experience, using the continuation sheet if necessary.

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# PERSONAL DETAILS OF EACH OWNER/PARTNER/DIRECTOR

<i>Surname</i>	<input style="width: 95%;" type="text"/>	<i>Forenames</i>	<input style="width: 95%;" type="text"/>
<i>Maiden name / previous name</i>	<input style="width: 95%;" type="text"/>	<i>Title</i>	<input style="width: 100px;" type="text"/> <i>Date of birth</i> <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/>
<i>Marital status</i>	<i>Single</i> <input type="checkbox"/> <i>Married</i> <input type="checkbox"/> <i>Separated</i> <input type="checkbox"/> <i>Divorced</i> <input type="checkbox"/> <i>Widow/er</i> <input type="checkbox"/>		
<i>Nationality</i>	<input style="width: 95%;" type="text"/>	<i>How long resident in UK</i>	<input style="width: 100px;" type="text"/>
<i>Home address</i>	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>	<b>Postcode</b>	<input style="width: 100px;" type="text"/>
<i>Home telephone number</i>	<input style="width: 95%;" type="text"/>		
<i>Is this property</i>	<i>wholly owned?</i> <input type="checkbox"/> <i>owned subject to mortgage?</i> <input type="checkbox"/> <i>rented?</i> <input type="checkbox"/>		
<i>If you rent your home please provide details of your landlord's name and address</i>	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>	<b>Postcode</b>	<input style="width: 100px;" type="text"/>
<i>If you have a mortgage on your home please provide details</i>	<input style="width: 95%;" type="text"/>		
<i>Lender's name</i>	<input style="width: 95%;" type="text"/>		
<i>Lender's address</i>	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>	<b>Postcode</b>	<input style="width: 100px;" type="text"/>
<i>Amount outstanding</i>	<input style="width: 95%;" type="text"/>	<i>Monthly payment</i>	<input style="width: 100px;" type="text"/>
<i>Loan start date</i>	<input style="width: 95%;" type="text"/>	<i>Original loan amount</i>	<input style="width: 100px;" type="text"/>
<i>Further advances (if any)</i>	<input style="width: 95%;" type="text"/>		
<i>Please provide dates and purpose for further advance</i>	<input style="width: 95%;" type="text"/>		
<i>Is the account currently up to date?</i>	<input type="button" value="Yes / No"/>		
<i>Has the account been in arrears during the past two years?</i>	<input type="button" value="Yes / No"/>		
<i>If yes, please give full details and explanation</i>	<input style="width: 95%;" type="text"/>		
<i>How long at this address?</i>	<input style="width: 95%;" type="text"/>		
<i>If less than three years give previous address(es) to cover last three years</i>	<input style="width: 95%;" type="text"/>		
<i>(Use continuation sheet if necessary)</i>	<input style="width: 95%;" type="text"/>		
	<input style="width: 95%;" type="text"/>	<b>Postcode</b>	<input style="width: 100px;" type="text"/>
<i>How long at this address?</i>	<input style="width: 95%;" type="text"/>		

# PERSONAL ASSET AND LIABILITY STATEMENT

**EACH APPLICANT TO COMPLETE A SEPARATE SCHEDULE**

Name of Applicant:

(Where assets/liabilities are jointly held please mark as JT)

Residential Address	Assets	Liabilities
Lender: <input style="width: 400px; height: 20px;" type="text"/>	Value: £ <input style="width: 100px; height: 20px;" type="text"/>	
Monthly Payment: £ <input style="width: 80px; height: 20px;" type="text"/> Account No: <input style="width: 100px; height: 20px;" type="text"/>		o/s balance: £ <input style="width: 100px; height: 20px;" type="text"/>

Other Properties

Total number of properties:  (excluding main residence) Estimated Value: £

Please give full details overleaf of all tenancies that are not party to this application. o/s balance: £

Cash Resources

1) Bank / Building Society  Amount: £

2) Bank / Building Society  Amount: £

Stocks and Shares (quoted)

1) Company:  No. of shares:  Value: £

2) Company:  No. of shares:  Value: £

Life Policies

1) Company:  Surrender value: £

2) Company:  Surrender value: £

Other Investments (please give details)

Value: £

Value: £

Equity in Assets:  Value: £

Other Companies (please give details)

1) Details:  Value: £

2) Details:  Value: £

Other Borrowings (Bank Loans, Overdrafts, Hire purchase, Credit / Charge Cards)

1) Details:  Amounts o/s: £

2) Details:  Amounts o/s: £

(Please put any additional details overleaf.)

Other Liabilities (including guarantees / maintenance payments)

1) Details:  Amounts o/s: £

2) Details:  Amounts o/s: £

Total: £  £

I hereby certify that this is a true and accurate record of my assets and liabilities.

Signature	Print name	Date
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# OCCUPATION AND INCOME DETAILS

## Applicant/Guarantor 1

## Applicant/Guarantor 2

Applicant's Name:



Are you, or is the business:

Employed  Sub-Contractor  Partnership   
 Sole Trader  Shareholder/Director of Ltd Company

Employed  Sub-Contractor  Partnership   
 Sole Trader  Shareholder/Director of Ltd Company

Occupation and Personnel No:





Names and Address of Employer or Business, if self-employed:

  
  


Post code

  
  


Post code

Telephone No:



Fax No:



Nature of business:



Length of current employment or date business established:



Are you employed on a contract basis:  Yes  No

 

If yes, length of contract:

Yrs  Mths  Renewal Date:

Yrs  Mths  Renewal Date:

Shareholding of business:

Yes   No

Yes   No

If current employment is less than 3 years, please give name and address of previous employer:

  
  


Post code

  
  


Post code

Telephone No:



Length of Previous Employment:

Yrs  Mths

Yrs  Mths

If employed: Basic Gross Salary:

£  p.a.

£  p.a.

Overtime/Commission Bonus:

£  p.a.

£  p.a.

Total:

£  p.a.

£  p.a.

If self employed state your Personal Income from the business for the last three trading years:

Year	£
	£
	£

Year	£
	£
	£

Amount and Source of other income:

£

£

**Personal Accountant(s) Details**

Accountant(s) Name:



Accountant(s) Address:

  
  


Post code

  
  


Post code

Telephone No:



Fax No:



Email Address:



Name of individual acting and Qualification:



Name of Bank where business account held:



How long has this account been open:

Yrs  Mths

Yrs  Mths

**Tax Details**

Tax District / Reference:

# CREDIT HISTORY

## APPLICANT ONE

Have you

- ever been refused a mortgage?
- had a judgement for bad debt recorded against you?
- any pending/imminent court proceedings against you?
- failed to keep up payments under any loan?
- ever been declared bankrupt (or had a bankruptcy petition presented against you)?

Yes / No

Yes / No

Yes / No

Yes / No

Yes / No

Do you

- receive income support or any other social payments?
- pay or receive any child maintenance?

Yes / No

Yes / No

If you have answered **yes** to any of the above questions, please give details on the continuation sheet.

## APPLICANT TWO

Have you

- ever been refused a mortgage?
- had a judgement for bad debt recorded against you?
- any pending/imminent court proceedings against you?
- failed to keep up payments under any loan?
- ever been declared bankrupt (or had a bankruptcy petition presented against you)?

Yes / No

Yes / No

Yes / No

Yes / No

Yes / No

Do you

- receive income support or any other social payments?
- pay or receive any child maintenance?

Yes / No

Yes / No

If you have answered **yes** to any of the above questions, please give details on the continuation sheet.

Has either applicant ever been involved as Director/Partner/Controller in any business that has been liquidated/wound-up and/or had any County Court Judgements against their company business?

Yes / No

If yes, give dates and full details: (if there is insufficient space, please use the continuation sheet)

## SOLICITORS PROPOSED TO HANDLE THIS TRANSACTION

Name of firm

Solicitor acting

Address of firm

Postcode

Telephone number

Fax number

DX number

## YOUR BUSINESS ACCOUNTANT

Name of firm

Individual acting

Address of firm

Postcode

Telephone number

Fax number

DX number

## YOUR BUSINESS BANKERS

Name of bank

Manager's name

Address of bank

Postcode

Telephone number

## MUST BE COMPLETED IN ALL CIRCUMSTANCES

## PROPERTY INSURANCE

In all cases index-linked building insurance must be maintained for the rebuilding cost of the property. This will be your responsibility. However, in certain circumstances we may have to arrange cover on your behalf.

**Insurance Information:** A contract of insurance requires you to disclose any material fact which would influence an insurer in the assessment or acceptance of your proposal, and therefore the following questions must be answered:

- Have you, (or in the case of second/holiday homes, any persons normally resident with you):
  - ever been convicted of any offence (other than driving offences)
  - had any insurer decline or cancel insurance or impose special terms
  - claimed on any home or personal insurance in the last three years
- Will the property be left unoccupied for more than 30 consecutive days a year

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"/>

If you have answered "Yes" to any of the above questions, or if you are in doubt as to whether any fact is material, you should provide full details on the continuation sheet.

## DECLARATION

### General

By signing below I confirm to you, TBMC & your lender that;

- the information given in this form is true and I will notify you promptly of any changes that may occur before the mortgage is completed;
- you may make all enquiries you feel appropriate (including with the Inland Revenue, any credit reference agency or any past/present employer, accountant, lender or bank) for deciding whether to proceed with this application;
- any solicitor acting for both you and I may disclose to you any information or documentation he/she or you considers relevant in your decision to lend and I waive any duty of confidentiality or privilege which may otherwise exist in relation to this mortgage transaction;
- if you provide me with a copy of, or extract from your Security Assessment and Valuation Report, you make no representation or warranty (expressed or implied) nor accept any liability or responsibility in respect of it's contents;
- any payments in respect of the mortgage are made for and on behalf of all parties to it;
- any additional security insurance arrangements are for your benefit only and that I have no right or claim in relation to them;
- you may decline this application without stating a reason.

### Applications by Limited Companies

Where the applicant is a limited company, in addition to (a)-(g) above, in my capacity as a director of the applicant company and a guarantor I confirm that:-

- I am the only director of the company or each of the people signing below is a director and together we are the only directors;
- The company has the power to borrow the advance applied for and to mortgage the property(ies) set out in the application as security.

### Insurance

I/We understand that you will pass the information on this form and about an incident I/We may give details of, to IDS Ltd, so that they can make it available to other insurers. I/We also understand that, in response to any searches you may make in connection with this application or any incident I/We have given details of, IDS Ltd may pass you information it has received from other insurers about other incidents involving anyone insured under the policy.

### Use of Information

In considering your application we will search your record at one or more credit reference agencies. They will add to your record details of our search and your application and this will be seen by other organisations that make searches. Information held about you by the credit reference agencies may already be linked to records relating to one or more of your partners. For the purposes of this application you may be treated as financially linked and your application will be assessed with reference to any "associated" records.

If you are a joint applicant or if you have told us of some other financial association with another person you must be sure that you are entitled to:

- disclose information about your joint applicant and anyone referred to by you.
- authorise us to search, link or record information at credit reference agencies about you and anyone referred to by you.

An "association" between joint applicants and between you and anyone you tell us is your financial partner will be created at credit reference agencies. This will link your financial records, each of which will be taken into account in all future applications by either or both of you. This will continue until one of you successfully files a disassociation at the credit reference agencies.

We may use a credit scoring or other automated decision making system when assessing your application.

It is important that you give us accurate information. We will check your details with fraud prevention agencies and if you give us false or inaccurate information and we suspect fraud, we will record this.

If we are unable to accept your application we will/may pass it onto selected third parties who may also search your records at credit reference agencies. The record of these searches will also be kept and seen by other organisations that make searches. The selected third parties to whom we pass your application may also use automated systems to carry out the checks referred to above for the purposes set out below.

Your records will be shared with other organisations and used by us and them to:-

- Help make decisions about credit for you and members of your household;
- Trace debtors, recover debt, prevent money laundering and fraud.

We and the credit reference agencies and the fraud prevention agencies will also use the records for statistical analysis about credit, insurance and fraud.

Fraud prevention agency records will also be shared with other organisations to help make decisions on motor, household, credit, life insurance and other insurance proposals and insurance claims, for you and other members of your household.

In addition we may disclose details held on our records about you or this application to any prospective insurer who may use them to help decide whether or not to offer cover and in fraud prevention.

You may telephone us on the number quoted on the inside cover of this form and we will provide you with the lender's telephone number, if you want to have details of those credit reference and fraud prevention agencies from whom we obtain and to whom we pass information about you. You have a legal right to these details.

You have a right to receive a copy of the information we hold about you if you apply to us in writing. A fee will be payable.

### Securitisation

I confirm that you may securitise any mortgage or guarantee that I or the company may have with you. I understand that securitisation typically involves you transferring all or some of the rights and duties that go with the mortgage or guarantee to an investor who normally asks you to carry on administering them as though your own. So that, for example, following securitisation you would normally continue to collect payments and should I experience any difficulties in making payments, or have any other queries, I should contact you.

### BACS Advance Notice Waiver Agreement

By signing the Direct Debit Instruction I/We:

- Agree to waive the BACS 10 working day written advance notice requirement;
- Acknowledge that (1) the first part month payment will be collected by direct debit from my/our bank/building society account and thereafter on agreed collection date(s) following completion of the mortgage and (2) you may initiate specific direct debit(s) should the need arise following my/our agreement which may be made by telephone or written contact.

## IMPORTANT – USE OF YOUR INFORMATION

- You have a right to know how we will use your personal information. It is important that you should read the "Use of Information" notice above before you sign.
- We may telephone or write to you about products or services of ours or others which may be of interest to you. We may pass details about you and the conduct of your account with us to selected third parties who may telephone or write to you about their products or services. You have a right at any time to stop us from contacting you or giving your details to others for these purposes. You may write to us at the address on the inside of the front cover of the application form, and we will provide you with the lender's Customer Services Department address and/or register your telephone number under the telephone preference scheme.

**ALL APPLICANTS/GUARANTORS TO THE MORTGAGE ARE REQUIRED TO SIGN THE FOLLOWING SECTION.**

Signature	Print name	Date
Signature	Print name	Date
Signature	Print name	Date
Signature	Print name	Date

**YOUR PROPERTY IS AT RISK AND MAY BE REPOSSESSED  
IF YOU DO NOT KEEP UP PAYMENTS ON A MORTGAGE OR OTHER LOAN SECURED ON IT**  
The lender accepts no responsibility for any representations made by an employee or agent of the lender or any other person unless these are incorporated in the Offer of Loan or are subsequently confirmed by the lender in writing.

## FURTHER INFORMATION



# CARD PAYMENT AUTHORITY

I wish to pay by: Visa / Delta / Eurocard Mastercard / Switch/Maestro / Solo

I authorise you to debit my account with the amount of £

My card number is:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Issue number  
(Switch/Maestro & Solo cards)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Start date

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Expiry date

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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CCV No.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Name (as on card)

Cardholder's Address

Postcode

Signature

Telephone