

# Secured Loan Application Form

P01

## 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:	<input type="checkbox"/>	FCA number:	<input type="text"/>		
An appointed representative:	<input type="checkbox"/>	FCA number:	<input type="text"/>	Network:	<input type="text"/>
Not authorised:	<input type="checkbox"/>				

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

Signature of introducer:	<input type="text"/>	Print name:	<input type="text"/>
		Date:	<input type="text"/> / <input type="text"/> / <input type="text"/>
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 type="checkbox"/>
	2. <input type="text"/>	£ <input type="text"/>	On application: <input type="checkbox"/> On completion: <input type="checkbox"/>
	3. <input type="text"/>	£ <input type="text"/>	On application: <input type="checkbox"/> On completion: <input type="checkbox"/>

## Section 2: Loan Requirements

Loan amount:	<input type="text"/>	Interest only	<input type="checkbox"/>	Repayment	<input type="checkbox"/>
Loan purpose:	<input type="text"/>	Method of repaying the loan if interest only:	<input type="text"/>		
Term*	<input type="text"/>				

\*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"/>

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<p>1st Applicant cont...</p> <p>Date of birth: <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Home telephone no: <input type="text"/></p> <p>Mobile no: <input type="text"/></p> <p>Email address: <input type="text"/></p> <p>Marital status: Single: <input type="checkbox"/> Married: <input type="checkbox"/>          Divorced: <input type="checkbox"/> Living Together: <input type="checkbox"/>          Separated: <input type="checkbox"/> Widowed: <input type="checkbox"/></p> <p>Nationality: <input type="text"/></p> <p>Home Address: <input type="text"/></p> <p>Postcode: <input type="text"/></p> <p>Time at current address: Years: <input type="text"/> Months: <input type="text"/></p> <p>Previous address: <input type="text"/>  <small>(If less than 3 at current)</small></p> <p>Postcode: <input type="text"/></p> <p>Time at current address: Years: <input type="text"/> Months: <input type="text"/></p>	<p>2nd Applicant cont...</p> <p>Date of birth: <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Home telephone no: <input type="text"/></p> <p>Mobile no: <input type="text"/></p> <p>Email address: <input type="text"/></p> <p>Marital status: Single: <input type="checkbox"/> Married: <input type="checkbox"/>          Divorced: <input type="checkbox"/> Living Together: <input type="checkbox"/>          Separated: <input type="checkbox"/> Widowed: <input type="checkbox"/></p> <p>Nationality: <input type="text"/></p> <p>Home Address: <input type="text"/></p> <p>Postcode: <input type="text"/></p> <p>Time at current address: Years: <input type="text"/> Months: <input type="text"/></p> <p>Previous address: <input type="text"/>  <small>(If less than 3 at current)</small></p> <p>Postcode: <input type="text"/></p> <p>Time at current address: Years: <input type="text"/> Months: <input type="text"/></p>
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If this does not cover 3 years, please provide details in additional info (Section 7)

If this does not cover 3 years, please provide details in additional info (Section 7)

Details of dependants:

1. <input type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>
2. <input type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>
3. <input type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>
4. <input type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>

Details of dependants:

1. <input type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>
2. <input type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>
3. <input type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>
4. <input type="text"/>	D.O.B.	<input type="text"/> / <input type="text"/> / <input type="text"/>

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 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"/>

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## Section 4: Employment Details

<p>1st Applicant cont...</p> <p>Employment status: Employed: <input type="checkbox"/> Self employed: <input type="checkbox"/></p> <p>Occupation: <input style="width: 100%;" type="text"/></p> <p>National Insurance no. <input style="width: 100%;" type="text"/></p> <p>Time in job: (if less than 3 years previous employment is required) <input style="width: 100%;" type="text"/></p> <p>Employers name: <input style="width: 100%;" type="text"/></p> <p>Address: <input style="width: 100%; height: 40px;" type="text"/></p> <p>Employers telephone no: <input style="width: 100%;" type="text"/></p> <p>Gross annual income: <input style="width: 100%;" type="text"/></p> <p>Net monthly income: <input style="width: 100%;" type="text"/></p> <p>Additional income:</p> <p style="margin-left: 20px;">Overtime: <input style="width: 100px;" type="text"/></p> <p style="margin-left: 20px;">Bonus: <input style="width: 100px;" type="text"/></p> <p style="margin-left: 20px;">Commission: <input style="width: 100px;" type="text"/></p> <p style="margin-left: 20px;">Other: <input style="width: 100px;" type="text"/></p> <p>Source of other income: <input style="width: 100%; height: 25px;" type="text"/></p> <p>Tax code: <input style="width: 100%;" type="text"/></p> <p>Estimated retirement age: <input style="width: 100px;" type="text"/></p> <p>Income reference available: Payslips &amp; p60 <input type="checkbox"/> Accountants reference <input type="checkbox"/> SA302 Tax returns <input type="checkbox"/> Accounts <input type="checkbox"/></p> <p>Accountant name &amp; company: <input style="width: 100%;" type="text"/></p> <p>Accountant address: <input style="width: 100%; height: 40px;" type="text"/></p> <p>Accountant telephone no: <input style="width: 100%;" type="text"/></p> <p>Accountant email: <input style="width: 100%;" type="text"/></p> <p>Accountant qualification: <input style="width: 100%;" type="text"/></p>	<p>2nd Applicant cont...</p> <p>Employment status: Employed: <input type="checkbox"/> Self employed: <input type="checkbox"/></p> <p>Occupation: <input style="width: 100%;" type="text"/></p> <p>National Insurance no. <input style="width: 100%;" type="text"/></p> <p>Time in job: (if less than 3 years previous employment is required) <input style="width: 100%;" type="text"/></p> <p>Employers name: <input style="width: 100%;" type="text"/></p> <p>Address: <input style="width: 100%; height: 40px;" type="text"/></p> <p>Employers telephone no: <input style="width: 100%;" type="text"/></p> <p>Gross annual income: <input style="width: 100%;" type="text"/></p> <p>Net monthly income: <input style="width: 100%;" type="text"/></p> <p>Additional income:</p> <p style="margin-left: 20px;">Overtime: <input style="width: 100px;" type="text"/></p> <p style="margin-left: 20px;">Bonus: <input style="width: 100px;" type="text"/></p> <p style="margin-left: 20px;">Commission: <input style="width: 100px;" type="text"/></p> <p style="margin-left: 20px;">Other: <input style="width: 100px;" type="text"/></p> <p>Source of other income: <input style="width: 100%; height: 25px;" type="text"/></p> <p>Tax code: <input style="width: 100%;" type="text"/></p> <p>Estimated retirement age: <input style="width: 100px;" type="text"/></p> <p>Income reference available: Payslips &amp; p60 <input type="checkbox"/> Accountants reference <input type="checkbox"/> SA302 Tax returns <input type="checkbox"/> Accounts <input type="checkbox"/></p> <p>Accountant name &amp; company: <input style="width: 100%;" type="text"/></p> <p>Accountant address: <input style="width: 100%; height: 40px;" type="text"/></p> <p>Accountant telephone no: <input style="width: 100%;" type="text"/></p> <p>Accountant email: <input style="width: 100%;" type="text"/></p> <p>Accountant qualification: <input style="width: 100%;" type="text"/></p>
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## Section 5: Expenditure and Consolidation

Number of cars owned:

### Monthly expenditure

	Applicant 1	Applicant 2
Car expenses (including tax, MOT, insurance, petrol etc):	£ <input type="text"/>	£ <input type="text"/>
Ground rent/service charge:	£ <input type="text"/>	£ <input type="text"/>
Pension/life Insurance/mortgage repayment vehicle:	£ <input type="text"/>	£ <input type="text"/>
Buildings & contents insurance:	£ <input type="text"/>	£ <input type="text"/>
Council tax:	£ <input type="text"/>	£ <input type="text"/>
Gas, electricity, heating fuels:	£ <input type="text"/>	£ <input type="text"/>
Water:	£ <input type="text"/>	£ <input type="text"/>
Shopping:	£ <input type="text"/>	£ <input type="text"/>
Costs for medical/care assistance:	£ <input type="text"/>	£ <input type="text"/>
TV, internet, sky/cable, telephone, mobile:	£ <input type="text"/>	£ <input type="text"/>
Entertainment & recreation:	£ <input type="text"/>	£ <input type="text"/>
Clothing:	£ <input type="text"/>	£ <input type="text"/>
Child related expenses:	£ <input type="text"/>	£ <input type="text"/>
Other expenses:	£ <input type="text"/>	£ <input type="text"/>
Other travel expenses:	£ <input type="text"/>	£ <input type="text"/>
<b>Total:</b>	£ <input type="text"/>	£ <input type="text"/>

### Unsecured Credit

Please complete the boxes below detailing any outstanding loans, credit cards, mail orders, defaults, county court judgements etc...

Company name	Applicant	Type	Account Number	Balance	Monthly payment	Tick if being repaid
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	<input type="checkbox"/>

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## 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 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"/> Semi detached <input type="checkbox"/> Bungalow <input type="checkbox"/> Terrace <input type="checkbox"/> Maisonette <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 type="checkbox"/> Yes <input type="checkbox"/> No	Does the property have a private parking space:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the property have a garage:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the property ex local authority:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the property standard construction:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the property a buy to let property:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Any history of flooding: <small>If yes please provide details below</small>	<input 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: <small>If yes please provide name, age, relation to applicant below.</small>	<input 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 type="checkbox"/> Yes <input type="checkbox"/> No
Details of any alterations made to the property or any factors that may affect value: <small>(pylons/sub stations, scrap yards, commercial development, or any positive matters)</small>	<input type="text"/>			

### Section 7: Additional Information

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

I/we authorise Vantage 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) Vantage 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 Vantage Finance.
- 3) Vantage 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 organisations 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) Vantage Finance may store the information I have provided to it on computer or in records. I acknowledge that Vantage Finance will only use information for this purpose registered under the Data Protection Act 2003 and that I may request in writing a copy of the details Vantage Finance holds about me and shall be supplied with such details upon written request to the Data Protection Officer at Vantage Finance together with the payment to Vantage Finance of a £10 fee.

#### 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.
- authorise 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.**

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