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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 YOU 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.

Section 1: Your Personal Details

Applicant 1

Applicant 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 dependants? ☐ Yes ☐ No ☐ Yes ☐ No

If yes, please provide details below:

| | | | |
|------|--|---------------|--|
| Name | | Date of Birth | |
| Name | | Date of Birth | |
| Name | | Date of Birth | |
| Name | | Date of Birth | |
| Name | | Date of Birth | |

| | | |
|--------------------------------|---|---|
| Current Residential Address | | |
| Postcode | | |
| Residential Status | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Living with family/friends | <input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Living with family/friends |
| Time at this Address | Years Months | Years Months |
| Are you on the electoral roll? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If you have been at your current address for less than 3 years please provide your previous residential address below:

| | | |
|------------------------------|--------------|--------------|
| Previous Residential Address | | |
| Postcode | | |
| Time at the address | Years Months | Years Months |

Section 2: Your Employment & Income Details

| | Applicant 1 | Applicant 2 |
|-------------------------|--|--|
| Job Title/Occupation | | |
| Expected Retirement Age | | |
| Status | <input type="checkbox"/> Permanent <input type="checkbox"/> Contract <input type="checkbox"/> Temp <input type="checkbox"/> Other | <input type="checkbox"/> Permanent <input type="checkbox"/> Contract <input type="checkbox"/> Temp <input type="checkbox"/> 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 current employment for less than 12 months please provide the details of your previous employment

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 | | |

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:

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>Applicant 1</u> | | <u>Applicant 2</u> | |
|---|------------------------------|-----------------------------|------------------------------|-----------------------------|
| Mortgage or secured loan arrears? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Had a loan or mortgage refused? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Default(s) registered against you? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| CCJ(s) registered against you? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Been declared Bankrupt? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Entered into an IVA? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Entered into a Debt Management Plan? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Entered into an arrangement to pay with a creditor? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

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

Section 4: Assets

Assets

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

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 mortgage? 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.

| | Existing | Proposed | Differences |
|-------------------------------------|----------|----------|-------------|
| Net Monthly Income | | | |
| <u>Committed Expenditure</u> | | | |
| Mortgage/Rent/Board | | | |
| Other/Second Mortgage(s) | | | |
| Second Charge(s) | | | |
| Unsecured Borrowing | | | |
| Maintenance | | | |
| Other Expenditure | | | |
| Sub-Total | | | |
| <u>Living Expenses</u> | | | |
| 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 | | | |

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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

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 |
|----------------|-------------|
| | |

Section 8: Existing Mortgage Details (if applicable)

Please choose the option(s) that best describe your current situation from the list available below

- ☐ First Time Buyer
- ☐ Homemover
- ☐ Remortgage
- ☐ Let to Buy
- ☐ First Time Landlord
- ☐ Small portfolio landlord
- ☐ Professional Landlord (4+properties)

| | Applicant 1 | Applicant 2 |
|--|--|--|
| Joint with Applicant | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
| Current Lender | | |
| Account Number | | |
| Outstanding Balance | £ | £ |
| Monthly Payment | £ | £ |
| Remaining Term | Years | Years |
| Repayment Type | | |
| Current Interest Rate | % | % |
| Interest Rate Type | <div><input type="checkbox"/> Variable</div> <div><input type="checkbox"/> Discounted</div> <div><input type="checkbox"/> Fixed</div> <div><input type="checkbox"/> Capped</div> | <div><input type="checkbox"/> Variable</div> <div><input type="checkbox"/> Discounted</div> <div><input type="checkbox"/> Fixed</div> <div><input type="checkbox"/> Capped</div> |
| Initial Rate End Date (if applicable) | | |
| Early Redemption Penalty | £ | £ |
| (if applicable) | | |
| Are you prepared to pay this penalty if required? | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> |
| Are your current mortgage terms portable to a new property? | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> |
| Have you approached your current lender for the mortgage funds? | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> |
| What was the outcome (if applicable) | | |
| Have you had any second charges or further advances (existing or otherwise) | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> |
| Are you selling your property? | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> |
| If yes what is the sale price? | £ | £ |

Section 9: New Mortgage Details

What type of loan are you looking to apply for?

- ☐ Purchase ☐ Remortgage ☐ Secured Loan
☐ Further Advance ☐ Product Transfer

What type of mortgage are you looking to apply for?

- ☐ Residential Mortgage ☐ BTL Mortgage ☐ Commercial Mortgage ☐ Bridging Finance

Repayment Method

- ☐ Capital & Interest ☐ Interest Only ☐ Part & Part

C&I £
I/O £

How much do you wish to borrow? £

Over how long do you wish to borrow? Years 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?

- ☐ £ for £ remortgage ☐ Debt consolidation ☐ Capital Raising ☐ Transfer of Equity ☐ Other

If debt consolidation, capital raising or other please provide details

If this is a Residential Mortgage application:

Please choose one: ☐ Standard ☐ Right To Buy Mortgage ☐ Shared Ownership Mortgage ☐ Help to Buy Mortgage

If Right to Buy:

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 rent? £

If Help to Buy:

How much are you receiving via the scheme? £

If this is a Buy to Let Mortgage application:

Existing/Expected Gross Monthly Rental Income £

Will the property be let to a family member? ☐ Yes ☐ No

Did you inherit the property? ☐ Yes ☐ No

Have you or your immediate family ever/intend to occupy the property? ☐ Yes ☐ No

Section 10: Mortgage Product Details

What type of rate would you ideally be looking for?

- ☐ Variable ☐ Tracker ☐ Discounted ☐ Fixed ☐ Don't Know

We will explain the features and differences between the rate types and why this is important

Please details the reason(s) for the rate type you have chosen

How would you cope if your mortgages payments increased?

Do you want the certainty of the mortgage being repaid at the end of the term?

- ☐ Yes (Cautious) - Capital & Interest ☐ No (Adventurous) - Interest Only

Attitude to Risk:

Please choose at least one of the options below that best describes your own attitude to risk in respect of this mortgage:

| Level of Risk | Description | Applicant 1 | Applicant 2 |
|--------------------|--|--------------------------|--------------------------|
| Cautious | People in this category, set as their main priority the guaranteed repayment of their loan and are unwilling to risk not having the full amount repaid at final redemption or they do not have access to other funds that could be utilised at redemption. | <input type="checkbox"/> | <input type="checkbox"/> |
| Balanced | People in this category, set as their main priority a strong wish that their mortgage debt should be repaid at redemption however, they are willing to take some risk as they have access to other funds that which could be used to repay part or all of the mortgage at sometime in the future. | <input type="checkbox"/> | <input type="checkbox"/> |
| Speculative | People in this category are unconcerned about repayment of their mortgage and do not set as their main priority the wish to have the mortgage full repaid at redemption due to the existence of other assets that they have identified to be available to repay all or part of the loan at redemption. | <input type="checkbox"/> | <input type="checkbox"/> |

Client Priorities:

Please review each of the points below and assign the main 4 options a number from 1 to 4 in terms of how important each feature is to you with 1 being most important and 4 least important:

- To fix your mortgage costs for a certain period of time ☐
- Ability to offset savings or current account against the mortgage ☐
- Ability to add fees to the loan where possible ☐
- Free valuation, legal fees and, cashback ☐
- Speed of mortgage processing ☐
- Ability to make capital repayments with no early redemption charges ☐
- No lender application, booking or arrangement fees ☐
- Lowest total amount payable over a certain number of years ☐
- A discount on your mortgage repayments in the early years ☐

Please use the space provided to detail the reasons for your above choices

Section 11: Security Property Details

Address of the property to be mortgaged

Postcode

Property Type ☐ Detached House ☐ Semi-Detached House ☐ Mid-Terraced House ☐ End-Terraced House ☐ HMO ☐ Converted Flat ☐ Purpose-Built Flat ☐ Maisonette ☐ Bungalow ☐ Multi-Unit Block

Tenure ☐ Freehold ☐ Commonhold ☐ Feuhold ☐ Leasehold How many years remaining on the lease? _____ Years

Accommodation ☐ Bedrooms ☐ Receptions ☐ Bathrooms ☐ Conservatory ☐ WCs ☐ Study ☐ Kitchens ☐ Other Room

If flat/maisonette: ☐ How many floors in the block? ☐ How many units in the block? ☐ On which floor is the property? ☐ Does it have a lift?

Service Charge £

Walls Construction ☐ Brick ☐ Concrete ☐ Other

Roof Construction ☐ Tile ☐ Slate ☐ Thatched ☐ 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 ☐ 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

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 |
|--------------|---------------|--------------------------------------|-------------|-----------------|-------------------------|-----------------|
| | | | £ | £ | | |
| | | | £ | £ | | |
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| | | | £ | £ | | |
| | | | £ | £ | | |
| | | | £ | £ | | |

For Office Use:
Calculate total amount of cover and any shortfalls against the mortgage

| | | | |
|--------------------------|---|-----------------------------------|---|
| Total Sum Covered | £ | Shortfall Against Mortgage | £ |
|--------------------------|---|-----------------------------------|---|

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 | Information |
|----------------|-------------|
| | |

Review

The importance of regularly reviewing your mortgage and associated business was discussed and that in order to do this would entail being able to contact you periodically to discuss this further:

- ☐ I provide my express consent for **impact sf** to contact me regarding my mortgage arrangements
- ☐ I do not provide my express consent for **impact sf** to contact me regarding my mortgage arrangements

Marketing

impact sf 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 Services

- Have you made a Will?

☐ Yes ☐ No

Can we arrange for someone to contact you?

☐ Yes ☐ No
- Have you appointed a solicitor?

☐ Yes ☐ No

impact sf has an appointed firm of solicitors who specialise in mortgage conveyancing and whose fees are competitive. Would you like us to obtain a quote without fee or obligation?

☐ Yes ☐ No

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. 04582045. **impact packaging** is registered in England No. 02661757. Registered Address: Littlehaven House, 24-26 Littlehaven Lane, Horsham RH12 4HT.

YOUR HOME MAY BE REPOSSESSED 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:

(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:

Signature:

Date:

Print Name:

Signature:

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:

Date: