

# Commercial Mortgage Application Form

## Section 1

### Intermediary details (Intermediary to complete)

Name	<input type="text"/>		
Company Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Email Address	<input type="text"/>		
Telephone	<input type="text"/>		
Mobile	<input type="text"/>		
FCA Number	<input type="text"/>	(if applicable)	
I confirm that the information contained within this application is true and correct to the best of my knowledge.			
Signature of Intermediary	<input type="text"/>		Date <input type="text"/>

## Section 2

### Packager Details (Active Investments to complete)

Contact Name	<input type="text"/>		
Company Name	Active Investments		
Address	First Floor, 6 Orpheus House, Calleva Park, Aldermaston, Berkshire		
	<input type="text"/>	Postcode	RG7 8TA
	<input type="text"/>		
Email Address	info@active-investments.co.uk		
Telephone	<input type="text" value="0118 945 2288"/>	Facsimile	<input type="text" value="0118 941 3878"/>
Company Number	<input type="text" value="3063014"/>	CCL no.	<input type="text" value="395815"/>
		Data Prot no.	<input type="text"/>
Name of network or B.D.M (if applicable)	<input type="text"/>		
Signature on behalf of packager	<input type="text"/>		
Print name	<input type="text"/>		
Case Manager	<input type="text"/>	Active Investments ref. Number	<input type="text"/>

### Section 3 Application Summary (Intermediary to complete)

Purpose (please tick)

Property Purchase	<input type="checkbox"/>	Property Refinance	<input type="checkbox"/>	Business Finance/Working Capital	<input type="checkbox"/>
Bridging	<input type="checkbox"/>	Property Development	<input type="checkbox"/>	Other	<input type="checkbox"/>

Amount Required

Purchase Price / Value

Applicant's funds/contribution  Source

Term required  years

Payment required  Capital & Interest  Interest Only

Payment required Lump sum (specify source)

Brief description of security available

### Section 4 Borrowers Personal Details (please complete if you are an individual applicant or the first two Directors/Partners)

	1st applicant		2nd applicant	
Mr/Mrs/Miss/Other	<input type="text"/>		<input type="text"/>	
Surname	<input type="text"/>		<input type="text"/>	
Forename(s)	<input type="text"/>		<input type="text"/>	
Date of Birth	<input type="text"/>		<input type="text"/>	
Dependents	How many? <input type="text"/>	Ages <input type="text"/>	How many? <input type="text"/>	Ages <input type="text"/>
Marital Status	Single	<input type="checkbox"/>	Married	<input type="checkbox"/>
	Separated	<input type="checkbox"/>	Divorced	<input type="checkbox"/>
	Living Together	<input type="checkbox"/>	Widowed	<input type="checkbox"/>
Home Address	<input type="text"/>		<input type="text"/>	
	<input type="text"/>		<input type="text"/>	
	<input type="text"/>		<input type="text"/>	
Postcode	<input type="text"/>		Postcode	<input type="text"/>

# Section 4 continued

Residential Status	1st applicant	2nd applicant
	Homeowner <input type="checkbox"/> Tenant <input type="checkbox"/>	Homeowner <input type="checkbox"/> Tenant <input type="checkbox"/>
	Living with Relatives <input type="checkbox"/>	Living with Relatives <input type="checkbox"/>
	Other <input type="text"/>	Other <input type="text"/>
Time at current address	<input type="text"/> years <input type="text"/> months	<input type="text"/> years <input type="text"/> months
If less than 3 years please give previous address*	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode <input type="text"/>	Postcode <input type="text"/>
Residential status at previous address	Homeowner <input type="checkbox"/> Tenant <input type="checkbox"/>	Homeowner <input type="checkbox"/> Tenant <input type="checkbox"/>
	Living with Relatives <input type="checkbox"/>	Living with Relatives <input type="checkbox"/>
	Other <input type="text"/>	Other <input type="text"/>
Time at previous address	<input type="text"/> years <input type="text"/> months	<input type="text"/> years <input type="text"/> months
<b>Current Contact Details</b>		
Telephone (home)	<input type="text"/>	<input type="text"/>
Telephone (work)	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>
Facsimile	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>	<input type="text"/>

\*If the applicant has had more than one previous residence in the last 3 years please provide full addresses for each property on a separate sheet of paper and attached to this form.

## Section 5 Employment Details

Employed (Please complete this section if you are employed only)

1st applicant

2nd applicant

Occupation



Employer's name



Employers address







Postcode

Postcode

Which rate of tax do you pay:

Basic Rate  Higher Rate  Additional Rate

Basic Rate  Higher Rate  Additional Rate

Start date D/M/Y

 /  / 
 /  / 

Annual gross salary

£

£

Other regular income

£

£

State Benefits

£

£

## Section 6 Self-employed (please complete this case if you are self-employed)

Self-employed (Please complete this section if you are self-employed only)

1st applicant

2nd applicant

Name of Business



Business Address









Postcode

Postcode

Date Started Trading

 /  / 
 /  / 

Net profit per annum

£  Year ending

£  Year ending

£  Year ending

£  Year ending

£  Year ending

£  Year ending

Other regular income

£

£

State benefits

£

£

Other regular income

£

£

# Section 7

Proposal (what money is to be used for?)

Purchase value/Estimated price

£

Loan required

£

Term

years

Address

	Postcode

Tenure

Freehold

Leasehold

If borrowing by Ltd company please provide name

If leasehold, years remaining on lease

years

Annual Rent

£

Date

/ /

Vacant possession or completion?

Yes

No

Is property currently let?

Yes

No

Name of Tenant

Telephone no

Is the property let on an AST (Assured Shorthold Tenancy) basis?

Yes

No

If yes provide details on additional page at rear of form

Intended use?

Own business

Investment

Own business & residential

Access contact for valuation

If providing additional security please advise us of all the above information on the additional security in section 9 of this application form.

If you are re-mortgaging please provide details of first and second charges on the above property.

Lender name

Account No.

Outstanding balance

£

Original purchase price

£

Date purchased

Purpose of Loan

(capital raising/better rate etc)



# Section 10

## Declaration (Must be completed in all cases by each applicant)

	1st applicant		2nd applicant	
Have you ever been convicted of any offence (other than driving offences)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever had an insurer decline or cancel insurance /or impose special terms?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you or have you been in arrears with any credit agreement e.g mortgage, loan, etc. within the last 3 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever had any County Court Judgements against you?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If yes, please provide details


I/we understand that Active Investments or any of their lender partners may

1. Obtain credit reference searches, which will be recorded and disclosed on any other credit search
2. Take up such reference to verify the information provided
3. Release information relating to this application to me

I/we agree that the information contained in this application form and any other information I/we supply to you may be held on computer and in other forms. I/we understand that you will update all of my/our records, unless I/we instruct you otherwise, when I/we inform you of a change to personal details.

I/we understand that you or the Lender will disclose personal details to credit reference agencies, fraud prevention agencies and if necessary to any repossessions register. Details of how I/we conduct the account may be given to these agencies. Repossession information held on any register may be shared with other lenders and used for credit assessment, debt tracing, fraud detection and to protect me/us from theft or fraud. The Lender and/or you will add to these records details of my/our agreement with the Lender, the payments made under it and any default in payment or failure to keep to it's terms.

I/we give consent to you and the Lender to use my/our data for the processing of this mortgage. You and/or the Lender may pass this information, documents and any data held to any party the Lender is considering entering a contractual arrangement in relation to the mortgage loan, any introducer of mortgages to the Lender, the buildings and contents insurer, as the Lender may decide.

I/we confirm we understand that Active Investments charge a non-refundable application fee. In addition, a valuation fee may be required which is non-refundable once a valuation has been instructed.

I/We confirm and understand that Active Investments (Reading) Ltd charge a non-refundable application fee. In addition, a valuation fee may be required which is non-refundable once a valuation as been instructed.

I/we declare that the information provided in this application is true and correct to the best of my/our knowledge and may be relied upon by Active Investments.

I/We confirm that I/We have received a copy of the Active Investments (Reading) Ltd Terms of Business and Privacy Notice, along with the Lender Privacy Notice. (which are all available to download at [www.active-investments.co.uk](http://www.active-investments.co.uk))

### APPLICANT

#### INDIVIDUAL/PARTNER 1/DIRECTOR 1

Signature	<input type="checkbox"/>
Print Name	<input type="checkbox"/>
Date	<input type="checkbox"/>

#### PARTNER 2/DIRECTOR 2

Signature	<input type="checkbox"/>
Print Name	<input type="checkbox"/>
Date	<input type="checkbox"/>

#### PARTNER 3/DIRECTOR 3

Signature	<input type="checkbox"/>
Print Name	<input type="checkbox"/>
Date	<input type="checkbox"/>

#### PARTNER 4/DIRECTOR 4

Signature	<input type="checkbox"/>
Print Name	<input type="checkbox"/>
Date	<input type="checkbox"/>