



Employment Details	Applicant 1	Applicant 2
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<b>Employment Status:</b>	Employed <input type="checkbox"/>	Self-employed <input type="checkbox"/>	Employed <input type="checkbox"/>	Self-employed <input type="checkbox"/>
	Non-employed <input type="checkbox"/>	Retired <input type="checkbox"/>	Non-employed <input type="checkbox"/>	Retired <input type="checkbox"/>

**If Employed:**

Contract type:	Permanent <input type="checkbox"/>	Contract <input type="checkbox"/>	Temporary <input type="checkbox"/>	Permanent <input type="checkbox"/>	Contract <input type="checkbox"/>	Temporary <input type="checkbox"/>			
Time employed in the same line of business	years		months		years		months		
Occupation	Title			Title					
Basic income	£			£					
Overtime	£			£					
Bonus/commission	£			£					
Other guaranteed income	£			£					
Date current employment commenced	DD MM YYYY			DD MM YYYY					
If less than 2 years please provide further details									

**If self-employed:**

Date self-employment commenced	DD MM YYYY			DD MM YYYY					
Business name									
Percentage shareholding									
Accountant	Yes <input type="checkbox"/> No <input type="checkbox"/> Chartered/Certified			Yes <input type="checkbox"/> No <input type="checkbox"/> Chartered/Certified					
Last 3 years net profit figures	Current	Previous	Previous	Current	Previous	Previous			
	£	£	£	£	£	£			

Credit History	Applicant 1	Applicant 2
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Total monthly loan payments to remain	£			£					
Total Credit card/mail order balance to remain	£			£					
Monthly maintenance payments	£			£					
Have you ever been made bankrupt?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY					
Has the bankruptcy been discharged?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY					
Have you ever had an IVA?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY					
Has the IVA been satisfied?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY					
If IVA to remain outstanding, amount of monthly commitment	£			£					
IVA amount outstanding	£			£					
Have you had a property repossessed?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY					
Have you had any defaults?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY					
Have you had any CCJs?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY					
If answered yes to CCJs or defaults, are they satisfied?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, date DD MM YYYY					
Refused a mortgage on this or any other property?	Yes <input type="checkbox"/> No <input type="checkbox"/>			Yes <input type="checkbox"/> No <input type="checkbox"/>					

**Mortgage/Tenancy:**

Have any of the applicants missed any payments in the last 12 months Yes  No

If Yes, number missed in: Last 3 months  Last 6 months  Last 7-12 months

Loan details:	Held by:	monthly payment	Loan and date	Repaid on completion
1st <input type="checkbox"/> 2nd <input type="checkbox"/>	£	DD MM YYYY	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1st <input type="checkbox"/> 2nd <input type="checkbox"/>	£	DD MM YYYY	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1st <input type="checkbox"/> 2nd <input type="checkbox"/>	£	DD MM YYYY	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1st <input type="checkbox"/> 2nd <input type="checkbox"/>	£	DD MM YYYY	Yes <input type="checkbox"/> No <input type="checkbox"/>	

**Additional Information**


**Declaration**

I understand that the information provided on this form will be looked at in detail and will help you (the lender) make a decision in principle as to whether you are able to consider my client(s) further for a mortgage application. I understand that this information will be retained by you subject to the Data Protection Act 1998. I am informed that you may make enquiries of one or more credit reference agencies and that such agencies may keep a record of any such query and make this available to other enquiries. I am also informed that you may contact my client(s) employer or accountant to verify his/her/their employment or nature of his/her/their business. I confirm that I hold the consent of each individual client in writing/in a recorded telephone conversation consenting to disclosure and to your processing the information as described above. I confirm that the information contained in this form is correct to the best of my knowledge and I am registered under the Data Protection Act 1998 and will comply fully with its requirements.

Signed  Print Name  Date