

Commercial



Banking &



Mortgage



Services



COMMERCIAL FINANCE APPLICATION FORM

<http://www.cbams.net>

Tel/Fax: 01269 822709



Est 1992

Member of the
National Association of
Commercial Finance Brokers

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(Please do not write on this page)

Consultant

Company Code

Consultant Code:

Address

Postcode

Telephone

Fax

Details of Professional Introducer (if applicable)

Name

Firm

Address

Postcode

Telephone

Fax

CML Reference No.

CCL No.

PRODUCT

APPLICANT

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

Individual

Partnership
(Number of Partners)

Limited Company
(Number of Directors)

Proposed borrowed (*trading name*)

Company registration number

Registered office address

Postcode

Type of business

Address for correspondence

Telephone Number

Fax number

PROPOSAL

Advance 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 and account number 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 vendor

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

SECURITY

Address of proposed security

	Postcode

Business / property type

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Estimated Value

£	Date purchased (if applicable)	/	/
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Tenure

Freehold		Leasehold	
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If leasehold, state unexpiry term

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

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

Postcode

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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SOLICITORS PROPOSED TO HANDLE THIS TRANSACTION

Name of firm	<input type="text"/>
Solicitor acting	<input type="text"/>
Address of firm	<input type="text"/>
	<input type="text"/>
	<input type="text" value="Postcode"/>
Telephone number	<input type="text"/>
Fax number	<input type="text"/>
DX Number	<input type="text"/>

YOUR BUSINESS ACCOUNTANT

Name of firm	<input type="text"/>
Solicitor acting	<input type="text"/>
Address of firm	<input type="text"/>
	<input type="text"/>
	<input type="text" value="Postcode"/>
Telephone number	<input type="text"/>
Fax number	<input type="text"/>
DX Number	<input type="text"/>

YOUR BUSINESS BANKERS

Name of bank	<input type="text"/>
Manager's name	<input type="text"/>
Address of bank	<input type="text"/>
	<input type="text"/>
	<input type="text" value="Postcode"/>
Telephone number	<input type="text"/>
Account number	<input type="text"/>
Sort code	<input type="text"/> <input type="text"/> <input type="text"/>

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. To simplify and speed your application we or the lender can arrange suitable cover on your behalf under a competitively priced block policy.

Insurance Information: Because of our special arrangements with Insurers a detailed proposal form is not required. However, as a contract of insurance requires you to disclose any material fact which would influence an insurer in the assessment or acceptance of your proposal, the following questions should be answered:

- | | | | |
|--|--|------------------------------|-----------------------------|
| 1. Have you or any persons normally resident with you: | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (a) ever been convicted of any offence (other than driving offences) | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (b) had any insurer decline or cancel insurance or impose special terms | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (c) claimed on any home or personal insurance in the last three years | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Will the property be left unoccupied for more than 30 consecutive days a year | | 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. If you give incorrect or misleading information any future claim, or your cover as a whole could be affected.

Insurers and their agents share information with each other to prevent fraudulent claims. They decide whether to accept your application and if so, on what terms, by using the Claims and Underwriting Exchange register. If you make a claim, the information you give on this form along with other information about the claim will be put on the register and made available to participants,

DECLARATION

General

By signing below I confirm to you, CBMS & your lender that:

- a) 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;
- b) 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;
- c) 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;
- d) 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 its contents;
- e) any payments in respect of the mortgage are made for and on behalf of all parties to it;
- f) any additional security insurance arrangements are for your benefit only and that I have no right or claim in relation to them;
- g) 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:-

- h) 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;
- i) 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,

We will 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 in onto other members of our group or 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 organizations that make searches, The other group members or 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 organizations 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:

- a) Agree to waive the BACS 10 working day written advance notice requirement;
- b) Acknowledge that (1) 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

- 1 You have a right to know how we will use your personal information. It is important that you should read the "Use of your information" notice before you sign.
- 2 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 other companies within our group or selected third parties who may telephone or write to you about their products or services. You have the 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

YOUR PROPERTY IS AT RISK 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.

PERSONAL DETAILS OF EACH OWNER/PARTNER/DIRECTOR

Surname Forenames
Maiden name (if applicable) Date of birth
Marital status Single Married Seperated
 Divorced Widow

Nationality How long resident in UK
Home address

 Postcode

Home telephone number
Is this property wholly owned? owned subject to mortgage? rented?
If you rent your home please provide details of your landlord's name and address

 Postcode

If you have a mortgage on your home please provide details

Lender's name Mortgage account number
Lender's address

 Postcode

Amount outstanding Monthly payment
Loan start date Original loan amount
Further advances (if any)
Please provide details and purpose for further advance

Is the account up to date? Yes/No

Has the account been in arrears during the past two years? Yes/No

If yes, please give full details and explanation

How long at this address?

If less than three years, give presvious address(es) to cover the last three years

How long at this address?

TAX AND BANK DETAILS

National insurance number		Tax district & reference number		
Name and address of personal bankers				
	Postcode			
Bank account number		Sort code		

CREDIT ADDRESS

Have you

- ever been refused a mortgage?
Yes/No
- had a judgement for bad debt recorded against you?
Yes/No
- any pending/imminent court proceedings against you?
Yes/No
- failed to keep up payments under any loan?
Yes/No
- ever been declared bankrupt (or had a bankruptcy petition presented against you?)
Yes/No

Do you

- receive income support or any other social payments?
Yes/No
- pay or receive any child maintenance?
Yes/No

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

PERSONAL NET WORTH STATEMENT

	ASSETS		LIABILITIES
Own home	£ <input style="width: 80%;" type="text"/>	Mortgage	£ <input style="width: 80%;" type="text"/>
Other personal property	£ <input style="width: 80%;" type="text"/>	Mortgages on other personal property	£ <input style="width: 80%;" type="text"/>
Bank & building society deposits	£ <input style="width: 80%;" type="text"/>	Personal credit e.g. overdrafts, credit cards, h.p.	£ <input style="width: 80%;" type="text"/>
Investments e.g. shares, PEPs, endowments	£ <input style="width: 80%;" type="text"/>	Personal tax liabilities	£ <input style="width: 80%;" type="text"/>
Net business value (your share)	£ <input style="width: 80%;" type="text"/>	Other	£ <input style="width: 80%;" type="text"/>
Total assets	£ <input style="width: 80%;" type="text"/>	Total liabilities	£ <input style="width: 80%;" type="text"/>
Net worth (Total assets less total liabilities)	£ <input style="width: 80%;" type="text"/>		

CONTINUATION SHEET

Please use this section to provide details of any continuing incomes or other business interests or other information which may be considered relevant to your application.