

# Decision in Principle

This form must be completed by the intermediary.

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**0800 849 1352**



  
commercial  
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## Intermediary details

**Contact name:**

Mobile:

Email:

**Company name:**

Phone no.

Fax no.

## Applicant Details

**Applicant type:**  Sole trader  Individual  limited company / partnership

Trading / business name:

Nature of business:

Business address:

Postcode:

Is the above address to be the security address?

Yes  No

**First Applicant** Title: (Mr/Mrs/Miss/Ms/Other)

First & Surname:

Date of birth: DD / MM / YYYY

Phone no: Home:

Work:

Mobile:

Fax:

Email:

Home address

Postcode:

**Second Applicant** Title: (Mr/Mrs/Miss/Ms/Other)

First & Surname:

Date of birth: DD / MM / YYYY

Phone no: Home:

Work:

Mobile:

Fax:

Email:

Home address

Postcode:

**Third Applicant** Title: (Mr/Mrs/Miss/Ms/Other)

First & Surname:

Date of birth: DD / MM / YYYY

Phone no: Home:

Work:

Mobile:

Fax:

Email:

Home address

Postcode:

**Forth Applicant** Title: (Mr/Mrs/Miss/Ms/Other)

First & Surname:

Date of birth: DD / MM / YYYY

Phone no: Home:

Work:

Mobile:

Fax:

Email:

Home address

Postcode:

Contact preference: (please circle which applicant you refer to) **App no:** 1 2 3 4 Work | 1 2 3 4 Mobile | 1 2 3 4 Home | 1 2 3 4 Email

Correspondence method: **App no:** 1 2 3 4 by email | 1 2 3 4 by fax | 1 2 3 4 by post

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## Mortgage Requirements

Preliminary proposal for a commercial mortgage: £  Over:  years (10-30 available)

Purpose of loan:

What broker fee (if any) will be charged to the client? (Please state if none applies)  None

Broker fee: £  CF fee (1.5%): £  Sols VAT (1.5%): £

### FSA regulated mortgages:

Does the applicant or any relatives of the applicant reside in a greater than 40% share of the property?  Yes  No

Is the business turnover less than £1m per annum?  Yes  No

## Primary Security

Address of property offered as primary security:

Postcode

Brief description of property:

Tenure of security:  Freehold  Freehold (scotland only)  Leasehold\* \* years remaining on lease:

Where property owned. Date purchased: DD/MM/YY Purchase Price: £  Current Value: £

Amount of outstanding mortgage: £

Name of mortgagee / landlord:  Monthly payment / Rent £

Where property is to be purchased. Purchase Price: £

Source of deposit:

Business Stock Value: £  Fixtures and fittings value: £

## Additional Security

Address of property offered as additional security:

Postcode

Brief description of property:

Tenure of security:  Freehold  Freehold (scotland only)  Leasehold\* \* years remaining on lease:

Where property owned. Date purchased: DD/MM/YY Purchase Price: £  Current Value: £

Amount of outstanding mortgage: £

Name of mortgagee / landlord:  Monthly payment / Rent £

## Residential Property (if different property to additional security)

Where property owned. Date purchased: DD/MM/YY Purchase Price: £  Current Value: £

Amount of outstanding mortgage: £

Name of mortgagee / landlord:  Monthly payment / Rent £

## Credit History

Current CCJs  Yes  No    How many current CCJs in past 12 months?    Amount: £

How many current CCJs in previous 12 months?    Amount: £

IVA?  Yes  No    Satisfied?  Yes  No

Missed mortgage payments in the last 12 months:

Bankruptcy?  Yes  No

Have they been discharged from bankruptcy?  Yes\*  No  N/A    If 'Yes' what date: DD / MM / YYYY

## Financial Status - Income Evidence

2 Years audited accounts     Management accounts     Rental income

Employment income     Declaration & Accounts letter     Self declaration with projections (new business start-ups)

### Ability to repay - please state accounting year.

Trading Style:  Retail     Manufacturing     Distribution     Service     Other\*

\* If 'Other' please give details:

Turnover: £    Net profit: £    Gross profit: £

Other Income: £    Current annual mortgage payments: £

Rental amount: £    **PCM**    Self certifying?  Yes\*  No    Partially self certifying?  Yes\*  No

\*If 'yes', certified income per annum: £

## Rate Options

Product:

Term over:    years    Margin:    Interest only period:

## Additional Information

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Once this form has been completed in full, please fax it to: **01923 655 440** or post it to us at the address below.

If you have any questions call us on **freephone: 0800 849 1352**



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