

CONFIDENTIAL APPLICATION FORM



SECTION 1 PERSONAL DETAILS

Amount Required	£	Purpose of loan	
Are you?	Married <input type="checkbox"/>	Single <input type="checkbox"/>	Divorced <input type="checkbox"/>
	Widowed <input type="checkbox"/>	Separated <input type="checkbox"/>	Co-habiting <input type="checkbox"/>
			Civil Partnership <input type="checkbox"/>
APPLICANT 1		APPLICANT 2	
Full Names	MR/MRS /MISS/OTHER	Full Names	MR/MRS /MISS/OTHER
Date of birth	DD/MM/YY	Date of birth	DD/MM/YY
Current Address		Current Address	
	How long at this address Yrs <input type="checkbox"/> Mnths <input type="checkbox"/>		How long at this address Yrs <input type="checkbox"/> Mnths <input type="checkbox"/>
Previous Address if less than 3 years		Previous Address if less than 3 years	
	How long at this address Yrs <input type="checkbox"/> Mnths <input type="checkbox"/>		How long at this address Yrs <input type="checkbox"/> Mnths <input type="checkbox"/>
Telephone Numbers	Home Work Mobile	Telephone Numbers	Home Work Mobile
Email Address		No. of Dependants	Ages
Names & ages of all occupants over 17	Name Age Relationship Dependant		
			Yes / No
			Yes / No

* Please indicate if they are dependant on you eg. children at school/university or any adult who is unemployed.

SECTION 2 DETAILS OF OCCUPATION AND INCOME

	APPLICANT 1		APPLICANT 2	
Employed	Occupation		Occupation	
	How long employed by current employer Yrs <input type="checkbox"/> Mnths <input type="checkbox"/>		How long employed by current employer Yrs <input type="checkbox"/> Mnths <input type="checkbox"/>	
	Employees names & address		Employees names & address	
	Monthly income		Monthly income	
	Gross £	Net after tax £	Gross £	Net after tax £
Self-Employed	Occupation		Occupation	
	How long trading in current business Yrs <input type="checkbox"/> Mnths <input type="checkbox"/>		How long trading in current business Yrs <input type="checkbox"/> Mnths <input type="checkbox"/>	
	Name & address of business		Name & address of business	
	Net profit per annum		Net profit per annum	
	£		£	
	Name, address & telephone number of your account		Name, address & telephone number of your account	
	We may need to write to your accountant to confirm your income		We may need to write to your accountant to confirm your income	

SECTION 3 ADDITIONAL INCOME

If you are receiving any additional income please complete the below section;

Type of income <small>e.g. benefits / pension / rent</small>		Monthly income	£	£
Benefit income	If you are using benefit income to support the monthly repayments you must remember to allow for any benefits that you require for your special needs. You should also not include any benefits you are receiving on a temporary basis. Some Benefits are reviewable and can be reduced and if you are in any doubt you should contact your Benefits Agency for further advice. If the term of the loan you are taking out extends beyond the date that any benefit stops you must consider any reduction in income there may be and ensure you will still be able to afford the monthly loan repayments in addition to your expected monthly living expenses.			
Planned Retirement	If the term of the loan you are taking out extends beyond your anticipated age of retirement you MUST consider any reduction in income there may be and ensure you will still be able to afford the monthly loan repayments in addition to your expected monthly living expenses. If you are aware that you will not be able to maintain the monthly repayments you should not take out this loan. We recommend that you take legal or financial advice before proceeding with the application.			

Authority to First Mortgagees

I/We here by authorise you to supply CSC LOANS the information requested.
(IF THE MORTGAGE IS IN JOINT NAMES THEN BOTH MUST SIGN).

To: _____ Building Society/Bank

Address of property _____

Account no. _____

Names of borrowers _____

Signed: Applicant 1 **X** _____ Date _____

Signed: Applicant 2 **X** _____ Date _____

Please complete overleaf

SECTION 4 MORTGAGE

Mortgage and credit cards / loans not being settled from the proposed loan

First Mortgage details:

Name of lender Mortgage account number Balance outstanding £
Monthly repayments £ Current arrears (if any) £ Highest arrears in £
last 12 months (if any)

SECTION 5 IMPORTANT, CAN YOU AFFORD THE LOAN?

MOST LENDERS WILL ASK YOU TO COMPLETE A DETAILED INCOME & EXPENDITURE FORM (TAKING INTO ACCOUNT ALL OF YOUR OUTGOINGS) TO ENSURE THAT THE PROPOSED LOAN REPAYMENTS ARE AFFORDABLE TO YOU. IF YOU ARE NOT REQUESTED TO COMPLETE A FORM OR WOULD LIKE SOME PEACE OF MIND THAT THE LOAN IS AFFORDABLE, WE WOULD STRONGLY RECOMMEND THAT YOU COMPLETE YOUR OWN INCOME & EXPENDITURE ASSESSMENT. THERE IS A BUDGET PLANNER AT WWW.MONEYADVICESERVICE.ORG.UK BORROWING MONEY IS A SERIOUS MATTER AND YOU SHOULD ALWAYS THINK CAREFULLY BEFORE YOU BORROW AND ASK YOURSELF "CAN I REALLY AFFORD THIS LOAN?" YOUR PROPERTY MAY BE AT RISK IF YOU FAIL TO MAINTAIN LOAN REPAYMENTS.

DECLARATION OF AFFORDABILITY – I/WE CONFIRM THAT THE PROPOSED SECOND CHARGE LOAN REPAYMENTS ARE AFFORDABLE TO ME/US. I/WE HAVE TAKEN INTO CONSIDERATION: 1) THAT INTEREST RATES MAY INCREASE AND AS A RESULT MY/OUR REPAYMENTS MAY INCREASE. 2) THE PROPOSED SECOND CHARGE LOAN REPAYMENTS ARE AFFORDABLE WHEN TAKING INTO ACCOUNT ALL OF MY/OUR OTHER OUTGOINGS. WE WERE STRONGLY RECOMMENDED TO CARRY OUT OUR OWN INCOME & EXPENDITURE ASSESSMENT. WE WERE ALSO RECOMMENDED TO OBTAIN INDEPENDENT LEGAL ADVICE.

APPLICANT 1

Date

APPLICANT 2

Date

SECTION 6 HEALTH DISCLOSURE

Is there any further information, for example in relation to your mental health or general well-being, that you might wish to bring to our attention at this time that you think may be relevant to your application for a second charge loan?

Yes No

If yes, please provide details

SECTION 7 DETAILS OF PROPERTY BEING OFFERED AS SECURITY

Address (if different from above)

Date of purchase Purchase price £ Current value £ Recent improvements

Type of property

Detached Semi detached End of terrace Mid terrace Bungalow Maisonette Flat

If Flat - Purpose Built Converted How many floors? Which floor?

How many? Bedrooms Reception Rooms Bathrooms Garages

Construction Brick Concrete Stone Tiled roof Flat roof

Is the property ex-local authority? Yes No Other?

Is the property? Freehold Leasehold Years remaining on lease

Is the property let out? Yes No If yes what is the monthly rental income? £

FAIR PROCESSING WARNING AND DECLARATION DISCLOSURE AND USE OF THE INFORMATION

It is important that you READ THE INFORMATION ON PAGES 12 TO 14 of the CUSTOMER CARE BOOKLET. This explains how your data will be used. The CUSTOMER CARE BOOKLET can also be viewed on our website. Please visit WWW.CSCLOANS.CO.UK (see under STATIONERY). I/We confirm the information given in this application is accurate and that you, or any lender to whom you submit this application, may use and disclose my data as described in the CUSTOMER CARE BOOKLET. I/We confirm that I/we have fully completed both sides of this form before signing it. I/We understand that our property is at risk if we do not keep up with repayments on the loan. I/We understand that I/we should not commit myself/ourselves in anticipation of the loan being granted. I/We understand that I/we should wait until I/we receive the advance monies. I/We were recommended to obtain independent legal advice.

FOR OFFICE USE ONLY

Introducer: _____

Address: _____

Telephone: _____

Email: _____

SIGNED

APPLICANT 1

Date

APPLICANT 2

Date

THINK CAREFULLY BEFORE SECURING OTHER DEBTS AGAINST YOUR HOME. YOUR HOME MAY BE REPOSSESSED IF YOU DO NOT KEEP UP REPAYMENTS ON A MORTGAGE OR ANY OTHER DEBT SECURED ON IT.



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