

MORTGAGE APPLICATION FORM

FOR A PROFESSIONAL OR FLEXIBLE MORTGAGE

Provided by Scottish Widows Bank

This form can be used to obtain a Decision in Principle,
submit a Full Application or a Transfer of Equity.

This form is to be completed by a mortgage intermediary.
If you are not a mortgage intermediary please contact us on **0345 845 0829**.

MORTGAGE INTERMEDIARY DETAILS

Contact name

Firm name

FCA number

Address

Post Code

Telephone number

Email address

IFA CONFIRMATIONS

You have disclosed the required information to your client(s)

You will issue the Mortgage Illustration produced and answer any questions your clients have about it

You have completed a verification of identity form for your client(s)

If you have discussed this case with a Scottish Widows Bank employee, please tell us their name and any reference provided

SECTION 1 – MORTGAGE ILLUSTRATION

A. MORTGAGE INFORMATION

1. Mortgage purpose:	Purchase	Remortgage/Mortgage free	Transfer of Equity
For a remortgage, is there currently a mortgage on the property?			Yes No
2. Repayment type:	Interest Only	Capital & Interest	
	Part & Part		
Note: If the total borrowing is over 75% LTV the whole mortgage must be on a Capital & Interest basis.			
3. Repayment vehicle(s) for Interest Only borrowing:	Not applicable	Endowment	
	Unit Trust	Investment Bond	
	Pensions	Sale of second home	
	Stocks & Shares (UK)	Stocks & Shares (ISA)	
	OEICS		
4. Estimated value of the property (or purchase price, if lower):	£		
5. Borrowing amount required for the main mortgage:	£		
6. Term:		year(s)	months
7. Valuation required:	Standard Mortgage Valuation	Homebuyers Survey	
	Full Building Survey	Remortgage (free valuation)	
		The free valuation remortgage incentives is not available if there's not currently a mortgage on the property.	

B. APPLICATION INFORMATION

1. Number of applicants:

Professional Mortgage applications – please enter the professional's details as 'Applicant 1'. If there are two professional applicants, enter the professional with the highest salary as 'Applicant 1'.

Flexible Mortgage applications – please enter the applicant with the highest salary as 'Applicant 1'.

For remortgages, do you want to use our remortgage package?

Yes

No

(If there's not currently a mortgage on the property the remortgage package is not available and you must select 'No')

APPLICANT 1

APPLICANT 2 (IF APPLICABLE)

2. Title

Mr

Mrs

Miss

Ms

Mr

Mrs

Miss

Ms

Other

Other

3. First name

4. Middle name(s)

5. Surname

6. Date of birth

(DD MM YYYY)

7. Profession

8. Governing body

(for professional applicants)

C. BUSINESS CHANNEL

Select your business channel:

Firm

Network

Club

D. PRODUCT OPTIONS

Please indicate the interest rate(s) you wish to apply for below. You can view our current rates by visiting our website

www.scottishwidowsbank.co.uk/extranet, or by calling our customer service team on 0345 845 0829. You can combine up to four different rates. If more than one product carries a fee we'll only charge the highest fee. If you have more than one repayment method you must select the rate separately for each.

Rate 1: Amount	£	Repayment method	Rate	%
Rate 2: Amount	£	Repayment method	Rate	%
Rate 3: Amount	£	Repayment method	Rate	%
Rate 4: Amount	£	Repayment method	Rate	%

E. PROCURATION FEE DETAILS

- | | | |
|--|-----|----|
| 1. Have you recommended the mortgage to the applicant(s)? | Yes | No |
| 2. Will you be passing any of your procuration fee on to the applicant(s)? | Yes | No |
| If yes, procuration fee passed on to applicant(s) | £ | |
| 3. Are you charging the applicant(s) a fee? | Yes | No |
| 4. If yes, amount of fee | £ | |

F. MORTGAGE FEES

- | | | |
|--|-----|----|
| 1. Please confirm how the £25 Transfer of Funds fee and any applicable Booking/Arrangement fee will be paid: | | |
| Paid up front | | |
| Rolled up | | |
| 2. Have you agreed the fee structure with the applicant(s)? | Yes | No |

SECTION 2 – DECISION IN PRINCIPLE

G. PERSONAL DETAILS

- | | APPLICANT 1 | | | | APPLICANT 2 (IF APPLICABLE) | | | |
|--|---|---------|--------|----|---|---------|--------|----|
| 1. Has the applicant changed name in the last three years? | | Yes | No | | | Yes | No | |
| If yes, previous name: | | | | | | | | |
| Title | Mr | Mrs | Miss | Ms | Mr | Mrs | Miss | Ms |
| | Other | | | | Other | | | |
| First name | | | | | | | | |
| Middle name(s) | | | | | | | | |
| Surname | | | | | | | | |
| 2. Marital status: | Divorced | | | | Divorced | | | |
| | Married/in a registered civil partnership | | | | Married/in a registered civil partnership | | | |
| | Separated | | | | Separated | | | |
| | Single | | | | Single | | | |
| | Widowed/Widower | | | | Widowed/Widower | | | |
| 3. Gender | Male | Female | | | Male | Female | | |
| 4. Country of Nationality | | | | | | | | |
| <small>(we require certified copies of visas and passports for non-EU nationals)</small> | | | | | | | | |
| 5. Country of birth | | | | | | | | |
| 6. Town of birth | | | | | | | | |
| 7. Any additional nationalities | | | | | | | | |
| 8. Length of time living and working in the UK | | year(s) | months | | | year(s) | months | |

APPLICANT 1

APPLICANT 2 (IF APPLICABLE)

9. Contact details

(Include area dialling code, and country/international dialling code if non UK)

Home telephone number

Mobile telephone number

Work telephone number

Email address

10. Which countries are
you tax resident in?

(List all if more than one. Use additional details section if required)

TIN

By TIN, we mean your Taxpayer Identification Number or similar tax payer reference you hold for countries you are tax resident in. Use the additional details section at the back of this form to provide additional TINs (if you have more than one).

- | | | | | |
|--|---------|--------|---------|--------|
| 11. Time with current main bank | year(s) | months | year(s) | months |
| 12. Is the applicant a first time buyer? | Yes | No | Yes | No |

- | | | |
|--|-----|----|
| 13. Current address – is the second applicant's current address the same as the first applicant? | Yes | No |
|--|-----|----|

Current address

If 'No':

Current address

Postcode

Date moved in (DD MM YYYY)

If less than three years at current address you must complete question 17.

- | | | |
|--|--|--|
| 14. Resident status: | Mortgaged | Mortgaged |
| | Owned outright | Owned outright |
| | Rented | Rented |
| | Living with parents | Living with parents |
| | Living with friends | Living with friends |
| | Tied accommodation | Tied accommodation |
| | Other | Other |
| 15. Existing council tax band | BFPO A B C D | BFPO A B C D |
| | E F G H N. Ireland | E F G H N. Ireland |
| 16. Correspondence address after completion: | Applicant's existing address | Applicant's existing address |
| | Property to be mortgaged address | Property to be mortgaged address |

G. PERSONAL DETAILS (CONTINUED)

17. If the applicant has been at their present address for less than three years please provide previous addresses to cover this period.
For foreign nationals we require a five year address history.

Previous address:

Postcode

18. Date lived at this address (MM YY) From To From To

Use the additional details section at the back of the form to list additional previous addresses as required.

H. CURRENT EMPLOYMENT

	APPLICANT 1	APPLICANT 2 (IF APPLICABLE)
1. Employment type	Employed – full time	Employed – full time
	Employed – part time	Employed – part time
	Employed – contractor	Employed – contractor
	Self employed – sole trader	Self employed – sole trader
	Self employed – partnership	Self employed – partnership
	Individual shareholding of 25% or more	Individual shareholding of 25% or more
	Joint shareholding of 25% or more	Joint shareholding of 25% or more
	Self employed – multiple contracts	Self employed – multiple contracts
	Franchise operator	Franchise operator
	Employed – Ltd Co with salary & dividends	Employed – Ltd Co with salary & dividends
	Employed – LLP with salary & dividends	Employed – LLP with salary & dividends
	Combination of employed and any of the above options	Combination of employed and any of the above options
	Homemaker	Homemaker
	Retired	Retired
	Student	Student
	Unemployed	Unemployed
	Junior	Junior
	Management	Management
	Not asked	Not asked
	Not given	Not given
	Other	Other
	Other Professional	Other Professional
	Qualifying Professional	Qualifying Professional
	Semi-skilled	Semi-skilled

H. CURRENT EMPLOYMENT (CONTINUED)

Senior management
Skilled
Supervisor
Un-skilled
Unemployed

Senior management
Skilled
Supervisor
Un-skilled
Unemployed

I. CURRENT EMPLOYED DETAILS (COMPLETE IF APPLICABLE)

APPLICANT 1

APPLICANT 2 (IF APPLICABLE)

1. Start date (DD MM YYYY)

2. Name of employer

3. How is the applicant employed?

Bank nurse

Bank nurse

Contract

Contract

Non earned income

Non earned income

Permanent (including probation)

Permanent (including probation)

Probationary (non permanent)

Probationary (non permanent)

Temporary

Temporary

For contractors:

What type of contract does the applicant have?

Fixed term

Hourly rate

Fixed term

Hourly rate

If hourly rate, what is the applicant's hourly rate £

£

Length of time remaining on the applicant's contract

How long is the applicant's existing track record of contracts?

year(s)

months

year(s)

months

4. Position

5. Gross annual basic income £

£

Income figures must **exactly** match supporting documentation

6. Gross annual additional guaranteed income from

current employer £

£

Income figures must **exactly** match supporting documentation

7. Other sustainable annual earned income from current employer – please provide three tax year details:

Income figures must **exactly** match supporting documentation

2014/15 £

£

2013/14 £

£

2012/13 £

£

J. CURRENT SELF EMPLOYED DETAILS (COMPLETE IF APPLICABLE)

8. Name of applicant's business/company

9. If the applicant has a shareholding, %
what percentage do they hold? e.g. 33.33%

10. Time since the applicant acquired an interest in the business

year(s) months year(s) months

11. What is the applicant's income for the last three years trading, or future projections if less than a three year history?

The figures input here should be the total income earned from this self employed source and may include: share of profit taken, dividend received and salary received. It should not include profit retained within the business, income drawn from previously retained profits or income derived from investments. We will verify the total self employed income using HMRC SA302s and it is expected the figures here will match those submitted to HMRC exactly.

All income figures must **exactly** match supporting documentation

APPLICANT 1

Net profit/projected income	Applicant's share of profit	Dividend taken from Ltd or LLP	Salary taken from Ltd or LLP	Total self employed income (as on SA302)	Tax Year End
£	£	£	£	£	(last)
£	£	£	£	£	(previous)
£	£	£	£	£	(oldest)

APPLICANT 2

Net profit/projected income	Applicant's share of profit	Dividend taken from Ltd or LLP	Salary taken from Ltd or LLP	Total self employed income (as on SA302)	Tax Year End
£	£	£	£	£	(last)
£	£	£	£	£	(previous)
£	£	£	£	£	(oldest)

K. ADDITIONAL INCOME DETAILS

APPLICANT 1

APPLICANT 2 (IF APPLICABLE)

1. If the applicant has been in their current role for under three years, please provide details of their previous role(s) for this period.

Employment Type:

Employed – full time
Employed – part time
Employed – contractor
Self employed – sole trader
Self employed – partnership
Individual shareholding of 25% or more
Joint shareholding of 25% or more
Self employed – multiple contracts
Franchise operator
Employed – Ltd Co with salary & dividends
Employed – LLP with salary & dividends
Combination of employed and any of the above options

Employed – full time
Employed – part time
Employed – contractor
Self employed – sole trader
Self employed – partnership
Individual shareholding of 25% or more
Joint shareholding of 25% or more
Self employed – multiple contracts
Franchise operator
Employed – Ltd Co with salary & dividends
Employed – LLP with salary & dividends
Combination of employed and any of the above options

K. ADDITIONAL INCOME DETAILS (CONTINUED)

Homemaker

Homemaker

Retired

Retired

Student

Student

Unemployed

Unemployed

2. Name of previous employer/
business/company:

Start/End date (MM YY)

From

To

From

To

Use the additional details sheet at the back of this application form to provide the same details for any other previous roles held within the last three years.

3. Does your client have any
other jobs that are part
of their annual income?

Yes

No

Yes

No

If yes, use the additional details section at the back of this application form to provide the same details for the other job(s) as requested above for current employed or self employed income, as applicable.

4. Will your client be taking up
new employment in the next
six months?

Yes

No

Yes

No

If yes:

End date of current
employment (DD MM YYYY)

End date of any additional
employment (DD MM YYYY)

Start date for future
employment (DD MM YYYY)

Use the additional details section at the back of this application form to provide the same details for the future employment as requested above for current employed or self employed income, as applicable.

5. Does your client have any other
annual income they would like
to be taken into account?

Yes

No

Yes

No

Type of income

Amount

£

£

Income figures must **exactly** match supporting documentation

Use the additional details section at the back of this application form to provide details of any other additional income.

L. CREDIT HISTORY

APPLICANT 1

APPLICANT 2 (IF APPLICABLE)

- | | | | | |
|---|-----|----|-----|----|
| 1. Has the applicant ever been refused a mortgage on the property to be mortgaged, or on any other property? | Yes | No | Yes | No |
| 2. Has the applicant ever had a judgement for debt recorded against them? Or if self-employed/controlling director, against their company? | Yes | No | Yes | No |
| 3. Has the applicant ever been bankrupt or entered into a voluntary arrangement with creditors? | Yes | No | Yes | No |
| 4. If 'yes' please use the additional details section at the back of this application form to provide details including the discharge date. | | | | |
| 5. Has the applicant ever failed to keep up payments under any previous mortgage, rental, loan or credit card agreement? | Yes | No | Yes | No |
| 6. Has the applicant ever been convicted of or charged with any offence other than a motoring offence? | Yes | No | Yes | No |

M. CURRENT FINANCIAL COMMITMENTS (ALL APPLICANTS)

- Total number of children/dependants
- Total number of all credit/ store cards/catalogues and overdraft facilities held
- Total outstanding balances of all credit/store cards/catalogues and overdraft facilities held
- Total monthly repayment figure for all credit/store cards/catalogues and overdraft facilities held
- Total amount of outstanding balances of all credit/store cards/catalogues and overdraft facilities held to be repaid prior to or on completion of the mortgage £
- Please confirm the amount to be repaid from capital raised in this mortgage £
- Are there any other current commitments, excluding secured loans, second charges, or credit commitments? Yes No
Credit commitments (e.g. credit cards, car loans, hire purchase etc) should be detailed in question 19 on the next page.
If yes, other commitment type:
 - Childcare
 - Maintenance
 - Other
 - Rent
 - School/University fees
 - Student Loan
- Other commitment monthly payment £
- Other commitment total borrowed (if applicable) £

M. CURRENT FINANCIAL COMMITMENTS (ALL APPLICANTS) (CONTINUED)

10. Other commitment date commencing (if applicable) (DD/MM/YYYY)

11. Is debt to be redeemed prior to or on completion of this mortgage? Yes No

12. If yes, debt will be repaid from:

Capital raise on this mortgage

Parental gift

Sale proceeds

Savings

Other

13. Please provide details any additional commitments (including future commitments), excluding secured loans or second charges. You **must** complete all fields for every commitment.

Name of provider and purpose of loan	Start Date	To be redeemed prior to or on completion? Please give the date of final payment and how the loan is being repaid.	Monthly Payment
	Amount outstanding		
Name		Yes Repaid from	£
Purpose	£	No	
Name		Yes Repaid from	£
Purpose	£	No	
Name		Yes Repaid from	£
Purpose	£	No	
Name		Yes Repaid from	£
Purpose	£	No	
Name		Yes Repaid from	£
Purpose	£	No	
Name		Yes Repaid from	£
Purpose	£	No	

14. Does the applicant have any future credit commitments? Yes No

If yes, please provide details in the table above. You **must** complete all fields. For the 'amount outstanding' please state the amount of the initial advance.

15. For leasehold properties: Monthly ground rent £

Monthly service charge £

N. MORTGAGE COMMITMENTS (ALL APPLICANTS)

FOR REMORTGAGES:

- | | | |
|--|---------|--------|
| 1. Is there a mortgage on the property to be remortgaged to Scottish Widows Bank? | Yes | No |
| If yes, names on mortgaged property | | |
| Name of lender | | |
| Mortgage account number | | |
| Estimated valuation | £ | |
| Mortgage outstanding | £ | |
| Monthly payment | £ | |
| Term remaining | year(s) | months |
| Interest rate | | % |
| 2. Do any applicants have any additional residential mortgages? | Yes | No |
| 3. Is there a proposed second charge to be registered against the property you're asking Scottish Widows Bank to lend against? | Yes | No |
| If yes, date granted (DD/MM/YYYY) | | |
| 4. Name of company | | |
| 5. Purpose | | |
| 6. Amount | £ | |
| 7. Monthly payment | £ | |
| 8. Is this to be repaid from this mortgage? | Yes | No |

FOR REMORTGAGES (CONTINUED):

- | | | |
|---|-----|----|
| 9. Is any of the borrowing required for home improvements? | Yes | No |
| If yes, purpose | | |
| Amount | £ | |
| 10. Is there any structural work required? | Yes | No |
| If yes, amount required for structural work | | |
| | £ | |
| 11. Is any of the borrowing required for any other reason? | Yes | No |
| If yes, purpose | | |
| Amount | £ | |
| 12. Do any applicants have an existing buy to let mortgage? | Yes | No |

N. MORTGAGE COMMITMENTS (ALL APPLICANTS)

13. Please provide details of any existing mortgages, residential and Buy to Lets

Name(s) on the mortgage, name of the lender, and last four digits of the associated account number (we'll use this as a reference to the commitment in future correspondence)	Estimated Valuation	Mortgage Outstanding	Monthly Payment	Is the property to be sold prior to or on completion		Monthly Rental
Name(s)	£	£	£	Yes	No	£
Lender/Ref						
Name(s)	£	£	£	Yes	No	£
Lender/Ref						
Name(s)	£	£	£	Yes	No	£
Lender/Ref						
Name(s)	£	£	£	Yes	No	£
Lender/Ref						
Name(s)	£	£	£	Yes	No	£
Lender/Ref						
Name(s)	£	£	£	Yes	No	£
Lender/Ref						

O. AFFORDABILITY DATA

APPLICANT 1

- Planned retirement age year(s)
- If necessary and subject to them having sufficient income to do so, would the applicant be willing to extend the term of their mortgage beyond retirement (state retirement age)?

Yes No

Yes No

If yes: Number of income sources in retirement:

Source of retirement income	Amount
	£
	£
	£

Source of retirement income	Amount
	£
	£
	£

- Based on their budget, what is the maximum amount the applicant(s) is willing to commit to their mortgage repayments each month? £

Tick here if the figure is unknown.

If unknown, is the mortgage to be repaid as soon as possible? Yes No

If no, is the longest term available required to keep the monthly payments as low as possible? Yes No

In the following statement the words 'you' and 'your' refer to the applicant(s) and may be taken to mean the plural as well as the singular. The words 'our', 'we' and 'us' refer to Scottish Widows Bank plc.

Who we are

Your information will be held by Scottish Widows Bank which is part of the Lloyds Banking Group. More information on the Group can be found at www.lloydsbankinggroup.com

How we share your information with Group companies

Your personal information will be shared within the Lloyds Banking Group to enable us to better understand your needs, run your accounts, and provide products in the efficient way that you expect.

Using your information for fraud prevention

We will share your personal information from your application with fraud prevention agencies. If false or inaccurate information is provided and fraud is identified, details of this fraud will be passed to these agencies to prevent fraud and money laundering. Further details explaining how information held by the fraud prevention agencies may be used can be obtained by reading the privacy notice at www.scottishwidowsbank.co.uk, or you can request a copy by calling us on 0345 845 0829.

HMRC

In order to confirm the accuracy of the income information you have provided, we may share information about you and your application with HM Revenue and Customs (HMRC). HMRC will help us to validate whether the income information provided to us is accurate. HMRC may also use the information provided to inform its risk profiling activities and to establish any mismatch with declared income.

Undertaking credit searches

We may obtain information about you from credit reference agencies and Group records to check your credit status. The credit reference agency enquiries may be seen by other companies making their own enquiries and may affect your ability to obtain credit elsewhere in the future. We may also use credit scoring.

Undertaking credit searches on a joint applicant

If this is a joint application you are giving us permission to search and record information in respect of you both, and create a link between your financial records at credit reference agencies which will remain until you successfully apply for a notice of disassociation at these agencies.

Checking your identity

We may ask you to provide physical forms of identity verification or search the files of credit reference agencies which will keep a record of our search, whether or not your application proceeds. This is not seen or used by lenders to assess your ability to obtain credit.

How we use your information to contact you about products and services

Lloyds Banking Group companies may use your information to contact you by mail, telephone, email or text message about products and services that may be of interest to you. If you do not wish to receive this information please tick the box below.

Further Information

For further information please contact us on 0345 845 0829.

Your consent to process your information

To understand how the personal information you give us will be used. We strongly advise that you read our Privacy Statement, which you can find at www.scottishwidowsbank.co.uk or you can ask us for a copy. By continuing with this application, you agree to your personal information being used in the ways we describe. Please contact us if you have any questions.

Please confirm the applicant(s) has/have read and understood the privacy statement and agreed to their personal information being used in the ways we describe in our privacy statement and full privacy notice by ticking this box

If the applicant(s) does not/do not wish to receive information about products and services that may be of interest to them please tick this box

If you require a Decision in Principle only, and do not wish to proceed to Full Application, tick here .

Please ensure sections 1 and 2 are fully completed, and return the form to us at:
Scottish Widows Bank plc PO Box 12757 67 Morrison Street Edinburgh EH3 8YJ.

SECTION 3 –FULL APPLICATION

APPLICANT 1

APPLICANT 2 (IF APPLICABLE)

1. National Insurance number:

2. Does the applicant require Internet Banking?

Yes

No

Already registered

Yes

No

Already registered

3. If yes, email address

If the application is a professional, please confirm the professional body membership/registration number

4. Employment sector

Please provide security passwords to allow your client(s) to discuss their mortgage after completion. If you don't provide these now your client(s) can provide them at any time in the future.

5. First primary school

6. Mother's maiden name

7. Customer code word

Your client(s) should always take reasonable steps to keep their passwords and other security information secret at all times. This is essential to help prevent fraud and protect the accounts. Your client should take care when storing or disposing of information about the accounts and take simple steps such as shredding printed material. It is essential that your client tell us as soon as possible if they suspect or discover someone else knows their security information – they should call our customer service team on **0345 845 8555**.

Q. ADDITIONAL EMPLOYMENT DETAILS

APPLICANT 1

APPLICANT 2 (IF APPLICABLE)

Address of current employer:

Postcode

Payroll reference or employee number:

Contact name for salary reference:

Telephone number for salary reference:

Email address for salary reference:

Fax number for salary reference

For self employed applicants:

Accountant's contact details
(or practice principle if applicable)

R. BANK ACCOUNT DETAILS

APPLICANT 1

APPLICANT 2 (IF APPLICABLE)

Name(s) on bank account:

Sort Code

Account number

Roll number

Name of bank/building society

S. ADDITIONAL MORTGAGE LOAN DETAILS

Agreed purchase price

£

Source of deposit

Offset required?

Yes

No

If yes, which offset benefit would your client like?

Reduced term

Reduced monthly payment

If you've requested more than one interest rate for the mortgage, please state the rate you'd like to offset against

%

T. PROPERTY TO BE MORTGAGED

1. Full postal address

Postcode

Type of property

2. First occupancy?

Yes

No

3. Construction

Walls

Roof

(i.e. brick, stone, tile etc.)

4. Age of property

year(s)

If less than 10 years, does the property have a valid NHBC, Architect or Zurich certificate?

Yes

No

5. Number of

Bedrooms

Kitchens

Bathrooms

Garages

Living/reception rooms

WCs

Other

T. PROPERTY TO BE MORTGAGED (CONTINUED)

6. Tenure	Leasehold	Ownership	Freehold	Commonhold
7. Will the property be the main residence?			Yes	No
If no, purpose				
8. Does the applicant intend to conduct any business in the property or outbuildings?			Yes	No
If yes, type of activity				
9. Is the property currently, or has it previously been owned by Local Authority, Housing Association or the Ministry of Defence?			Yes	No
10. Is your client receiving any financial incentive in connection with this purchase? (e.g. discount on purchase price, cash back, or builders incentive)			Yes	No
If yes, brief description				
11. Is the property a listed building?			Yes	No
12. Has the property ever been damaged by subsidence, heave, landslip or flood?			Yes	No
If yes, brief description				
13. Are any home improvements to be completed?			Yes	No
If yes, will these be structural?				
14. If there is any additional information about the property we should be made aware of, please provide details				
15. How many additional occupants over age 17 are not party to the mortgage?				
If any, please supply full name, date of birth and relationship.				

Solicitor Information

16. Name of acting solicitor

Firm Name

Note: solicitor must be on the approved solicitor panel for Lloyds Banking Group

Number of partners in the firm

Solicitor's address

Postcode

Dx address

LP address

Telephone number

Fax number

E-mail address

Completion date (if set)

T. PROPERTY TO BE MORTGAGED (CONTINUED)

Valuation Details

17. Do you wish Scottish Widows Bank to instruct your valuation? Yes No

If yes, select the type of valuation required:

Standard Mortgage Valuation

Homebuyers Survey

Full Building Survey

Valuation fee details

Valuer contact:

Applicant

Estate Agent

Vendor

Other

Contact name

Telephone number

Is there any additional information about the property you'd like to advise us of?

U. DIRECT DEBIT

MORTGAGE ACCOUNT

Please confirm the bank account to be used for the mortgage payments:

Name(s) on bank account

Sort code

Account number

Roll number

Name of bank/building society

OFFSET SAVER ACCOUNT

Please confirm the bank account details for the account that will be linked to the Offset Saver Account:

Name(s) on bank account

Sort code

Account number

Roll number

Name of bank/building society

Please confirm your client will pay Scottish Widows Bank plc, Direct Debits from the account detailed on this instruction subject to the safeguards by The Direct Debit Guarantee .

Please confirm your client understands that this instruction may remain with Scottish Widows Bank plc and, if so, details will be passed electronically to the client's bank/building society .

ADDITIONAL DETAILS:

This box has been provided for you to provide any further information for any of the sections.

[illegible]

HOME INSURANCE

In all cases Buildings Insurance must be maintained under a Householder's Building Policy for a sum not less than that specified by the valuer. The sum insured should be based upon an estimate of current rebuilding costs and increase in line with the House Rebuilding Cost Index; the sum insured must continue to be an accurate reflection of the cost of rebuilding the home.

LIFE COVER

Scottish Widows Bank strongly recommends that life cover sufficient to repay the total borrowing is in place prior to drawdown. In common with other lenders we do not currently require evidence that this has been arranged. However, we strongly recommend that any policies taken out are monitored on a regular basis. We will remind annually of this throughout the term of the mortgage.

MORTGAGE PAYMENT PROTECTION

It is strongly recommended that arrangements for the protection of this mortgage in the event of accident, sickness and involuntary unemployment are put in place.

W. CONTRACTS (RIGHTS OF THIRD PARTIES) ACT 1999

This contract is between the applicant(s) and Scottish Widows Bank plc. The terms of the Contracts (Rights of Third Parties) Act 1999 and any other legal third party rights are specifically excluded. This means that only the parties to the contract (or their legal successor(s), assignee(s) or other security holders) may have contractual rights.

I declare and agree that:

1. I am 18 years of age or over.
 2. I confirm that I have consent for this agreement from any joint applicant who is not present, and I will share with them the details of what I have agreed on their behalf.
 3. I authorise you to disclose information relating to my mortgage, both during and after completion to the Mortgage Intermediary named in my application.
 4. The rate of interest and monthly payment for any mortgage granted may be varied from time to time.
 5. I will not let the property without your prior consent in writing.
 6. I will not enter into any further charge(s) over the property prior to or after completion of the mortgage without advising you and obtaining your consent in writing.
 7. I fully appreciate that you will arrange for a Surveyor to provide a Mortgage Valuation Report and that this Report is to assist you to determine whether a mortgage advance will be made. The Report is not a structural report (for which higher fees are charged by the Surveyor appointed). There may be omissions and the Report may not reveal faults in the property which do not matter to you for the purposes of lending but could matter to me in my choice of property and my decision as to how much I pay for the property. I acknowledge that I will not rely on this Report in my decision to buy the property or how much I pay for the property. I also acknowledge and accept that you do not accept any responsibility to me for the contents of the Report even if the Surveyor has been at fault.

I also acknowledge to have received the recommendation that I obtain my own detailed Report on the condition and value of the property.
 8. My income is as stated within my application and is sufficient to support all of the relevant payments required to sustain the mortgage. I understand that failure to maintain the payments due may result in the forced sale of the property in order to pay all monies owing.
 9. I have made all payments due under any existing or previous mortgage to which I have been a party on the date and in the manner required by the Lender and that no arrears have arisen there under.
 10. I acknowledge that, where a reservation/booking fee is paid to secure funds under a limited issue product, the fee paid in this respect is non-refundable and non-portable.
 11. I acknowledge I may have to pay early repayment charges should the mortgage be redeemed within an agreed period from release of funds, as detailed in my Mortgage Illustration, copies of which I have received.
 12. By submitting an application to you, and signing the offer document, this constitutes an irrevocable authority to my solicitor/licensed conveyancer, Mortgage Intermediary, and existing/previous lender, employer, landlord, accountant and banker to divulge to you information (both during and after completion of the mortgage) which would otherwise be confidential insofar as any such information may have a bearing on your decision to lend including, but not limited to my ability to meet my financial commitments.
 13. I understand that it is my responsibility to ensure that sufficient life cover and/or a sufficient savings plan for interest only borrowing is in place throughout the term of my mortgage.
 14. I understand that if there is a significant change in my circumstances before the loan is made I must disclose it and Scottish Widows Bank may refuse to proceed.
 15. I have personally provided the details for my application or, if provided by another (for example my Mortgage Intermediary), I have read and checked every answer.
 16. The information given in my application is true to the best of my knowledge and belief and should the mortgage be made such information must be regarded as forming part of the terms of the mortgage. If any such information is incorrect I will make good any loss which you may suffer by acting in reliance on such information.
 17. I understand that a false declaration will forfeit any mortgage offer.
- If I am choosing the Offset Saver Account:**
18. I, the person whose signature appears on the mortgage offer, declare that monies are being/will be deposited in a Scottish Widows Bank Offset Saver Account as sole beneficial owner/as joint beneficial owners. (For joint account holders only.) As joint account holders, I hereby authorise the bank to accept and act on either written or verbal instructions requesting account withdrawals/ deposits given by any one of us. Scottish Widows Bank can only accept instructions to collect funds from a pre-advised account I am party to. Account withdrawals should be sent direct to my bank/ building society as stated within my application.
 19. I acknowledge that no payments or deposits in favour of third parties will be made.
 20. The Terms and Conditions of the offsetting facility are available in the brochure "A guide to offsetting" which can be found on the Scottish Widows Bank website. I will read this information and if I do not understand any point I will ask for further information.
- Full details and written quotations are available from
**Scottish Widows Bank plc PO Box 12757 67 Morrison Street
Edinburgh EH3 8YJ.**

Y. DECLARATION OF CONSENT

In the following statement the words “you” and “your” refers to the applicant(s) and may be taken to mean the plural as well as the singular. The words “our”, “we” and “us” refer to Scottish Widows Bank.

This declaration is our standard client agreement upon which we intend to rely. For your own benefit and protection you should read the terms of the account carefully and by progressing an application with us will indicate your acceptance of the terms in this agreement. When you receive your mortgage offer and are asked to sign and return that document, you will also be signing to confirm having read this mortgage declaration. If you do not understand any point please ask us for further information.

I have read and understood the information contained in this application form (including credit reference and fraud agencies). By signing this application I agree that you can use my information in this way.

Signature of Applicant 1

Date (DD MM YYYY)

Signature of Applicant 2 (if applicable)

Date (DD MM YYYY)

DIRECT DEBIT INSTRUCTION

HOW TO COMPLETE YOUR NEW DIRECT DEBIT

Using your cheque book as a guide please complete:

1. The full name and address of the bank or building society where your account is held.
2. The name of the account holder as shown on your cheques.
3. The branch sort code number.
4. The account number.

Finally, sign and date the instruction and return it to
Scottish Widows Bank PO Box 12757 67 Morrison Street
Edinburgh EH3 8YJ

1. Bank/Building Society Name and Address		3. Bank/Building Society Sort Code	
ABC BANK LTD 17 MAIN ST YOUR TOWN		20-83-45	
Pay _____		£ _____	
_____		JOHN SMITH	
277860	208345	0052678	
Cheque Number	3. Bank/Building Society Sort Code	4. Account Number	2. Name of Account to be debited

THE DIRECT DEBIT GUARANTEE

- This Guarantee is offered by all banks and building societies that accept Instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit Scottish Widows Bank will notify you 10 working days* in advance of your account being debited or as otherwise agreed. If you request Scottish Widows Bank to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by Scottish Widows Bank or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when Scottish Widows Bank asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.



*If you wish to change the amount to be paid or the payment dates, we require only 3 working days' notice to arrange the transfer.
This Guarantee should be detached and retained by the Payer.



INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY TO PAY BY DIRECT DEBIT

Please fill in the whole form and send it to:

Scottish Widows Bank, PO Box 12757, 67 Morrison Street, Edinburgh EH3 8YJ.

1. Name and full postal address of your Bank or Building Society branch.

To the Manager

Bank/Building Society

Address

Postcode

2. Name of account holder(s)

3. Branch Sort Code

4. Bank or Building Society account number

5. Scottish Widows Bank account number

Originator's Identification Number

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INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY

Please pay Scottish Widows Bank, Direct Debits from the account detailed on this instruction subject to the safeguards assured by The Direct Debit Guarantee.

I understand that this instruction may remain with Scottish Widows Bank and, if so, details will be passed electronically to my bank/building society.

Signature(s)

Date

(DD MM YYYY)

(for Bank use only)

Banks and building societies may not accept Direct Debit instructions from some types of account.

SCOTTISH WIDOWS BANK

**YOUR CLIENT'S HOME MAY BE REPOSSESSED IF THEY
DO NOT KEEP UP REPAYMENTS ON THEIR MORTGAGE.**

SEND YOUR COMPLETED APPLICATION FORM TO:

Scottish Widows Bank plc PO Box 12757 67 Morrison Street Edinburgh EH3 8YJ

If you have any questions about your application, please call our intermediary support team on 0345 845 0110.

Lines are open 8am to 6pm Monday to Friday (Wednesday from 10am).

Scottish Widows Bank plc. Registered Office: PO Box 12757, 67 Morrison Street, Edinburgh EH3 8YJ. Registered in Scotland no. 154554.

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority under registration number 201601.

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