

Mortgage

Application Form

DETAILS OF INTRODUCER

Please indicate your FSA permissions
 Level of service for this application
 Commission passed to the applicants

Advised <input type="checkbox"/>	Non Advised <input type="checkbox"/>	Standard <input type="checkbox"/>	Lifetime <input type="checkbox"/>
Advised <input type="checkbox"/>	Non Advised <input type="checkbox"/>		
None <input type="checkbox"/>	Part <input type="checkbox"/>	Full <input type="checkbox"/>	

INTERMEDIARY FEES

Fee Type
 Is the fee refundable? Yes No
 Fee Amount
 When is the fee due?

Fee 1	Fee 2	Fee 3
<input type="text"/>	<input type="text"/>	<input type="text"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
Application <input type="checkbox"/>	Application <input type="checkbox"/>	Application <input type="checkbox"/>
Completion <input type="checkbox"/>	Completion <input type="checkbox"/>	Completion <input type="checkbox"/>
Cancellation <input type="checkbox"/>	Cancellation <input type="checkbox"/>	Cancellation <input type="checkbox"/>

Name
 Name of company/firm
 Address
 Telephone/fax number
 E-mail address
 Credit Brokering Licence Number

Postcode

STD	<input type="text"/>	STD	<input type="text"/>
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If you receive a fee for the introduction of mortgages, through which company do you expect the fee to be paid?

Payment route
 Consultants name/
 Company reference (if applicable)

FSA Registration Number
 Details of Packager Company (if applicable)

Name
 Name of company/firm
 Address

Postcode

If any special conditions have been agreed with us, details of the agreement, the manager's name and the date must be given

Details
 Manager's name
 Date of Agreement
 Has the customer received a Key Facts Illustration (KFI)?

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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 Yes No

MONEY LAUNDERING

Applicant's Verification
 Was the verification taken

1st Customer		2nd Customer	
Face to Face <input type="checkbox"/>	Non Face to Face <input type="checkbox"/>	Face to Face <input type="checkbox"/>	Non Face to Face <input type="checkbox"/>

Type of name verification provided
 Document Reference
 Issuing office/organisation
 Date of issue
 Type of address verification provided
 Document Reference
 Issuing office/organisation
 Date of issue
 Type of address verification provided
 Document Reference
 Issuing office/organisation
 Date of issue

<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"/>
<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"/>
<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"/>
<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"/>

PREVIOUS NAME

1st Customer	2nd Customer
You only need to provide this information if you have changed names in the last 3 years.	
What date did this change occur?	
Previous forename(s)	
Previous surname	

PREVIOUS ADDRESS

First previous address in last 3 years

Postcode	Postcode

Date moved from previous address

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Residential status

Homeowner <input type="checkbox"/>	Renting <input type="checkbox"/>	Homeowner <input type="checkbox"/>	Renting <input type="checkbox"/>
Homeowner/ Owned Outright <input type="checkbox"/>	Family/Friend <input type="checkbox"/>	Homeowner/ Owned Outright <input type="checkbox"/>	Family/Friend <input type="checkbox"/>

Second previous address in last 3 years

Postcode	Postcode

Date moved from previous address

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Residential status

Homeowner <input type="checkbox"/>	Renting <input type="checkbox"/>	Homeowner <input type="checkbox"/>	Renting <input type="checkbox"/>
Homeowner/ Owned Outright <input type="checkbox"/>	Family/Friend <input type="checkbox"/>	Homeowner/ Owned Outright <input type="checkbox"/>	Family/Friend <input type="checkbox"/>

If total address history is still less than 3 years, please continue using section 1 on page 10.

MORTGAGE PRODUCTS

Please tick the relevant boxes. You may select more than 1 box.

Personal Choice <input type="checkbox"/>	100% <input type="checkbox"/>	Buy to Let <input type="checkbox"/>
Self Certification <input type="checkbox"/>	Right to Buy <input type="checkbox"/>	Other <input type="text"/>

BUY TO LET

Anticipated gross monthly rental

£	<input type="text"/>
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Will a related person live in the property?

Yes <input type="checkbox"/>	No <input type="checkbox"/>
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CURRENT EMPLOYMENT

Number of jobs classed as main income?

<input type="text"/>	<input type="text"/>
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If more than 1 please provide details in section 2 on page 10.

Job Title/Nature of Employment

<input type="text"/>	<input type="text"/>
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Contract type

Permanent <input type="checkbox"/>	Probationary <input type="checkbox"/>	Permanent <input type="checkbox"/>	Probationary <input type="checkbox"/>
Piecework <input type="checkbox"/>	Subcontract <input type="checkbox"/>	Piecework <input type="checkbox"/>	Subcontract <input type="checkbox"/>
Seasonal/temp <input type="checkbox"/>	Fixed/short term <input type="checkbox"/>	Seasonal/temp <input type="checkbox"/>	Fixed/short term <input type="checkbox"/>
Agency <input type="checkbox"/>		Agency <input type="checkbox"/>	

Start date with employer

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Name of person we should contact for reference

<input type="text"/>	<input type="text"/>
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What is your anticipated retirement age?

<input type="text"/>	<input type="text"/>
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If this is before the end of the mortgage term please provide additional information on page 10.

Employer's/business telephone number

STD	<input type="text"/>	STD	<input type="text"/>
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Employer's/business fax number

STD	<input type="text"/>	STD	<input type="text"/>
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Name of employer/business

<input type="text"/>	<input type="text"/>
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	1st Customer	2nd Customer
Employer's/business address		
	Postcode	Postcode
Do you have any other income? ✓	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If 'Yes' please complete Other Incomes below unless you are applying on a Self-Cert basis.	
Are you self-employed? ✓	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Nature of Business?		
Percentage of shareholding or partnership interest	%	%
What year did you acquire an interest in the business?		
How long has the business been established?		
Does the business have accounts? ✓	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Accountant's details (self-employed only)		
Accountant's telephone number	STD	STD
Accountant's fax number	STD	STD
Name of Accountant		
Name of Firm		
Address		
	Postcode	Postcode
Accountant's reference		
Accountant's qualifications		

PREVIOUS EMPLOYMENT

Start date of employment
 What type of employment was this?
 e.g. sales, office, professional, trade
 Length of service with employer

If the previous sections do not cover an 18 month history, please complete this section.

If total employment history is still less than 18 months, please complete section 2 on p10.

YOUR INCOME

Basic annual gross salary
 Annual regular overtime
 Annual guaranteed bonus
 Commission
 Self-employed earnings –
 share of net profit for the last 3 years

This section must be completed in all cases including those on a self-certification basis.

£	£
£	£
£	£
£	£
Year £	Year £
Year £	Year £
Year £	Year £

OTHER INCOMES

Please describe other income
 What is the annual amount before tax?
 Frequency paid

This section should be completed by applicants with other incomes including those applying on a self-certification basis.

£	£

SELF-CERTIFICATION DECLARATION
Income Declaration to be completed for
Self-Certification applicants only

*I/We certify that my/our income is as stated above and is sufficient to support all the relevant payments required to sustain the mortgage requested.
I/We confirm that I/we understand the importance of correctly declaring my/our income and the implications involved.*

Signed

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Date

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FINANCIAL DETAILS

Cards held

Accounts held

How long have you had a bank/building society account?

1st Customer		2nd Customer	
Cheque guarantee/ Switch card <input type="checkbox"/>	VISA/ MasterCard <input type="checkbox"/>	Cheque guarantee/ Switch card <input type="checkbox"/>	VISA/ MasterCard <input type="checkbox"/>
Amex/ Diners Club <input type="checkbox"/>	Store card/ Other cards <input type="checkbox"/>	Amex/ Diners Club <input type="checkbox"/>	Store card/ Other cards <input type="checkbox"/>
Current Account <input type="checkbox"/>	Bank or other loans <input type="checkbox"/>	Current Account <input type="checkbox"/>	Bank or other loans <input type="checkbox"/>
Savings Account <input type="checkbox"/>		Savings Account <input type="checkbox"/>	
<input type="text"/> years <input type="text"/> months		<input type="text"/> years <input type="text"/> months	

COMMITMENTS

Type of commitment

e.g. Personal Loan, credit card, 'buy now, pay later', student loan, maintenance, include details of all credit cards, even if balance paid in full each month.
Whose commitment is it?

Name of lender

Monthly payment

Amount outstanding

Date of final payment

If you are in arrears, please state the number of months

Do you intend to repay this commitment on completion of the mortgage?

Type of commitment

e.g. Personal Loan, credit card, 'buy now, pay later', student loan, maintenance, include details of all credit cards, even if balance paid in full each month.
Whose commitment is it?

Name of lender

Monthly payment

Amount outstanding

Date of final payment

If you are in arrears, please state the number of months

Do you intend to repay this commitment on completion of the mortgage?

Commitment 1	Commitment 2	Commitment 3
<input type="text"/>	<input type="text"/>	<input type="text"/>
You <input type="checkbox"/> Your Partner <input type="checkbox"/> Both <input type="checkbox"/>	You <input type="checkbox"/> Your Partner <input type="checkbox"/> Both <input type="checkbox"/>	You <input type="checkbox"/> Your Partner <input type="checkbox"/> Both <input type="checkbox"/>
<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"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Commitment 4	Commitment 5	Commitment 6
<input type="text"/>	<input type="text"/>	<input type="text"/>
You <input type="checkbox"/> Your Partner <input type="checkbox"/> Both <input type="checkbox"/>	You <input type="checkbox"/> Your Partner <input type="checkbox"/> Both <input type="checkbox"/>	You <input type="checkbox"/> Your Partner <input type="checkbox"/> Both <input type="checkbox"/>
<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"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

If you have more commitments, please continue using section 4 on page 10.

DETAILS OF MORTGAGE REQUIRED

Purchase price of property

Market value

(Right to Buy applications only)

Cost of improvements you intend to make

Amount of loan required

Amount of drawdown required
(if applicable)

Loan period

Are legal fees to be added to the loan?

Stamp duty Land Tax to be added?

Product Fee to be added?

Higher Lending Charge to be added?

Source of deposit

In what area do you intend to purchase?

Repayment type

£ <input type="text"/>
£ <input type="text"/>
£ <input type="text"/>
£ <input type="text"/>
£ <input type="text"/>
<input type="text"/> years
Yes <input type="checkbox"/> No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>
Bank/Building Society account on own name <input type="checkbox"/> Salary <input type="checkbox"/> Sale of property <input type="checkbox"/>
Inheritance <input type="checkbox"/> Family gift <input type="checkbox"/> Other <input type="checkbox"/> Multiple sources <input type="checkbox"/>
Scotland & N Ireland <input type="checkbox"/> North <input type="checkbox"/> North West <input type="checkbox"/> East <input type="checkbox"/> Midlands <input type="checkbox"/>
South Wales & West <input type="checkbox"/> Greater London <input type="checkbox"/> South East <input type="checkbox"/>
Interest Only <input type="checkbox"/> Repayment <input type="checkbox"/> Part Interest Only/ Part Repayment <input type="checkbox"/>

Interest only amount

Give details of new or existing plans or policies to be used with the Interest only part of this mortgage.

Monthly Premium

What is your preferred mortgage payment date?

ISA	Pension	Endowment	Other	Total
£	£	£	£	£
£	£	£	£	£

If no date is specified, a payment date of the 1st of the month will be assumed.

CURRENT LENDER/LANDLORD

Residential status
 Lender's/Landlord's name and address

Telephone number

Fax number

Account number

When did the mortgage/tenancy start?

Highest number of months in arrears in the last 18 months

If renting, how do you pay your rent? e.g. standing order/cash

Monthly rent

Amount outstanding

Year purchased

Amount of original loan

What is the estimated value of your existing property?

1st Customer		2nd Customer	
If you do not currently have a mortgage or tenancy agreement, move to Previous Lender/Landlord section.			
Homeowner <input type="checkbox"/>	Tenant <input type="checkbox"/>	Homeowner <input type="checkbox"/>	Tenant <input type="checkbox"/>
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
Postcode		Postcode	
STD	<input type="text"/>	STD	<input type="text"/>
STD	<input type="text"/>	STD	<input type="text"/>
<input type="text"/>			
<input type="text"/>			
<input type="text"/>		<input type="text"/>	
£		£	
Only complete the next four questions if you are a homeowner.			
£		£	
<input type="text"/>		<input type="text"/>	
£		£	
£		£	

PREVIOUS LENDER/LANDLORD

Residential status
 Lender's/Landlord's name and address

Highest number of months in arrears in the last 18 months

When did the mortgage tenancy start?

What date did this finish?

If renting, how did you pay your rent? e.g. standing order/cash

If the previous sections do not cover an 18 month history, please complete this section.			
Homeowner <input type="checkbox"/>	Tenant <input type="checkbox"/>	Homeowner <input type="checkbox"/>	Tenant <input type="checkbox"/>
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
Postcode		Postcode	
<input type="text"/>			
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>			

PREVIOUS LENDER/LANDLORD

Residential status
 Lender's/Landlord's name and address

Highest number of months in arrears in the last 18 months

If the previous sections do not cover an 18 month history, please complete this section.			
Homeowner <input type="checkbox"/>	Tenant <input type="checkbox"/>	Homeowner <input type="checkbox"/>	Tenant <input type="checkbox"/>
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
Postcode		Postcode	
<input type="text"/>			

From what date do these details apply?

1st Customer				2nd Customer			

What date did this finish?

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If renting how did you pay your rent?
e.g. standing order/cash

If total residency is still less than 18 months, please continue using section 3 on page 10.

DETAILS OF PROPERTY TO BE MORTGAGED

Address of property to be mortgaged

Postcode

REMORTGAGE DETAILS

Original purchase price

£

Year of original purchase

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Estimated current value of your existing property

£

Please provide details of any improvements you have made to the property (including estimated costs).

Outstanding Mortgage Amount

£

Has your home or nearby buildings been damaged by subsidence, heave, landslip or does it show any signs of cracking or bulging? ✓

Yes No

Are there any nearby trees that are closer to the property than their height? ✓

Yes No

Are any within the grounds of the property? ✓

Yes No

Reason for remortgage

Does the remortgage involve other additional services? ✓

Yes No

Are you using your own conveyancer? ✓

Yes No

If yes, please state name and address

Postcode

If yes, who is acting for you?

Have you been advised of the fee to pay? ✓

Yes No

Are there any Early Repayment Charges or other repayment fees applicable? ✓

Yes No

If yes, is the loan sufficient to cover these fees? ✓

Yes No

Is the property in the same name as the new mortgage? ✓

Yes No

Have you been advised to pay for the transfer? ✓

Yes No

Other Secured Lending

Please note, second charges are not permitted on our Personal Choice products.

Name of lender

Loan 1	Loan 2	Loan 3

Account number

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To be repaid or postponed ✓

Repaid Postponed Repaid Postponed Repaid Postponed

Have you been advised if a Deed of Postponement or Ranking Agreement are needed? ✓

Yes No Yes No Yes No

PROPERTY

Type of property House Bungalow Basement flat Ground floor flat

Detachment type Top floor flat Mid floor flat Detached Semi-detached

End terrace Mid terrace Other

If the property is a flat, number of floors in the block

Which floor is the flat on?

Purchase type Normal Sitting tenant Inheritance Gift Other

Age of property years

Who is selling the property? Normal Local Authority New Town Corporation Housing Association

Do you currently own the property? Yes No

Do you currently live at the property? Yes No

Will anyone else live at the property? Yes No

How much of the property will you occupy within 12 months of purchase? All Part None

Does the block include business premises? Yes No

ACCOMMODATION

Please provide the following details about the property

Number of bedrooms Number of bathrooms Number of separate toilets

Number of living rooms Number of habitable rooms

Does the property have central heating? Full Part None

Central heating type? Gas Electricity Oil Solid fuel Other

A conservatory, porch or extension? Yes No

How many cars can be garaged?

Off road parking? Yes No

A garden? Yes No Number of acres

Will the property be used for business purposes? Yes No If 'Yes', please give details in section 4 on page 10.

Will the property be let? Yes No If 'Yes', please give details in section 4 on page 10.

LEGAL TITLE

What is the tenure of the property? Freehold Feudal Commonhold Leasehold

How much will the following be? (if applicable)

Annual ground rent £ Remaining term of lease (if leasehold) years

Annual service charge £ Annual chief rent/ or feu duty (Scotland) £

Entry date – Scotland only

NEWLY BUILT PROPERTIES

Builder's name

If a new property is being purchased please confirm the Building Standards Indemnity Scheme

NHBC Zurich Municipal Premier Guarantee

Architect/Consultant None

Is there a road charge liability? Yes No

ACCESS TO THE PROPERTY

Valuation type Valuation Survey and Valuation Building Survey and Valuation Re-Type

Where Re-Type has been selected, complete valuers name and address

Postcode

Name and address of estate agent

Postcode

Selling agent (if different – alternatively, please state if private sale).

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Daytime telephone number

STD	
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Evening telephone number

STD	
-----	--

DETAILS OF YOUR CONVEYANCER

Name of firm

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Address

Postcode

Who is acting for you?

--

Telephone number

STD	
-----	--

Fax number

STD	
-----	--

Other Occupants

Please give the names of anybody aged seventeen or over and not party to the mortgage who will live at the property.

Forename(s)

--

Surname

--

Forename(s)

--

Surname

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PRODUCT/RATE OPTIONS

Provide details of the products to be used within this application

Type of product e.g. fixed, tracker

Product 1	Product 2	Product 3

Product term/end date

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Interest Rate charged

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Amount allocated to this product

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Product code (if known)

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If there are more than 3 products, please use section 4 on page 10.

INSURANCE REQUIREMENTS

The property must be insured. We will contact you with details of our general insurance products and provide no obligation quotes, unless insurance has already been arranged.

Has insurance already been arranged?

Buildings



Yes

No

Company

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Contents



Yes

No

Company

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Accident, sickness and unemployment



Yes

No

Company

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Supporting Information

Section 1 Additional information on previous address

If you want to provide any additional information to support your application, please use the section below.

Section 2 Additional information on current/previous employers

Section 3 Additional information on previous lenders/landlords

Section 4 Any other information you feel we might need to know to help us assess your application for a mortgage. In particular if the loan extends beyond your retirement, please confirm how you intend to maintain payments.

Your Declaration

I declare that

I authorise you to

I agree that

- I apply for a loan on the security of the property described in this application;
- I am over 18 years of age and believe the information given in this application is correct.
- Make any enquiries of any third parties for reference purposes and for the third party to disclose any information to you;
- Change the address on all my accounts held with the members of your group of companies.
- You and any subsidiary or associated company of yours, will retain commission paid or allowed on any insurance you arrange;
- You may be provided, by the policy or plan provider, with any information relating to any life policy or investment plan being taken into consideration by you in connection with this mortgage;
- I will notify you of any changes in circumstances relating to my purchase or mortgage before it is entered into and I authorise my conveyancer to disclose such information to you;
- Relevant data may be passed to any guarantor of my loan or to their legal adviser;
- You will search credit reference agency files for credit information in assessing my application. The agency will also give you other details and information from the Electoral Register to verify my identity. The agency will keep a record of the search type (credit or identification), whether or not my application proceeds.
You may use credit scoring methods to assess my application and verify my identity. Members of your group and other companies may use credit searches and other information supplied to them and/or the credit reference agencies about me and someone linked financially with me, to make credit decisions about me or other members of my household. Any of this information may also be used for identification purposes, debt tracing, preventing money laundering and managing my account.
You may give details of my account and how I conduct it to credit references agencies. If I borrow and do not repay in full and on time, you may tell credit reference agencies who will record the outstanding debt;
- If I become unemployed, Halifax Insurance Ireland Ltd can refer my name, address and telephone number to MENTOR Professional Services Ltd.
- I have received an Initial Disclosure Document and a Key Facts Illustration relating to this mortgage.

I understand that:

- The payment of any property assessment and/or arrangement fees is non-refundable and shall not mean that you have to make an advance;
- Where Homebuyers Survey and Valuation Report has been chosen, you will choose the valuer for the property assessment and that it is the valuer's responsibility to agree the Conditions of Engagement for the private survey element with me;
- If I state a financial association with another person, I declare that I am entitled to provide information about my joint applicant and anyone else I mention. I also declare that they authorise you to search, link and/or record information about them at credit reference agencies.

Sole named applications – I note that information held about me by the credit reference agencies may already be linked to records relating to one or more of my partners. During this application we may be treated as financially linked and my application may be assessed with reference to any "associated" records;

- You will pass the information on this form and about any incident I may give details of to Insurance Database Services Ltd (IDS Ltd) so that they can make it available to other insurers. I also understand that, in response to any searches you may make in connection with this application or any incident I have given details of, IDS Ltd may pass you information it has received from other insurers about other incidents involving anyone insured under the policy.
- When considering an application for credit, you may use the information supplied to you to offer additional products.

TMPP

Please note: the following declaration will apply to any application that you make for a Total Mortgage Protection Plan

I declare to the best of my knowledge and belief that the statements and information I provide for my Total Mortgage Protection Plan application are true and complete. I understand that my application is subject to underwriting by you and that I will be notified in writing if I have been accepted. I understand that:

- You will use my answers in my application to work out the risk under the plan
- I must tell you all material facts that may affect the risk
- Material facts are those that an insurer would regard as likely to influence the assessment and acceptance of an application
- If I am in doubt as to whether a fact is material or not, I must tell you about it; and if I do not tell you all material facts, my plan could be made void.

I undertake to advise you immediately in writing if there is any change in my occupation or health before the start of the plan.

I understand that you regard my answers to the specific occupation and health questions to be material to the risks covered by the plan. I warrant that my answers are correct and understand that, if this is not the case, you may end my plan without any premium refund and without payment of any benefit. You may also require replacement of any benefit already paid. I understand that these questions and answers will be included in the acceptance terms (in the document, "Information Provided") which you will send to me. I agree to check that these terms are accurate and keep them in a safe place. I understand that I should keep a record of all information you give me about this application, that the application forms part of the plan and that a copy of the plan conditions is available on request.

Fraud Prevention

Mortgage Repayments Cover is underwritten by St Andrew's Life Assurance plc, St Andrew's House, Portsmouth Road, Esher, Surrey, KT10 9SA. Registered in England No. 3104670. We will check your details with fraud prevention agencies. If you give us false or inaccurate information and we suspect fraud, we will record this. We and other organisations may use and search these records to help:

- Make decisions about credit and related services for you and members of your household
- Make decisions on motor, household, credit, life and other insurance proposals and insurance claims, for you and members of your household
- Trace debtors, recover debt, prevent fraud and to manage your accounts or insurance policies
- Check your identity to prevent money laundering, unless you provide us with other satisfactory proof of identity.

Claims and Underwriting Exchange

Insurers and their agents pass information to the Claims and Underwriting Exchange register, run by IDS Ltd. The aim is to help us check information provided and also to prevent fraudulent claims. When we deal with your request for insurance, we may search the register. When you tell us about an incident (such as fire, water damage or theft) which may or may not give rise to a claim, we will pass information relating to it to the register. You can ask us for more information about this. You should show this notice to anyone who has an interest in the property insured under the policy.

Insurance

Please note that when applying for insurance you must declare all material information known to you which could influence the acceptance or assessment of your application. Material information includes any special feature of the property or member of your household which make losses more likely to happen or more serious if they do. If you are unsure whether a piece of information is material, you should disclose it. Failure to disclose all material information may result in you being quoted the wrong terms, a claim being rejected or reduced, or the policy being invalid. The application form forms part of the insurance contract.

Insurance will not commence until your application has been accepted. We and the insurers reserve the right to decline any application.

Register of Claims

In the event of an insurance claim, any information which you provide to the insurer, whether as part of your loan application, the claim form or otherwise, may be put onto a Register of claims through which the insurers share such information to prevent fraudulent claims. A list of participants and the name and address of the operator are available from the insurer.

Data Protection Act

Any information you provide will be held by Halifax plc, St Andrew's Insurance plc, Bank of Scotland, Halifax General Insurance Services Limited and St Andrew's Life Assurance plc. Relevant information may also be passed to our agents, service providers and where necessary, reinsurers. Members of HBOS group of companies may use it to inform you by letter, telephone, e-mail or otherwise about any products and services offered by the group and selected third parties, unless you have already asked us not to do so.

It is important to read the small print on your application and to refer to our leaflet, 'About you – Personal Information and how we use it'. By signing your application, you agree that we can use your information in the ways described.

Signed

Date

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Signed

Date

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Guarantor's Declaration

I make the declarations set out in paragraphs 2, 3 and 9 above in respect of myself. I agree that I will notify you of any changes in circumstances relating to the guarantee before I enter into it and I authorise my conveyancer to disclose such information to you.

By giving the guarantee you might become liable instead of or as well as the applicant(s). The guarantee will be limited. You should get independent legal advice before you give the guarantee.

Signed

Date

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REMORTGAGE CUSTOMER AUTHORITY

If there is more than one owner of the property, each one must read and sign this form as well as the main declaration.

Only applicable when using Bank of Scotland's Remortgage Service

1. I authorise you or any conveyancers acting for you in connection with the proposed remortgage of my property:
 - To obtain the title deeds to the property
 - To obtain a repayment figure from my/our current lender(s);
2. I confirm that I will make my own enquiries about and pay any fees or charges made by my current lender in connection with the repayment of my existing mortgage (including any administration fees made in respect of the sending of the title deeds to your conveyancer and providing a Early Repayment Charge and any Early Repayment Charge in connection with my existing mortgage).
3. I understand that your conveyancer is only representing you and that if I want independent legal advice at any stage of this transaction I will obtain it myself.
4. I understand that you may not arrange for an inspection of the property to be carried out. I further understand that you will not routinely tell me what its assessment of the value of the property is.
I understand that, if you are prepared to make me a loan, I must not rely upon any assessment made as an indication of the value of the property. You have informed me and I accept that, if I require any information about the value or condition of the property or about any health and safety issues, it is my responsibility to obtain independent legal advice before I go ahead with the remortgage of the property.

Land Registry

I authorise your conveyancer to obtain copies of any document held at any of the land registries in England and Wales, Scotland and Northern Ireland.

Signed	<input type="text"/>
Date	<input type="text"/>
Signed	<input type="text"/>
Date	<input type="text"/>
Signed	<input type="text"/>
Date	<input type="text"/>
Signed	<input type="text"/>
Date	<input type="text"/>



NEW SPECIMEN SIGNATURE DOCUMENT

Please provide your specimen signature(s) in the space provided. If you are applying for a joint account, you must both sign.

Account Roll Number

PLEASE SIGN YOUR NAME IN THE SIGNATURE BOX IN BLACK INK

First/sole applicant's signature

Second applicant's signature (if applicable)

Please do not write or mark in the white area below

