

FSA SUPPLEMENTARY DECLARATION

The information provided in this form is supplementary to the application form and is to be **completed by the mortgage intermediary.**

Mortgage Account Number

If Mortgage Account Number not known, please state:-

Applicant Surname(s): Applicant 1

Applicant 2

Property to be Mortgaged Postcode:

FEES PAID BY THE APPLICANT

Arrangement fee paid to Introducer by applicant(s)

Has this fee been included in the loan amount? Yes No

Arrangement fee paid to packager (Excluding valuation fee)

Has this fee been included in the loan amount? Yes No

Valuation fee paid

Has this fee been included in the loan amount? Yes No

Estimated legal fees to be paid by applicant(s)

Has this fee been included in the loan amount? Yes No

REPAYMENT VEHICLE DETAILS (ONLY IF MORTGAGE IS INTEREST ONLY)

Repayment Vehicle details:

Policy type

Endowment/ISA/Pension
Other*

Please state if Other

.....

Provider

Monthly Premium

* Delete as necessary

OTHER INFORMATION

If the term of this mortgage takes the applicant(s) beyond their intended retirement date, please state how you are satisfied, after discussion with all applicants, that payments will be maintained & by what means (details to be provided on Additional Information Page). Please also answer the following questions:-

Projected Retirement Age Applicant 1 Applicant 2

Who recommended the Platform mortgage which was chosen by the applicant(s)? Packager Yes No

Mortgage Intermediary Yes No

Is this an Advised or Non-Advised Sale? Advised Non-Advised Face to Face Non Face to Face

If the applicant(s) are Self-Certifying income, please state reason below:-

Existing Platform borrower Yes No Yes No

Commission / bonus based income Yes No Yes No

Second income source is non-PAYE Yes No Yes No

Contract deadline /auction sale Yes No Yes No

Other (please state)

PLEASE ENSURE THAT BOTH SIDES OF THIS FORM ARE FULLY COMPLETED

Have the applicant(s) had 3 or more months arrears (cleared or not) on any secured or unsecured loan in the last 2 years?

Applicant 1: Yes No Applicant 2: Yes No

Please give the details below of any of the following payment obligations:-

Maintenance/alimony	Monthly Amount	<input type="text" value="£"/>		
Student Loan(s)	Monthly Amount	<input type="text" value="£"/>	Outstanding Balance	<input type="text" value="£"/>
IVAs	Monthly Amount	<input type="text" value="£"/>	Outstanding Balance	<input type="text" value="£"/>

Please provide full details of the source of applicant(s) deposit (Please tick appropriate box):

Savings Inheritance Cashing in Investment Policy
Gift Property Sale Other

Will any commission be paid back to the applicant? Yes No If yes, please state how much

DETAILS OF LOAN REQUESTED

Purpose of Remortgage (tick all that apply, if £ for £ only this can be ticked):-

Home Improvements £ for £ Capital Raising
Business Purposes Debt Consolidation

If consolidating debt when remortgaging or consolidating loans from equity if purchasing, please provide:-
(continue on Additional Information Sheet within Mortgage Application Form if necessary):-

Lender(s) Name

Total Balance(s) to be repaid

Current Total Monthly Repayment

BUY TO LET / LET TO BUY

Is the property to be occupied by an immediate family member? Yes No

INTERMEDIARY DECLARATION

I am authorised by the FSA to carry out the regulated activities covered by this application form and I declare that everything is true to the best of my knowledge.

Signature of Intermediary

Print Name:

Company Name:

FSA Number

Company Address:

Date