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Applicant Name(s):

Fact Find

YOU CAN COMPLETE THIS FORM ON YOUR PC BY FILLING IN THE FIELDS IN ADOBE READER/ACROBAT OR YOU CAN PRINT IT AND COMPLETE BY HAND.

PLEASE COMPLETE THE INFORMATION ON THE FOLLOWING PAGES AS CAREFULLY AS POSSIBLE AS THE INFORMATION YOUR CONFIRM HERE COULD BE USED TO SUBMIT YOUR APPLICATION TO A LENDER.

IF YOU NEED ASSISTANCE IN COMPLETING THIS FORM, PLEASE DO NOT HESITATE TO CONTACT YOUR ADVISER USING THE DETAILS ABOVE.

PLEASE RETURN THIS FORM EITHER TO YOUR ADVISER OR TO THE ABOVE EMAIL/ADDRESS.

THINK CAREFULLY BEFORE SECURING DEBTS AGAINST YOUR HOME. YOUR HOME MAY BE REPOSSESSED IF YOU DO NOT KEEP UP REPAYMENTS ON YOUR MORTGAGE.

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Section 0: Corporate Details (if applicable)

If you are applying for a BTL, Commercial or Semi-Commercial Mortgage or Bridging Finance and are applying as a corporate or non personal entity please provide details below:

Registered Company Name:					
Trading Name (if applicable):					
Company Type:					
Ltd Company No. (if applicable):					
Started Trading Date:					
Incorporation Date:					
Main Business Activity:					
Registered Address:					
Registered Postcode:					
Business Address:					
Business Postcode:					
Correspondence Address:					
Correspondence Postcode:					
Primary Telephone:					
Primary Email:					
Website:					
SIC Code (if applicable):					
Has the Business ever:					
Had a loan or mortgage refused	d? (Yes		No	
 Made a composition with credition (where they have accepted a pof a debt in full settlement) incompany Voluntary Arrangem 	roportion luding a	Yes		No	
• Had a property repossessed?		Yes		No	
 Failed to keep up repayments of mortgage, credit card or other arrangement? 		Yes		No	
Broken any credit agreements?		Yes		No	
 Had a court order for debt regi against it 	stered	Yes		No	
Number of Partners/Directors/Be	neficiaries/Trustees:				
Please provide details:					
Name:			Shareholding		%
Name:			Shareholding		%
Name:			Shareholding		%
Name:			Shareholding		%
Name:			Shareholding		%

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Section 1: Your Personal Details

	<u>Applicar</u>	nt T	Appl	icant 2
Title				
Forename(s)				
Surname				
Maiden/Previous Name				
Date of Change				
Date of Birth				
Sex				
Marital Status				
Nationality				
National Insurance No.				
Home Telephone				
Work Telephone				
Mobile Telephone				
Email Address				
Do you have any depend	ants? Yes	No	Yes	No
If yes, please provide det	ails below:			
Name		Date	e of Birth	
Name		Date	e of Birth	
Name		Date	e of Birth	
Name		Date	e of Birth	
Name		Date	e of Birth	
Current Residential Address				
Postcode				
Residential Status	Owner	Tenant	Owner	Tenant
	Living with fam	nily/friends	Living with	family/friends
Time at this Address	Years	Months	Years	Months
Are you on the electoral roll?	Yes	☐ No	Yes	☐ No
If you have been at your of address below:	current address for less	than 3 years plea	ase provide your pre	evious residential
Previous Residential Address				
Postcode				
Time at the address	Years	Months	Years	Months

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Section 2: Your Employment & Income Details

	<u>Appli</u>	cant 1	<u>Appl</u>	icant 2
Job Title/Occupation				
Expected Retirement Age				
Status	Permanent	Contract	Permanent	Contract
	Temp	Other	Temp	Other
Employed Income				
Employer's Name				
Start Date				
Employer's Address				
Employer's Postcode				
Gross Annual Basic				
Details of any commission, bonus or overtime income (amount, frequency, guaranteed or regular etc.)				
If you have been in your curre previous employment	nt employment for l	less than 12 months	please provide the de	etails of your
Self-Employed Income				
Business Type				
Business Name				
Registered Address				
Registered Postcode				
Time Self-Employed	Years	Months	Years	Months
Shareholding		%		%
3 Years (pre-tax) Net Profit				
Year Ending	£		£	
Year Ending	£		£	
Year Ending	£		£	
Salary	£		£	
Dividends	£		£	
Accountant's Name				
Accountant's Telephone				
Accountant's Qualification				

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Retirement Income

	Applicant 1	Applicant 2
State Pension	£	£
Occupational Pension	£	£
War Pension	£	£
Widow/Widower Pension	£	£
Private Pension	£	£
Private Pension Provider		
Private Pension	£	£
Private Pension Provider		
Other Income		
Rental Income Fostering	£	£
Income Investment	£	£
Income Maintenance	£	£
Income Mortgage Subsidy	£	£
Universal Credit	£	£
Child Benefit	£	£
Child Tax Credits Working	£	£
Tax Credits Lifetime	£	£
Invalidity Benefit Other	£	£
Benefits	£	£
Other Income	£	£
Other Income Type	£	£

Income Changes

Do you anticipate any changes to your income or employment in the near future? If yes please provide details below:

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Section 3: Your Credit Status

Have you ever had any of the following credit issues? Either currently, in the recent past or historically? If you are unsure of the details of any credit issues you may have/had, then we highly recommend you obtain a copy of your credit file.

	<u>Applica</u>	<u>ınt 1</u>	<u>Applicar</u>	<u>nt 2</u>
Mortgage or secured loan arrears?	Yes	☐ No	Yes	☐ No
Had a loan or mortgage refused?	Yes	☐ No	Yes	☐ No
Default(s) registered against you?	Yes	☐ No	Yes	☐ No
CCJ(s) registered against you?	Yes	☐ No	Yes	☐ No
Been declared Bankrupt?	Yes	☐ No	Yes	☐ No
Entered into an IVA?	Yes	☐ No	Yes	☐ No
Entered into a Debt Management Plan?	Yes	☐ No	Yes	☐ No
Entered into an arrangement to pay with a creditor?	Yes	☐ No	Yes	☐ No

If you have answered yes to any of the above, please provide full details

Section 4: Assets

Assets

Asset Type		Value of Asset	
	Applicant 1	Applicant 2	<u>Joint</u>
Current Accounts	£	£	£
Building Societies	£	£	£
National Savings	£	£	£
ISAs	£	£	£
Investments	£	£	£
Other Assets	£	£	£
Total Assets Value	£	£	£

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Section 5: Credit Commitments

Please provide details of all ongoing debts i.e. secured loans, unsecured loans, hire purchase, overdrafts, credit cards, store cards, mail orders etc. If 'none' please tick here

Applicant One/Two/ Joint	Commitment Type	Lender / Creditor	Remaining Term on Credit	Balance	Monthly Payment	To be repaid from mortage? Yes/No
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	
				£	£	

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Section 6: Existing Property Portfolio

Please provide details of all properties currently owned by yourself including: BTL, Residential and Commercial investment properties,

Holiday Homes, Second Homes.

If none please tick here (if you have an existing property portfolio please forward a copy with return of this Fact Find)

Applicant One/Two/ Joint	Property Type: Residential/Commercial Investment, Second Home, Holiday Home	Lender	Property Valuation	Outstanding Balance	Monthly Payment	Monthly Rental (if applicable)	To be Redeemed? Yes/No
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	
			£	£	£	£	

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Section 7: Budget Planner & Expenditure

Please only complete "existing" column at this stage. The "proposed" and "differences" columns can be completed later.

ricase only complete existing colui	Existing	Proposed	Differences
Net Monthly Income			
Committed Expenditure			
Mortgage/Rent/Board			
Other/Second Mortgage(s)			
Second Charge(s)			
Unsecured Borrowing			
Maintenance			
Other Expenditure			
Sub-Total			
Living Expenses			
Electricity			
Gas/Oil			
Water			
Council Tax			
Service Charge/Ground Rent			
Food/Housekeeping			
Repairs/Decorating			
Clothing/Health & Beauty			
Telephone/Mobiles			
TV/Internet Packages			
Fuel/Car Maintenance			
Public Transport/Other Travel			
School Fees			
Childcare			
Medical Expenses			
Contingencies			
Other Expenses			
Sub-Total			
<u>Insurances</u>			
Buildings & Contents			
Life/Income Protection			
Car/Motor			
Health/Dental			
Other Insurances			
Sub-Total			
Total Outgoings			
Surplus Monthly Income			

FOR OFFICE USE

The DTIR calculation is based on the net income figures and total noted outgoings (including proposed mortgage payment) which should not exceed 85% of net monthly income. This will allow a 15% comfort buffer to be provided with the affordability

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Additional Information

Please use the space below to detail any additional information relating to sections 1-7 of this form, or any information that we have not made space for that you feel we should be aware of

Section Number	Information

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Section 8: Existing Mortgage Details (if applicable)

Please choose the option(s) that b	est describe you	r current situation i	from the list av	ailable below
First Time Buyer Home	mover Re	mortgage 🔲 L	et to Buy	
First Time Landlord Sm	nall portfolio lan	dlord Profess	sional Landlord	(4+properties)
	Арр	licant 1	<u>Ap</u>	olicant 2
Joint with Applicant	2		1	
Current Lender				
Account Number				
Outstanding Balance	£		£	
Monthly Payment	£		£	
Remaining Term		Years		Years
Repayment Type				
Current Interest Rate		%		%
Interest Rate Type	Variable	Discounted	Variable	Discounted
	Fixed	Capped	Fixed	Capped
Initial Rate End Date				
(if applicable)				
Early Redemption Penalty	£		£	
(if applicable)				
Are you prepared to pay this penalty if required?	Yes	No	Yes	□ No
Are your current mortgage terms portable to a new property?	Yes	No	Yes	☐ No
Have you approached your current lender for the mortgage funds?	Yes	No	Yes	☐ No
What was the outcome (if applicable)				
Have you had any second charges or further advances	Yes	☐ No	Yes	☐ No
(existing or otherwise)				
Are you selling your property?	Yes	☐ No	Yes	☐ No
If yes what is the sale price?	£		£	

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Section 9: New Mortgage Details

What type of loan are you	Purchase	Remortgage	Secured Lo	oan
looking to apply for?	Further Adv	ance Produ	ct Transfer	
What type of mortgage are you	Residential	BTL	Commercial	Bridging
looking to apply for?	Mortgage	Mortgage	Mortgage	Finance
Repayment Method Capital &	Interest		C&I £	
Interest	Only	Part	I/O £	
How much do you wish to borrow?	£			
Over how long do you wish to borrow?	?	Year	s	Months
Reason for term length:				
If this is a purchase application:				
What is the purchase price?	£			
How much deposit do you have?	£			
What is the source of the deposit?				
If this is a remortgage application:				
What is the estimated valuation of the	property? £			
What is the purpose of the remortgage	e?			
■£ for £ remortgage Debt cons	olidation Ca	pital Raising	Transfer of Equity	Other
If debt consolidation, capital raising or ot	:her please provide	e details		
If this is a Residential Mortgage applic	<u>:ation:</u>			
Please choose one: Standard	Right To Bu Mortgage	ıy Shared Ov Mortgage		p to Buy rtgage
If Right to Buy:				3 3
What is the valuation of the property?	£			
How much is the discount?	£			
If Shared Ownership:				
What is the valuation of the property?	£			
What is the value of your share?	£			
How much is the shared ownership rem	nt? £			
If Help to Buy:				
How much are you receiving via the sc	heme? £			
If this is a Buy to Let Mortgage applica	tion:			
Existing/Expected Gross Monthly Rent	al Income £			
Will the property be let to a family me	mber?		Yes	No
Did you inherit the property?				
			Yes	No

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Section 10: Mortgage Product Details

What type of	rate would you ideally be l	ooking for?			
Variable	e Tracker	Discounted	Fixed	Don'	t Know
We will explain	n the features and difference	s between the ra	te types and why this is	important	
Please details	the reason(s) for the rate	type you have ch	nosen		
How would y	ou cope if your mortgages	payments increa	ased?		
Do you want	the certainty of the mortga	nge being repaid	at the end of the term	n?	
	Yes (Cautious) - Capital 8	& Interest	No (Adventurous) -	Interest Only	
Attitude to Ri	isk:				
Please choose mortgage:	at least one of the options b	oelow that best de	escribes your own attitu	ude to risk in re	espect of this
Level of Risk	Description			Applicant 1	Applicant 2
Cautious	People in this category, set as the their loan and are unwilling to ris redemption or they do not have redemption.	k not having the full	amount repaid at final		
Balanced	People in this category, set as the mortgage debt should be repaid take some risk as they have acces repay part or all of the mortgage	at redemption howers to other funds that	ever, they are willing to which could be used t		
Speculative	People in this category are uncormortgage and do not set as their repaid at redemption due to the identified to to be available to re	main priority the wis existence of other as	sh to have the mortgage full sets that they have		
Client Prioriti	es:				
	each of the points below and h feature is to you with 1 bei	_	•		ms of how
To fix your mortg	age costs for a certain period of ti	me			
Ability to offset sa	avings or current account against	the mortgage			
Ability to add fee	s to the loan where possible				
Free valuation, le	gal fess and, cashback				
Speed of mortgag	ge processing				
Ability to make ca	apital repayments with no early re	edemption charges			
	ation, booking or arrangement fee				
	ount payable over a certain numbe	•			
A discount on yo	ur mortgage repayments in the ea	rly years			
Please use the s	pace provided to detail the reas :hoices	ons			

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Section 11: Security Property Details

Address of the property to be mortgaged							
Postcode							
Property Type Detached Semi-Detached Mid-Terraced End-Terraced HMO House House House Converted Purpose-Built Maisonette Bungalow Multi-Unit Flat Flat Block							
Tenure Freehold Commonhold	Feuhold						
Leasehold How many years re							
Accomodation Bedrooms Receptions WCs Study	BathroomsKitchens	Conservatory Other Room					
If flat/maisonette: How many floors in the block	k? How m	any units in the block?					
On which floor is the proper	ty? Does	it have a lift?					
Service Charge £							
Walls Construction Brick Concrete Other							
Roof Construction Tile Slate Th	natched (Other					
Off Road Parking Yes No Garage	Yes	No					
More than 1 acre Yes No Annexe	Yes	No					
Ex-Local Authority Yes No New-Build	Yes	No					
Above or Adjacent to a commercial premise Yes	s No						
If yes what type of commercial unit?							
Approximate Year of Build							
Please provide details of any other occupiers over the age of 17 not on this application							
Name	Age	Relation					
Name	Age	Relation					
Name	Age	Relation					
Name	Age	Relation					
Access for Valuation Details							
Name		Telephone					
Estate Agent Details							
Company Name & Address							
Postcode							
Telephone Email							

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Section 12: Key General Protection Information

Please provide details of all non-investment plans and policies currently in place i.e. Life assurance (level/decreasing), Critical Illness, Health, Mortgage Payment Protection, Buildings & Contents and other...

If 'none' please tick here

Type of Plan	Plan Provider	Person(s) Assured (if applicable)	Sum Insured	Monthly Premium	Term of Plan (Years)	Reason for Plan
			£	£		
			£	£		
			£	£		
			£	£		
			£	£		
			£	£		
			£	£		
			£	£		
			£	£		
			£	£		
			£	£		
			£	£		
			£	£		

For Office Use:

Calculate total amount of cover and any shortfalls against the mortgage

Total Sum Covered £

Shortfall Against Mortgage £

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Additional Information

Please use the space below to detail any additional information relating to sections 8-12 of this form, or any information that we have not made space for that you feel we should be aware of

Section Number	mber Information					
<u>Review</u>						
	f regularly reviewing your mortgage and associated business was discussed and that in ould entail being able to contact you periodically to discuss this further:					
I provide my express consent for <i>impact sf</i> to contact me regarding my mortgage arrangements						
I do not provide my express consent for <i>impact sf</i> to contact me regarding my mortgage arrangements						
<u>Marketing</u>						
<i>impact sf</i> may wish to contact you periodically to let you know about products or services that may be of interest to you.						
By ticking the box/s below you provide your express consent for impact sf to contact you with marketing material via the relevant channel/s.						
Post/Letter (Email Telephone Text/SMS					
Other Service	<u>es</u>					
Have you made a W	Yes No Can we arrange for someone to contact you? Yes No					
Have you appointed	I a solicitor? Yes No impact sf has an appointed firm of solicitors Yes No who specialise in mortgage conveyancing and whose fees are competitive. Would you like us to obtain a quote without fee or obligation?					

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Declarations

Client's Declarations

impact specialist finance is authorised and regulated by the Financial Conduct Authority reference number 810314.
 impact specialist finance and impact packaging are part of the impact money group limited.
 impact money group Limited is registered in England No. 11056208. impact specialist finance is registered in England No. 02661757. Registered Address: Littlehaven House, 24-26 Littlehaven Lane, Horsham RH12 4HT.

YOUR HOME MAY BE REPOSSESED IF YOU DO NOT KEEP UP REPAYMENTS ON YOUR MORTGAGE

I/We* understand that in the case of joint applications and those involving guarantors that an 'association' will be created at the Credit Reference Agencies, which will link our financial records if/when a credit search is performed.

I/We* confirm:

Date:

- (a) receipt of impact sf's 'Client Agreement and Terms of Business' document, and
- (b) that the details given in this form (including all details in the credit history section) are correct to the best of my knowledge.

I/We* understand that impact sf can only advise me/us* based on the information that I/We* have disclosed.

Print Name:	Print Name:
Signature:	Signature:
Date:	Date:

Adviser's Details and Declarations

I confirm that the information above has been received from the client(s).

I confirm that I have provided a copy of our; 'Client Agreement and Terms of Business' document which outlines the cost and level of service provided by *impact sf* to the client(s)

Print Name:			
Signature:			

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