

Housing Loan Application

Private & Confidential

Enquiry Date : Enquiry No. :

1st Applicant	2nd Ap	2nd Applicant				
Full Name & Address :		Title :	Mr / A	Ars / Miss / Ms		
		First Nam	e(s) :			
		Surname	:			
		NI No. :			Number of dependar	
		Date of B	rth :		children :	
NI No. :		Email Add	dress :			
Date of Birth :		If you hav	e lived at this addr	ess for less than 3 ver	ars, please give your previous a	
Email Address :				333 101 1333 111411 3 731	g., p. c. g. g. c. g. g. c. g. g. c. g. g. c. g. c. g. g. g. c. g.	
How long have you lived at this address?	Years					
Tele Home :	Te	ele Work :		Mobile :		
2. About You		Discon	1/	1::::::::::::::::::::::::::::::::::::::		
Married :	Single :	Divord Sepera		Living with partner :	Widowed :	
Mortgage details	Amount outstanding :		Value of property :	Term	anding:	
Name of Lender						
List any other loans	secured on vo	our property:				
Name of	Amount	Term	Repayment	Original Loan	Purpose	
Lender :	Outstanding:	Outstanding:	Amount :	Amount :	of Loan :	
Please give details	of all residents	at the prope	r ty :			
Name		D.O.B	Time at Address :		ationship o You :	

Lancashire Community Finance IPS Limited. A registered society number IP29863R. Authorised by The Financial Conduct Authority, FRN 659275

Enquiry date: Enquiry No.: 3. Your Work **1st Applicant** 2nd Applicant Occupation? Please circle: Full /T Part/T Unempl'd Retired Carer/Housek'per Full /T Part/T Unempl'd Retired Carer/Housekeeper How often are you paid? Monthly: Weekly: Weekly: Monthly: How are you paid? To Bank Cash Cheque To Bank Cash Cheque Employer Name & Address? How long have you Years Months Years Months worked here? 4. Loan Application Proposed Amount: £ term of loan: Purpose of loan : Proposed Monthly: Weekly: £ repayment: Total Cost Amount of £ £ of the Work Grant Available 5. Present Banking Details Name of bank / building society: Branch / Address: Sort Code: Account No.: Name on the Account: Do you have a cheque guarantee or Switch / Delta card? Yes / No Time with bank: Years

Enquiry date :		Enquiry No. :			
6. Existing Liabilities					
Loans / HP		Balance Owed	Monthly Pay	ment	Credit Limit
].					
2. 3.					
4					
5.					
Store Cards		Balance Owed	Monthly Pay	ment	Credit Limit
1. 2					
Credit Card:		Balance Owed	Monthly Pay	ment	Credit Limit
2.					
Catalogues 1. 2.		Balance Owed	Monthly Pay	ment	Credit Limit
3.					
Loans / HP		Balance Owed	Monthly Pay	ment	Credit Limit
Bank Overdraft		Balance Owed	Monthly Pay	ment	Credit Limit
		Balance Owed	Monthly Pay	ment —	Credit Limit
TOTALS	£	<u> </u>	£	£	
Have you any County Court Ju	dgements registered in your	name? Yes/No	•		
If 'YES' please provide the judg	ement date, name of credito	r and the sum involve	ed :		
 Office Use Only :					
Recomended Loan Amount :	£	Recomende	Recomended Loan Term :		
Relationship Manager :		Application	Application Status :		

				Enquiry No. :
7. Savings		Additional Informatio	n :	
Building Society / Bank : Investments : Credit Union :				
Other (please specify) :				
TOTAL :	£			
8. Disclosure Authorit	•			
On occasions we may need to We will not do this without you Please indicate below whom	or specific authority.			sessment and fraud prevention.
Employer : B	ank / Building Society :	Credit / Store Card Co. :	Landlord :	
9. Identification				
	itement covering the ill. We will also cons DSS benefit books,	e last two months ev sider your application birth and marriage o	dencing your sou n if you have recer certificates. These	rce of income and a
10. Declaration and A	agreement			
I submit this application I do not know of any imp				have given is accurate and
	ng when considering a record of the sec by lenders and othe vention or tracing d	arch. We may also co ers in making credit lebtors. We may give	arry out identity and decisions about your credit reference of	nd anti-fraud checks. This ou and members of your agencies details of non-
Data Protection Act 1 9 Your personal information agents in managing you are entitled to a copy of for this service.	on will be treated as or account c) in the p	oublic interest d) to pr	event fraud or by	•
1st Applicant				1
Signed :			Date :	
2nd Applicant				
Signed :			Date :	

Please return your completed application to :

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