

# Secured Loan Application Form

## Section 1: Introducer Details

Name:	<input type="text"/>	Company:	<input type="text"/>
Address:	<input type="text"/>	Mobile number:	<input type="text"/>
		Telephone number:	<input type="text"/>
		Email address:	<input type="text"/>
Postcode:	<input type="text"/>	Contact for complaints:	<input type="text"/>

### As the Introducing broker are you:

A directly authorised firm:  FCA number:

An appointed representative:  FCA number:  Network:

Not authorised:

I confirm that the information contained within this application is true and correct to the best of my knowledge.

Signature of introducer:

Print name:

Date:  /  /

Have any fees been charged to the client?	Type of fee	Amount	When payable
	1. <input type="text"/>	<input type="text"/> ₹	On application: <input type="checkbox"/> On completion: <input checked="" type="checkbox"/>
	2. <input type="text"/>	<input type="text"/> ₹	On application: <input type="checkbox"/> On completion: <input checked="" type="checkbox"/>
	3. <input type="text"/>	<input type="text"/> ₹	On application: <input type="checkbox"/> On completion: <input checked="" type="checkbox"/>

## Section 2: Loan Requirements

Loan amount:

Loan purpose:

Term\*:

Interest only:  Repayment:

Method of repaying the loan if interest only:

\*If the term of the loan extends into anticipated retirement age, please provide details of how you intend to service the loan in additional information (section 7).

## Section 3: Applicant Details

1st Applicant		2nd Applicant	
Title:	<input type="text"/>	Title:	<input type="text"/>
First name:	<input type="text"/>	First name:	<input type="text"/>
Middle name:	<input type="text"/>	Middle name:	<input type="text"/>
Surname:	<input type="text"/>	Surname:	<input type="text"/>
Maiden name:	<input type="text"/>	Maiden name:	<input type="text"/>

<p>1st Applicant cont...</p> <p>Date of birth: <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Home telephone no: <input style="width: 100%;" type="text"/></p> <p>Mobile no: <input style="width: 100%;" type="text"/></p> <p>Email address: <input style="width: 100%;" type="text"/></p> <p>Marital status: Single: <input checked="" type="radio"/> Married: <input type="radio"/>          Divorced: <input type="radio"/> Living Together: <input type="radio"/>          Separated: <input type="radio"/> Widowed: <input type="radio"/></p> <p>Nationality: <input style="width: 100%;" type="text"/></p> <p>Home Address: <input style="width: 100%; height: 40px;" type="text"/></p> <p>Postcode: <input style="width: 100%;" type="text"/></p> <p>Time at current address: Years: <input type="text"/> Months: <input type="text"/></p> <p>Previous address: <input style="width: 100%; height: 40px;" type="text"/>          (If less than 3 at current)</p> <p>Postcode: <input style="width: 100%;" type="text"/></p> <p>Time at current address: Years: <input type="text"/> Months: <input type="text"/></p> <p>If this does not cover 3 years, please provide details in additional info (Section 7)</p> <p>Details of dependents:</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 20%;">1.</td> <td style="width: 10%;"><input style="width: 100%;" type="text"/></td> <td style="width: 10%;">D.O.B.</td> <td style="width: 10%;"><input type="text"/> / <input type="text"/> / <input type="text"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="text"/></td> </tr> <tr> <td>2.</td> <td><input style="width: 100%;" type="text"/></td> <td>D.O.B.</td> <td><input type="text"/> / <input type="text"/> / <input type="text"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="text"/></td> </tr> <tr> <td>3.</td> <td><input style="width: 100%;" type="text"/></td> <td>D.O.B.</td> <td><input type="text"/> / <input type="text"/> / <input type="text"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="text"/></td> </tr> <tr> <td>4.</td> <td><input style="width: 100%;" type="text"/></td> <td>D.O.B.</td> <td><input type="text"/> / <input type="text"/> / <input type="text"/></td> </tr> </table>	1.	<input style="width: 100%;" type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>				<input type="text"/>	2.	<input style="width: 100%;" type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>				<input type="text"/>	3.	<input style="width: 100%;" type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>				<input type="text"/>	4.	<input style="width: 100%;" type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<p>2nd Applicant cont...</p> <p>Date of birth: <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Home telephone no: <input style="width: 100%;" type="text"/></p> <p>Mobile no: <input style="width: 100%;" type="text"/></p> <p>Email address: <input style="width: 100%;" type="text"/></p> <p>Marital status: Single: <input checked="" type="radio"/> Married: <input type="radio"/>          Divorced: <input type="radio"/> Living Together: <input type="radio"/>          Separated: <input type="radio"/> Widowed: <input type="radio"/></p> <p>Nationality: <input style="width: 100%;" type="text"/></p> <p>Home Address: <input style="width: 100%; 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Please provide details on any adverse credit including CCJ's, mortgage or secured loan arrears, defaults, IVA or bankruptcy:

Applicant	Type	Date occurred	Date satisfied	Reason
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input style="width: 100%;" type="text"/>
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## Section 4: Employment Details

	1st Applicant cont....		2nd Applicant cont....
Employment status:	Employed: <input checked="" type="checkbox"/> Self-employed: <input type="checkbox"/>	Employment status:	Employed: <input checked="" type="checkbox"/> Self employed: <input type="checkbox"/>
Occupation:	<input type="text"/>	Occupation:	<input type="text"/>
National Insurance no.	<input type="text"/>	National Insurance no.	<input type="text"/>
Time in job: (if less than 3 years previous employment is required)	<input type="text"/>	Time in job: (if less than 3 years previous employment is required)	<input type="text"/>
Employers name:	<input type="text"/>	Employers name:	<input type="text"/>
Address:	<input type="text"/>	Address:	<input type="text"/>
Employers telephone no:	<input type="text"/>	Employers telephone no:	<input type="text"/>
Gross annual income:	<input type="text"/>	Gross annual income:	<input type="text"/>
Net monthly income:	<input type="text"/>	Net monthly income:	<input type="text"/>
Additional income:	Overtime: <input type="text"/>	Additional income:	Overtime: <input type="text"/>
	Bonus: <input type="text"/>		Bonus: <input type="text"/>
	Commission: <input type="text"/>		Commission: <input type="text"/>
	Other: <input type="text"/>		Other: <input type="text"/>
Source of other income:	<input type="text"/>	Source of other income:	<input type="text"/>
Tax code:	<input type="text"/>	Tax code:	<input type="text"/>
Estimated retirement age:	<input type="text"/>	Estimated retirement age:	<input type="text"/>
Income reference available:	Pay slips & p60 <input checked="" type="checkbox"/> Accountants reference <input type="checkbox"/>	Income reference available:	Pay slips & p60 <input checked="" type="checkbox"/> Accountants reference <input type="checkbox"/>
	SA302 Tax returns <input type="checkbox"/> Accounts <input type="checkbox"/>		SA302 Tax returns <input type="checkbox"/> Accounts <input type="checkbox"/>
Accountant name & company:	<input type="text"/>	Accountant name & company:	<input type="text"/>
Accountant address:	<input type="text"/>	Accountant address:	<input type="text"/>
Accountant telephone no:	<input type="text"/>	Accountant telephone no:	<input type="text"/>
Accountant email:	<input type="text"/>	Accountant email:	<input type="text"/>
Accountant qualification:	<input type="text"/>	Accountant qualification:	<input type="text"/>



## Existing Mortgage Details

Please complete the boxes below detailing any outstanding mortgages, and second charge mortgages.

	Mortgage 1	Mortgage 2	Mortgage 3	Mortgage 4
Address:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Value:	₹ <input type="text"/>	₹ <input type="text"/>	₹ <input type="text"/>	₹ <input type="text"/>
Lender:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mortgage Balance:	₹ <input type="text"/>	₹ <input type="text"/>	₹ <input type="text"/>	₹ <input type="text"/>
Monthly payment:	₹ <input type="text"/>	₹ <input type="text"/>	₹ <input type="text"/>	₹ <input type="text"/>
Time with lender:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Time remaining:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ERCs:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Interest only or repayment?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current interest rate:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Type of rate:	Fixed <input type="checkbox"/> Variable <input checked="" type="checkbox"/>	Fixed <input type="checkbox"/> Variable <input checked="" type="checkbox"/>	Fixed <input checked="" type="checkbox"/> Variable <input type="checkbox"/>	Fixed <input checked="" type="checkbox"/> Variable <input type="checkbox"/>
Owner:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Purchase price:	₹ <input type="text"/>	₹ <input type="text"/>	₹ <input type="text"/>	₹ <input type="text"/>
Original purchase date:	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

## Section 6: Security Property Details

Open market value:	₹ <input type="text"/>	Original purchase price:	₹ <input type="text"/>
Date of purchase:	<input type="text"/> / <input type="text"/> / <input type="text"/>	Tenure: (Freehold / Leasehold)	<input type="text"/>
If leasehold how many years remaining on the lease:	<input type="text"/>		
Property type:	Flat <input type="checkbox"/> Detached <input type="checkbox"/> Semidetached <input type="checkbox"/> Bungalow <input type="checkbox"/> Terrace <input type="checkbox"/> Marionette <input type="checkbox"/> End terrace <input type="checkbox"/>		
If flat how many stories in the building:	<input type="text"/>	Construction type: (e.g. brick & tile, concrete etc)	<input type="text"/>
What storey is the flat on:	<input type="text"/>	Number of reception rooms:	<input type="text"/>
Number of bedrooms:	<input type="text"/>	Number of bathrooms:	<input type="text"/>

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Listed building:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Does the property have a private parking space:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the property have a garage:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Is the property ex local authority:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Is the property standard construction:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Is the property a buy to let property:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Any history of flooding: If yes please provide details below	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Rent (if applicable):	<input type="text"/>		
Property address:	<input type="text"/>			Does anyone over the age of 17 other than the applicants reside at the property: If yes please provide name, age, relation to applicant below.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Postcode:	<input type="text"/>			Will more than 40% of the property be occupied by the applicant or their immediate family:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Details of any alterations made to the property or any factors that may affect value: (pylons/sub stations, scrap yards, commercial development, or any positive matters)	<input type="text"/>					

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## Section 7: Additional Information

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## Section 8: Declaration & Consent (must be completed)

I/we authorize Muditva Finance and any lender to whom this application is made to contact my/our employers (past and present), bankers, other lenders (past and present), accountants, landlords or any other person necessary to verify the information given by me/us in this form.



	Applicant 1	Applicant 2
Print name:	<input type="text"/>	<input type="text"/>
Signature:	<input type="text"/>	<input type="text"/>
Date:	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

### Use of my information:

I/We agree that:

- 1) Muditva Finance can rely upon the information I have provided in this application, which I confirm is complete and true. It is a criminal offense to knowingly supply false information to obtain a loan.
- 2) If any of the information in the application changes prior to the making of the advance then I will inform Muditva Finance.
- 3) Muditva Finance or any lender to whom we may submit your application to may undertake checks with credit reference agencies. When checking your details with the credit reference agencies a record of the search will be made which will be seen by other organizations that make searches and will create association between joint applicants. If your details are checked against any fraud prevention agencies and you give false or inaccurate information and the lender suspects fraud, this will be recorded.
- 4) Muditva Finance may store the information I have provided to it on computer or in records
- 5) joint applications

By making a joint application, I am creating a financial association with the other applicant, I am also confirming that I am entitled to:

- Disclose information about the other applicant(s) and/or anyone else referred to by me.
- Authorize you to search, link and/or record information at credit reference agencies about me and/or anyone else referred to by me.

### Sole Applications

Information held about me by the credit reference agencies may already be linked to another individual who has an existing financial association with me. For the purposes of my application I may be treated as financially linked and my application will be assessed with reference to any "associated" records.



	Applicant 1	Applicant 2
Print name:	<input type="text"/>	<input type="text"/>
Signature:	<input type="text"/>	<input type="text"/>
Date:	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

**Your home may be repossessed if you do not keep up repayments on your mortgage or other debts secured on it.**

