

OWNER OCCUPIER MORTGAGE
APPLICATION FORM

SOURCE OF APPLICATION

HOW DID YOU LEARN ABOUT THE SOCIETY?

ARE ANY OF THE APPLICANTS ALREADY EXISTING ACCOUNT HOLDERS WITH EITHER FAMILY BUILDING SOCIETY OR NATIONAL COUNTIES BUILDING SOCIETY?

 YES NO

IF YES, DO THEY HAVE A FIRST HOME SAVER OR HELPING HAND SAVER ACCOUNT WITH THE SOCIETY?

 YES NO

SPECIFY ACCOUNT:

ACCOUNT NAME:

ACCOUNT NAME:

ACCOUNT NUMBER:

ACCOUNT NUMBER:

IF THIS APPLICATION HAS BEEN SUBMITTED BY AN INTERMEDIARY PLEASE ANSWER THE FOLLOWING:

DID YOU HEAR ABOUT THE SOCIETY FROM CONTACT WITH A BUSINESS DEVELOPMENT MANAGER?

 YES NO

DID YOU HEAR ABOUT THE SOCIETY FROM YOUR NETWORK OR A MORTGAGE CLUB?

 YES NO

WHICH SOURCING SYSTEM DO YOU USE?

PRE-AGREED ENQUIRIES

WAS THE APPLICATION DISCUSSED WITH US OR A DECISION IN PRINCIPLE OBTAINED PRIOR TO SUBMISSION?

 YES NO

IF YES, PLEASE STATE WITH WHOM AND WHEN
(please include any email correspondence):

In addition to ensuring you send us the minimum document requirements, stated on page 4, if your client's application is complex, please tell us their circumstances and full details of the purpose of borrowing. If you require more space please continue in the additional information section (Section Nine - Additional Information).

FOR COMPLETION BY AN INTERMEDIARY ONLY

This section must be completed in full when an application is submitted to the Family Building Society via an intermediary.

NAME:	<input type="text"/>	INDIVIDUAL FS REGISTER REFERENCE NO:	<input type="text"/>
FIRM:	<input type="text"/>	FIRM FS REGISTER REFERENCE NO:	<input type="text"/>
ADDRESS:	<input type="text"/>		POSTCODE: <input type="text"/>
PHONE:	<input type="text"/>	FAX:	<input type="text"/>
EMAIL:	<input type="text"/>		
IF NOT DIRECTLY AUTHORISED, NAME OF PRINCIPAL:	<input type="text"/>		
PRINCIPAL FIRM'S FS REGISTER REFERENCE NO:	<input type="text"/>		

IF YOU ARE SUBMITTING THIS APPLICATION VIA A MORTGAGE CLUB, NETWORK OR PACKAGER PLEASE STATE WHICH ONE:

MORTGAGE CLUB:		NETWORK:	
PACKAGER:		PACKAGER CONTACT NAME / TEAM:	
PACKAGER'S REFERENCE:		PACKAGER CONTACT EMAIL:	
PACKAGER CONTACT PHONE NO.:			

If this application is being submitted via Premier Mortgage Services or if you are directly authorised (and are not submitting the application via another club) please provide your bank details below to enable us to pay your procurement fee directly to you:

ACCOUNT NAME:

SORT CODE:

ACCOUNT NUMBER:

LEVEL OF ADVICE GIVEN TO APPLICANT: EXECUTION ONLY ADVICE AND RECOMMENDATION

HOW WAS YOUR ADVICE GIVEN TO THE APPLICANT? FACE TO FACE, SUBSEQUENTLY BEING CONFIRMED IN WRITING

OVER THE PHONE, SUBSEQUENTLY BEING CONFIRMED IN WRITING

IN WRITING ONLY

IF YOU ARE CHARGING THE CUSTOMER A FEE FOR YOUR SERVICE:

INTERMEDIARY

PACKAGER

HOW MUCH ARE YOU CHARGING:		HOW MUCH ARE YOU CHARGING:	
ON APPLICATION*	£ <input type="text"/>	ON APPLICATION*	£ <input type="text"/>
AT OFFER*	£ <input type="text"/>	AT OFFER*	£ <input type="text"/>
ON COMPLETION*	£ <input type="text"/>	ON COMPLETION*	£ <input type="text"/>

IS YOUR FEE REFUNDABLE? YES NO

*Please leave blank where no fee is being charged.

IS YOUR FEE REFUNDABLE? YES NO

*Please leave blank where no fee is being charged.

I confirm that the information given above is correct and that any third party who arranged, advised on or introduced this mortgage is either authorised by the Financial Conduct Authority to arrange, advise on or introduce mortgages, as appropriate, or is exempt from authorisation. Based on my knowledge of the customer the information contained in the application form is reasonable. All mortgage applications submitted by intermediaries are subject to the Society's Terms of Business, which can be found on the Checklists and Forms page of our website. I confirm that I have read and understood the Society's Terms of Business and that I agree to be bound by them. I confirm I have provided the clients with a copy of the 'How We Use Personal Information' document before submitting this application. A copy of this is available on the Checklists and Forms page of our website.

SIGNATURE: DATE: DD MM YYYY

FOR OFFICE USE:

SOURCE CODE: BRANCH CODE:

DOCUMENT CHECKLIST FOR OWNER OCCUPIER MORTGAGE APPLICATIONS

To help us process your clients' application quickly, here's a list of the minimum documents we require on receipt of the application

OUR TOP TIPS TO HELP SPEED UP YOUR APPLICATION

- ▶ Fully complete the application form and any required supplementary forms. Ensure these, plus the declaration and Direct Debit mandate, are signed.
- ▶ All supporting documentation must be Intermediary Certified. You can certify the first page of each set of documentation if it's attached together.
- ▶ Missing or incorrect documentation can slow down our process and delay the application. Review any bank statements to ensure they agree with information on the application, for example in regards to financial commitments.

IDENTIFICATION

We carry out an electronic ID check on all applicants. If this fails you will need to provide us with ID documents.

PROOF OF INCOME

Property or investment income

- Two years most recent SA302s

Employed

- Three months most recent payslips
- Most recent P60

Self Employed

- Two years most recent accounts or two years most recent SA302s / Tax Calculations (100% Completed) or FBS Accountants Certificate
- Accountant's details on the application form

If the mortgage term takes the applicant beyond retirement or age 70, or they are already retired

- Most recent Pension Statement or letter from Department for Work and Pensions
- Most recent annual Pension Statement
- Most recent P60

BANK STATEMENTS

- Three full months most recent consecutive bank statements for all current accounts, to evidence all income and outgoings
- Bank statements must show the applicants name, account number, sort code and bank logo
- Where applicants are renting their current home we require 12 months statements showing rent payments
- Where applicants already have a mortgage, we require proof of mortgage payments. We carry out an electronic credit check on all applicants which usually confirms this. However if this fails, we will need proof. This can be provided from 12 months bank statements, the latest mortgage statements, or a combination. To speed up our underwriting, you can provide these on submission.

OTHER ITEMS

- Background BTLs**
 - Evidence of rent being paid in and mortgage being paid out (bank statements requested above may already cover this).
- Evidence of deposit for purchases**
 - Evidence of deposit in an account held by the applicant(s)
 - For gifted deposits, we require evidence of the funds in a UK account and the giftors details (name, date of birth, relationship to applicants).
- Retirement Interest Only (RIO) mortgages**
 - Completed Registered Contact Declaration

SECTION ONE - APPLICANT(S) DETAILS

APPLICANT ONE

APPLICANT TWO

TITLE:	MR / MRS / MISS / MS	MR / MRS / MISS / MS
SURNAME:		
FORENAMES*		
DATE OF BIRTH:	DD MM YYYY	DD MM YYYY
MARITAL STATUS:		
NATIONALITY:	BRITISH OTHER	BRITISH OTHER
HAS YOUR NAME EVER CHANGED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, PLEASE CONFIRM YOUR PREVIOUS NAME:		
PHONE - WORK**		
PHONE - HOME**		
PHONE - MOBILE**		
EMAIL ADDRESS**		
AGES AND NUMBER OF DEPENDANTS (If 17 or over please detail in Section Six on page 12)	NUMBER <input type="text"/>	AGES <input type="text"/>
PLANNED RETIREMENT AGE:	<input type="text"/>	<input type="text"/>

* Please include all forenames.

** Please provide at least one of the above contact methods. If we have a home or mobile phone number or email address for you, we may use these to get in touch regarding your application or with important information about your account.

ABOUT YOUR HOME

CURRENT ADDRESS:		
POSTCODE:		
TERMS OF OCCUPANCY:	<input type="checkbox"/> OWNER <input type="checkbox"/> TENANT / LODGER <input type="checkbox"/> LIVING WITH RELATIVES / FRIENDS	<input type="checkbox"/> OWNER <input type="checkbox"/> TENANT / LODGER <input type="checkbox"/> LIVING WITH RELATIVES / FRIENDS
LENGTH OF TIME AT CURRENT ADDRESS:	Years <input type="text"/> Months <input type="text"/>	Years <input type="text"/> Months <input type="text"/>

CURRENT MORTGAGE / TENANCY

NAME OF LENDER / LANDLORD:		
ADDRESS OF LENDER / LANDLORD:		
POSTCODE:		
ACCOUNT NUMBER:		
DATE LOAN OR TENANCY COMMENCED:		
CURRENT AMOUNT OUTSTANDING (INCLUDING ANY REDEMPTION INTEREST IF APPLICABLE):	£ <input type="text"/>	£ <input type="text"/>
MONTHLY REPAYMENT OR RENT PAYMENT:	£ <input type="text"/>	£ <input type="text"/>
WILL THE LOAN REMAIN WHEN THIS MORTGAGE COMMENCES?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, PLEASE GIVE REASON:		

PREVIOUS ADDRESS HISTORY

A full three year address history is required. If you require more room please continue in Section Nine - Additional Information

PREVIOUS ADDRESS:

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POSTCODE:

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TERMS OF OCCUPANCY:

<input type="checkbox"/> OWNER	<input type="checkbox"/> TENANT / LODGER	<input type="checkbox"/> OWNER	<input type="checkbox"/> TENANT / LODGER
<input type="checkbox"/> LIVING WITH RELATIVES / FRIENDS		<input type="checkbox"/> LIVING WITH RELATIVES / FRIENDS	

LENGTH OF TIME AT THIS ADDRESS:

Years	Months	Years	Months
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PREVIOUS ADDRESS:

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POSTCODE:

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TERMS OF OCCUPANCY:

<input type="checkbox"/> OWNER	<input type="checkbox"/> TENANT / LODGER	<input type="checkbox"/> OWNER	<input type="checkbox"/> TENANT / LODGER
<input type="checkbox"/> LIVING WITH RELATIVES / FRIENDS		<input type="checkbox"/> LIVING WITH RELATIVES / FRIENDS	

LENGTH OF TIME AT THIS ADDRESS:

Years	Months	Years	Months
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SECTION TWO - INCOME DETAILS

EMPLOYED INCOME

APPLICANT ONE

APPLICANT TWO

OCCUPATION:

DO YOU HAVE A FINANCIAL STAKE IN THE COMPANY? YES NO YES NO

IF YES, STATE THE EXTENT OF YOUR SHARE: % SHARE % SHARE

EMPLOYER'S NAME:

NATURE OF BUSINESS:

PLEASE PROVIDE THE NAME, JOB TITLE AND EMAIL ADDRESS OF THE PERSON TO WHOM WE SHOULD WRITE FOR A REFERENCE:

REFEREE NAME:

REFEREE JOB TITLE:

REFEREE EMAIL:

EMPLOYEE / STAFF NO:

ADDRESS OF EMPLOYER:

POSTCODE:

EMPLOYER'S PHONE NO:

IS YOUR JOB PERMANENT AND FULL TIME ? YES NO YES NO

IF NO, PLEASE PROVIDE DETAILS:

ARE YOU CURRENTLY IN A PROBATIONARY PERIOD? YES NO YES NO

IF YES, PLEASE CONFIRM WHEN THIS FINISHES: DD MM YYYY DD MM YYYY

IS YOUR PLACE OF WORK THE ADDRESS OF THE EMPLOYER NOTED ABOVE? YES NO YES NO

IS YOUR PLACE OF WORK WITHIN DAILY COMMUTING DISTANCE OF THE PROPERTY TO BE MORTGAGED TO US? YES NO YES NO

If you have answered NO to either or both of the above questions please explain the position.

LENGTH OF TIME WITH EMPLOYER*: Years Months Years Months

*If less than three years please provide a full three year employment history in Section Nine - Additional Information

BASIC GROSS SALARY:	£	Per Year	£	Per Year
GUARANTEED OVERTIME / BONUS / COMMISSION:	£	Per Year	£	Per Year
NON-GUARANTEED OVERTIME / BONUS / COMMISSION:	£	Per Year	£	Per Year
TOTAL:	£	Per Year	£	Per Year

SELF-EMPLOYED INCOME

APPLICANT ONE

APPLICANT TWO

BUSINESS NAME:

NATURE OF BUSINESS:

ADDRESS OF BUSINESS:

POSTCODE:

YOUR SHARE OF THE NET PROFIT DURING THE
LAST THREE YEARS:

£	YE 20 ____
£	YE 20 ____
£	YE 20 ____

£	YE 20 ____
£	YE 20 ____
£	YE 20 ____

PLEASE STATE PERCENTAGE SHAREHOLDING:

	% SHARE
--	---------

	% SHARE
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LENGTH OF TIME IN BUSINESS:

Years	Months
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Years	Months
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If less than three years please provide a full three year employment history in Section Nine - Additional Information

ACCOUNTANT'S NAME:

ACCOUNTANT FIRM:

QUALIFICATIONS:

ADDRESS:

POSTCODE:

OTHER SOURCES OF INCOME e.g. pension, investment, rental, maintenance payments

SOURCE:

ANNUAL AMOUNT:

£	Per Year
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£	Per Year
---	----------

SOURCE:

ANNUAL AMOUNT:

£	Per Year
---	----------

£	Per Year
---	----------

SOURCE:

ANNUAL AMOUNT:

£	Per Year
---	----------

£	Per Year
---	----------

INCOME IN RETIREMENT Please detail the sources of income / capital you expect or plan to use to meet payments in retirement if in addition to the above

SOURCE:

ANNUAL AMOUNT:

£	Per Year
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£	Per Year
---	----------

SOURCE:

ANNUAL AMOUNT:

£	Per Year
---	----------

£	Per Year
---	----------

SOURCE:

ANNUAL AMOUNT:

£	Per Year
---	----------

£	Per Year
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FOR MORTGAGES THAT EXTEND INTO RETIREMENT

CUSTOMER DECLARATION

If you have requested a term which extends the Mortgage beyond normal retirement age, it is possible that your income(s) may reduce. You will need to have a plan in place to cover the mortgage repayments.

IF YOU HAVE ANY QUESTIONS OR CONCERNS REGARDING THE SUITABILITY OF YOUR FINANCIAL ARRANGEMENTS WHICH ARE INTENDED TO PROVIDE YOU WITH A RETIREMENT INCOME YOU SHOULD OBTAIN THE ADVICE OF A FINANCIAL ADVISOR BEFORE PROCEEDING FURTHER.

FOR JOINT APPLICANTS

We have considered the implications for the survivor should the death of one of us occur during the term of the mortgage and understand that the survivor will still have an obligation to meet the monthly mortgage payments. We have also considered the additional costs that may need to be met in relation to care. We consider our income, protection and care fees planning provisions, such as life assurance, investments or plans to downsize, to be satisfactory in order to meet our financial obligations.

We confirm that no advice has been provided by Family Building Society as to the suitability of any pension arrangements or investments intended to provide me / us with a retirement income.

FOR SOLE APPLICANT

I have considered the implications of the additional costs that may need to be met in relation to care. I consider my income / protection and care fees planning provisions, such as investments or plans to downsize or sell, to be satisfactory in order to meet my financial obligations.

I confirm that no advice has been provided by Family Building Society as to the suitability of any pension arrangements or investments intended to provide me / us with a retirement income.

NAME OF FIRST APPLICANT	SIGNED:		DATE:	DD	MM	YYYY
NAME OF SECOND APPLICANT	SIGNED:		DATE:	DD	MM	YYYY

SECTION THREE - FINANCIAL COMMITMENTS

LOANS OR CREDIT CARDS

PLEASE DETAIL ANY CREDIT COMMITMENTS E.G. LOANS, BANK OVERDRAFTS, STUDENT LOANS, HIRE PURCHASE AND CREDIT CARDS (INCLUDING THOSE CLEARED EACH MONTH) BELOW:

NAME OF LENDER:	DATE CREDIT STARTED:		CURRENT AMOUNT OUTSTANDING:	MONTHLY PAYMENT:	PURPOSE OF CREDIT:	WILL THIS BE REPAYED ON OR BEFORE COMPLETION OF THE MORTGAGE?		PLEASE INDICATE WHICH APPLICANT IS THE ACCOUNT HOLDER?		
	MM	YYYY	£	£		YES	NO	ONE	TWO	JOINT
	MM	YYYY	£	£		YES	NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	MM	YYYY	£	£		YES	NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	MM	YYYY	£	£		YES	NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	MM	YYYY	£	£		YES	NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	MM	YYYY	£	£		YES	NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	MM	YYYY	£	£		YES	NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REGULAR FINANCIAL COMMITMENTS

If you have one or more regular financial commitments not already mentioned, please state what they are and provide the monthly amount. If you need more space, please provide further details in Section Nine - Additional Information.

MAINTENANCE PAYMENTS:	£	Per Month	£	Per Month
SCHOOL FEES:	£	Per Month	£	Per Month
LIFE ASSURANCE / CRITICAL ILLNESS PREMIUMS	£	Per Month	£	Per Month
OTHER:	£	Per Month	£	Per Month

DISCLOSURE

HAVE YOU EVER:

HAD A COURT ORDER OR DEBT REGISTERED AGAINST YOU OR ARE ANY SUCH PROCEEDINGS PENDING? If YES, a Certificate of Satisfaction must be presented to the Society.

YES NO YES NO

MADE ARRANGEMENTS WITH CREDITORS OR BEEN MADE BANKRUPT OR ARE ANY SUCH PROCEEDINGS PENDING?

YES NO YES NO

HAD A PAYDAY LOAN IN THE LAST THREE YEARS?

YES NO YES NO

HAD A MORTGAGE APPLICATION ON A PROPERTY REFUSED?

YES NO YES NO

BEEN IN EXCESS OF TWO MONTHLY PAYMENTS IN ARREARS WITH ANY CREDIT OR MORTGAGE AGREEMENTS OR HAD A MORTGAGED PROPERTY REPOSSESSED?

YES NO YES NO

If you have answered YES to any of the above please provide further details below.

SECTION FOUR - LOAN DETAILS

PROPERTY PURCHASE

PURCHASE PRICE: £ ARE YOU A FIRST TIME BUYER? YES NO

ARE YOU BORROWING OR BEING GIFTED OTHER MONEY TOWARDS THE PURCHASE COSTS APART FROM THIS MORTGAGE? YES NO

IF YES, PLEASE STATE THE AMOUNT BEING GIFTED BORROWED (TICK AS APPLICABLE): £

IF NO, PLEASE INDICATE SOURCE OF DEPOSIT:

THE MONTHLY REPAYMENT, IF APPLICABLE: £

ALSO PLEASE STATE THE NAME OF THE LENDER OR THE PERSON(S) PROVIDING THE MONEY AND, IF APPLICABLE, YOUR RELATIONSHIP TO THEM:

If funds are being gifted we will require the giftor to sign our standard deed of gift declaration which is issued with the Mortgage Offer.

IS THE PROPERTY BEING PURCHASED SUBJECT TO A DISCOUNT / INCENTIVE FROM A DEVELOPER OR UNDER THE COUNCIL RIGHT TO BUY OR OTHER HOUSING DISCOUNT SCHEME? YES NO

IF YOU ARE SELLING YOUR OWN HOME, PLEASE STATE THE SELLING PRICE: £

PROPERTY REMORTGAGE

ESTIMATED PROPERTY VALUE: £ **Please note, a minimum owner occupied property value applies. Please refer to product sheet.**
 ORIGINAL PURCHASE PRICE: £ ORIGINAL PURCHASE DATE: DD MM YYYY

WAS THE PURCHASE MADE UNDER A COUNCIL RIGHT TO BUY OR OTHER HOUSING DISCOUNT SCHEME? YES NO

IF YES, STATE DISCOUNT ALLOWED AND FULL MARKET VALUE AT THE TIME: DISCOUNT: £ MARKET VALUE: £

HAVE ANY MAJOR ALTERATIONS BEEN MADE TO THE PROPERTY OR ANY ADDITIONAL LAND ACQUIRED SINCE ORIGINAL PURCHASE? YES NO

IF YES, GIVE DETAILS:

PLEASE GIVE DETAILS OF HOW YOU INTEND TO USE THE FUNDS FROM THE REMORTGAGE AND PROVIDE EVIDENCE TO SUPPORT THE AMOUNT STATED SUCH AS LOANS / CREDIT CARD STATEMENTS.

REPAY EXISTING SECURED LOAN(S):	£ <input type="text"/>		
DEBT CONSOLIDATION:	£ <input type="text"/>	Please indicate which credit commitments are being consolidated (name of lender, account number and balance outstanding).	<input type="text"/>
HOME IMPROVEMENTS:	£ <input type="text"/>	Please indicate what improvements are to be carried out.	<input type="text"/>
GIFTING FUNDS:	£ <input type="text"/>	Please state whom the funds are being gifted to and their relationship to you.	<input type="text"/>
OTHER PROPERTY PURCHASE:	£ <input type="text"/>	Please provide property details. Will additional borrowing be used to complete the purchase?	<input type="text"/>
OTHER:	£ <input type="text"/>	Please specify.	<input type="text"/>
TOTAL REMORTGAGE AMOUNT:	£ <input type="text"/>		

MORTGAGE REQUIREMENT

AMOUNT	TERM	REPAYMENT TYPE	PRODUCT DESCRIPTION*	PAY RATE	PRODUCT CODE (if known)
£ <input type="text"/>	Years <input type="text"/> Months <input type="text"/>	Rep / IO	<input type="text"/>	% <input type="text"/>	<input type="text"/>
£ <input type="text"/>	Years <input type="text"/> Months <input type="text"/>	Rep / IO	<input type="text"/>	% <input type="text"/>	<input type="text"/>
£ <input type="text"/>	Years <input type="text"/> Months <input type="text"/>	Rep / IO	<input type="text"/>	% <input type="text"/>	<input type="text"/>
£ <input type="text"/>	Years <input type="text"/> Months <input type="text"/>	Rep / IO	<input type="text"/>	% <input type="text"/>	<input type="text"/>

*Please note that if a Product Fee is payable for the mortgage chosen, the Product Fee will be deducted from the total mortgage amount on completion. Please contact our New Business Team if the preference is to pay this at application instead.

IF APPLYING FOR AN OFFSET MORTGAGE PLEASE SELECT EITHER: TERM REDUCTION OPTION PAYMENT REDUCTION OPTION

Your selection will apply from completion of your mortgage, however you are able to change this in the future.

WILL THE WHOLE OF THE MORTGAGE AMOUNT YOU WOULD LIKE TO BORROW BE FOR THE FINANCIAL BENEFIT OF ALL ADULT OCCUPIERS OF THE PROPERTY? YES NO

IF NO, the person(s) concerned may be required to obtain separate legal advice to have the significance and consequences of the situation explained so that the extent of his / her / their liabilities and responsibilities are understood.

SECTION FIVE - INTEREST ONLY REPAYMENT STRATEGY

REPAYMENT STRATEGY

If you have indicated you wish to repay whole or part of your mortgage on an Interest Only basis, please provide details of the repayment strategy you have in place to repay the capital outstanding at the end of the mortgage term. **DOCUMENTARY EVIDENCE MUST BE PRODUCED TO SUPPORT THE DETAILS PROVIDED. FAILURE TO PROVIDE SUFFICIENT DETAILS MAY DELAY THE PROCESSING OF YOUR MORTGAGE APPLICATION.**

CASH SAVINGS & INVESTMENTS

PROVIDER	REFERENCE NO.	START DATE	MONTHLY PAYMENT	CURRENT VALUE
		DD MM YYYY	£	£
		DD MM YYYY	£	£
		DD MM YYYY	£	£
		DD MM YYYY	£	£

Please provide a copy of your latest statement plus evidence of regular and on-going contributions which have been in place for at least 12 months.

ENDOWMENT POLICIES

PROVIDER	POLICY NO.	MATURITY DATE	MONTHLY PREMIUM	CURRENT VALUE
		DD MM YYYY	£	£
		DD MM YYYY	£	£
		DD MM YYYY	£	£

Please provide a copy of a projection statement issued by the policy provider dated within the last 12 months. The latest maturity value using the middle figure of the three growth rates provided will be used (or the lower if only two rates are quoted) to determine the amount to be used for the repayment plan.

PENSION LUMP SUM

PROVIDER	POLICY NO.	DATE OF RETIREMENT	MONTHLY PAYMENT	PROJECTED LUMP SUM
		DD MM YYYY	£	£
		DD MM YYYY	£	£
		DD MM YYYY	£	£
		DD MM YYYY	£	£

Please provide a copy of your last statement, issued within the last 12 months, showing projected maturity value and the retirement date. The latest maturity value using the middle figure of the three growth rates provided will be used (or the lower if only two rates are quoted) to determine the amount to be used for the repayment plan.

Should you be utilising your pension fund to repay your mortgage you are advised to seek independent financial advice as to whether this is appropriate.

SALE OF SHARE PORTFOLIO

COMPANY	NUMBER OF SHARES	VALUE
		£
		£
		£

Please provide a copy of the share certificate or share account statement issued by the product provider dated within the last 12 months. A maximum of 80% of the current value may be utilised.

DOWNSIZING

DO YOU INTEND TO DOWNSIZE FROM THE PROPERTY TO BE MORTGAGED?

YES NO

IF YES, PLEASE PROVIDE MORE INFORMATION ON YOUR STRATEGY IN THE BOX BELOW AND ADVISE THE TYPE, LOCATION AND VALUE OF THE PROPERTY YOU INTEND TO DOWNSIZE TO. **PLEASE NOTE IF DOWNSIZING, YOU MUST HAVE AT LEAST 30% EQUITY AVAILABLE.**

SALE OF ANOTHER UK PROPERTY

DO YOU INTEND TO SELL ANOTHER UK PROPERTY OWNED BY YOU? *

YES NO

* Where the strategy is the sale of another UK property owned by you, this cannot be owned jointly with any third party.

PROPERTY ADDRESS:

POSTCODE:

ORIGINAL DATE OF PURCHASE AND PURCHASE PRICE:

DATE

DD	MM	YYYY
----	----	------

PRICE

£	
---	--

CURRENT VALUE OF THE PROPERTY:

£	
---	--

IS THE PROPERTY SUBJECT TO A MORTGAGE? YES NO

YES NO

IF YES, CURRENT BALANCE OUTSTANDING ON THE MORTGAGE:

£	
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Please provide a copy of your last mortgage statement.

Where the repayment strategy is downsizing or the sale of another UK property, we will consider the equity available in the subject property and the level of property prices in the area at the time of consideration to ascertain that the sale will provide sufficient funds to repay the proposed mortgage and/or allow downsizing.

We are required to ascertain full details regarding your repayment strategy for any Interest Only portion of your loan and therefore reserve the right to request additional information to support your application.

CUSTOMER DECLARATION

I / We confirm that to the best of my / our knowledge the above information is correct. I / We confirm that the above repayment strategy / strategies will be kept in place and will be used to repay the capital outstanding on or before the end of the term of the Mortgage. If I / we cancel the repayment strategy / strategies, stop making payments into it or expect a shortfall, I / we will either set up an alternative strategy and advise you accordingly or contact you to discuss transfer to another repayment method. I / We accept that it is my / our responsibility to ensure I / we have sufficient means to repay the capital outstanding before or on expiry term of the Mortgage.

SIGNED:

DATE:

DD	MM	YYYY
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SIGNED:

DATE:

DD	MM	YYYY
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SECTION SIX - PROPERTY DETAILS

THE PROPERTY

ADDRESS OF THE PROPERTY TO BE MORTGAGED:

POSTCODE:

ACCOMMODATION OF PROPERTY:

NUMBER OF KITCHENS:

NUMBER OF RECEPTION ROOMS:

NUMBER OF GARAGES:

NUMBER OF BEDROOMS:

NUMBER OF BATHROOMS:

NUMBER OF TOILETS:

YEAR PROPERTY BUILT:

If built in the last 10 years is there an approved Builder's Guarantee in force or a supervising Chartered Architect's / Surveyor's certificate available? YES NO

If YES, please state what type:

ANNUAL COUNCIL TAX: £

DOES THE PLOT SIZE EXCEED AN ACRE? YES NO

DOES THE PROPERTY HAVE ANY OUTBUILDINGS OR ANNEXES? YES NO

IS THE PROPERTY? FREEHOLD LEASEHOLD

IF LEASEHOLD: WHAT IS THE UNEXPIRED LEASE?: YEARS

A minimum of 50 years unexpired at the end of the mortgage term is required.

ANNUAL GROUND RENT: £

ANNUAL MAINTENANCE: £

DESCRIPTION OF PROPERTY:

Detached House Purpose-Built Flat Detached Bungalow

Semi-Detached House Converted Flat Semi-Detached Bungalow

Terraced House Other

IF A FLAT OR MAISONETTE:

NUMBER OF FLOORS IN THE WHOLE BUILDING: FLOOR NUMBER OF FLAT:

COUNCIL BUILT: YES NO STUDIO FLAT: YES NO

OVER COMMERCIAL PREMISES: YES NO

If YES, please state what acreage:

If YES, please provide details including their intended use:

CONFIRMATION OF PROPERTY OWNERSHIP

ALL APPLICANTS WILL BE BORROWERS UNDER THE MORTGAGE. PLEASE CONFIRM WHICH APPLICANT(S) WILL BE REGISTERED AS OWNER(S) OF THE PROPERTY ON COMPLETION OF THE MORTGAGE.

APPLICANT ONE APPLICANT TWO

PLEASE DETAIL BELOW ANY OTHER PERSONS, OVER THE AGE OF 17, WHO WILL RESIDE IN THE PROPERTY ON COMPLETION OF THE MORTGAGE WITH THE APPLICANTS:

TITLE:	SURNAME:	FORENAMES*	RELATIONSHIP:	OCCUPATION / STATUS:	DATE OF BIRTH:	Are they financially dependant on the applicants?
					DD MM YYYY	<input type="checkbox"/> YES <input type="checkbox"/> NO
					DD MM YYYY	<input type="checkbox"/> YES <input type="checkbox"/> NO
					DD MM YYYY	<input type="checkbox"/> YES <input type="checkbox"/> NO

*Please include all forenames.

WILL YOU OCCUPY THE WHOLE PROPERTY AS YOUR MAIN RESIDENCE AND USE IT SOLELY FOR PRIVATE RESIDENTIAL PURPOSES? YES NO

IF NO, PLEASE EXPLAIN

DETAILS OF THE PERSON TO CONTACT FOR ACCESS TO THE PROPERTY BY THE VALUER:

CONTACT NAME: PHONE NUMBERS:

ADDRESS:

POSTCODE:

The valuer is also able to undertake a RICS Homebuyers Report or a Building Survey for you in addition to the Mortgage Valuation. The fee for a detailed survey will be payable directly to the valuer concerned. If you have an independent survey carried out, the Society will not be able to use this for mortgage purposes.

IF YOU WOULD LIKE A QUOTATION FOR A MORE DETAILED SURVEY (HOMEBUYERS OR BUILDING SURVEY) PLEASE INDICATE: HOMEBUYERS BUILDING SURVEY

APPLICATION FEE

Please refer to your illustration, our website under the Fees section or contact the Society for our current scale of fees. An Application Fee must be paid together with any Valuation Fee due.

Please provide the cardholder’s name and email address to enable us to send an email containing a link to our secure website to enable the fees to be paid online:

CARDHOLDER NAME: (as printed on the card)

CARDHOLDERS’ EMAIL ADDRESS:

YOUR PERSONAL INSURANCE ARRANGEMENTS

DO YOU HAVE LIFE ASSURANCE AND/OR CRITICAL ILLNESS COVER? YES NO If YES, please give details of all life assurance and critical illness policies being used in conjunction with this loan:

	POLICY ONE	POLICY TWO	POLICY THREE	POLICY FOUR
INSURANCE COMPANY:				
TYPE OF POLICY:				
MINIMUM DEATH BENEFIT:	£	£	£	£
POLICY NUMBER:				
MONTHLY PREMIUM:	£	£	£	£
MATURITY / EXPIRY DATE:				
TYPE OF COVER:				
LIFE OR LIVES INSURED:				

TAKING INTO ACCOUNT THE MORTGAGE YOU ARE NOW APPLYING FOR, DO YOU HAVE SUFFICIENT LIFE AND CRITICAL ILLNESS COVER TO PROTECT YOURSELF AND YOUR DEPENDANTS?

APPLICANT ONE YES NO **APPLICANT TWO** YES NO

SECTION SEVEN - CONVEYANCER’S DETAILS

We will instruct solicitors / licensed conveyancers to act on our behalf on all Purchase and Remortgage Loans and, unless special ‘fees paid’ product terms apply, you will be responsible for all of the fees and disbursements. We may be prepared to instruct your legal representative to act for us (please refer to the illustration), but if we are unable to, we will tell you when the application is acknowledged. If you have chosen one of our ‘fees paid’ products, you do not need to enter details of the solicitor / licensed conveyancer in the section below UNLESS the property is unregistered, a change of ownership is involved, not all applicants will be on the title deeds, or where the whole of the mortgage amount is not for the financial benefit of all borrowers. A benefit of a ‘fees paid’ mortgage product is that you do not have to pay any legal costs for the new mortgage. However, it is important that you appreciate that the legal work undertaken in connection with your mortgage will be for the benefit of the Society only. Our legal team cannot act for you or give you specific legal advice with regard to this mortgage. If you are either unclear or unhappy about the implications for you of this approach, please feel free to contact us. You can read more about this at familybuildingsociety.co.uk/freelegals

NAME OF FIRM: CONTACT NAME:

REFERENCE NO:

ADDRESS: POSTCODE:

PHONE: FAX:

EMAIL:

Please note, which ever firm you use must be on the Society’s panel, which is managed by Legal Marketing Services. Please contact our New Business Team if you wish to check if they are already on the panel.

SECTION EIGHT - OTHER PROPERTY OWNED

OTHER PROPERTY OWNED

Please provide details below of all other properties owned. If you prefer to provide the information on a spreadsheet, please ensure the same detail below is provided.

OTHER PROPERTY

PROPERTY ADDRESS:				MORTGAGE LENDER:		
				MORTGAGE OUTSTANDING:	£	
	POSTCODE:			MONTHLY MORTGAGE PAYMENT:	£	
DATE PURCHASED (MONTH / YEAR)		MM	YYYY	RENT RECEIVED:	£	
PROPERTY TYPE: (e.g. 3 bed house, 2 bed flat)				OWNER:		
CURRENT VALUE:	£					

OTHER PROPERTY

PROPERTY ADDRESS:				MORTGAGE LENDER:		
				MORTGAGE OUTSTANDING:	£	
	POSTCODE:			MONTHLY MORTGAGE PAYMENT:	£	
DATE PURCHASED (MONTH / YEAR)		MM	YYYY	RENT RECEIVED:	£	
PROPERTY TYPE: (e.g. 3 bed house, 2 bed flat)				OWNER:		
CURRENT VALUE:	£					

OTHER PROPERTY

PROPERTY ADDRESS:				MORTGAGE LENDER:		
				MORTGAGE OUTSTANDING:	£	
	POSTCODE:			MONTHLY MORTGAGE PAYMENT:	£	
DATE PURCHASED (MONTH / YEAR)		MM	YYYY	RENT RECEIVED:	£	
PROPERTY TYPE: (e.g. 3 bed house, 2 bed flat)				OWNER:		
CURRENT VALUE:	£					

OTHER PROPERTY

PROPERTY ADDRESS:				MORTGAGE LENDER:		
				MORTGAGE OUTSTANDING:	£	
	POSTCODE:			MONTHLY MORTGAGE PAYMENT:	£	
DATE PURCHASED (MONTH / YEAR)		MM	YYYY	RENT RECEIVED:	£	
PROPERTY TYPE: (e.g. 3 bed house, 2 bed flat)				OWNER:		
CURRENT VALUE:	£					

SECTION NINE - ADDITIONAL INFORMATION

Please use this space to provide any additional information and continue on a separate sheet if necessary.