

BROKER DIP FORM

Date: _____

Introducer: _____

FCA number: _____

Under the terms of the European Mortgage Credit Directive:

- 1. Are CLIENTS tax payers in the UK only? YES/NO**
- 2. Is income all in pound sterling? YES/NO (we cannot use foreign income)**

Personal Details	Applicant 1	Applicant 2
Full Name		
Address		
Date of Birth		

Client Credit History		
Ever had a mortgage application declined?	Y / N	Y / N
Mortgage or Loan Arrears in last 12 months?	Y / N	Y / N
Defaults	Y / N More than £500 Y / N	Y / N More than £500 Y / N
CCJ's	Y / N Satisfied Y / N More than £500 Y / N	Y / N Satisfied Y / N More than £500 Y / N
Bankruptcy	Y / N Discharged more than 6 years Y / N	Y / N Discharged more than 6 years Y / N
IVA or DMP	Y / N Discharged more than 3 years Y / N	Y / N Discharged more than 3 years Y / N
Additional information		

Employment		
	Employed / Self-Employed / Not Employed	Employed / Self-Employed / Not Employed
Occupation		
Length of service		
Basic Income		
O/T / Bonus / Commission		
Any other income		

Commitments					
Loan/School fees/ c.card/ maintenance	In name of	Lender	Balance	Monthly Repayment	End Date

Mortgage requirements			
Loan Required	£	Term:	Years
Valuation/purchase price	£	LTV:	%
Purpose of loan	Purchase / Remortgage / Further Advance		
Reason for remortgage			
Debt Consolidation YES/NO	Debt Consolidation element £	and % of Loan Applied for	%
Effects on consolidating debt	1. Discussed cost associated with increasing the term	YES/NO	
	2. Turning an Unsecured Loan into a Secured Loan	YES/NO	
	3. Is the consolidation a result of payment problems	YES/NO	
Repayment method (If Interest Only, advise the repayment vehicle)			

Suitability

What duration of any discount/fixed rate preferred	Yrs
If Lending in/into retirement will loan be repaid when reaches age of 85?	Yes / No/ NA
Is there adequate life insurance to cover the loan? (Establish detail in the event of either death particularly when lending to older borrowers and continued affordability, and note below *)	Yes / No

Background/additional information and reason for DIP:

AFFORDABILITY CHECKLIST

	APPLICANT 1	APPLICANT 2
NET MONTHLY INCOME		
Salary		
Other		
TOTAL		
OUTGOINGS (Monthly)		
Essential Household bills		
Council Tax		
Electricity		
Gas		
Water		
Telephone & Internet/SKY etc		
House Insurance		
Car Insurance		
Work travel costs		
Food & Clothing		
Basic Expenditure		
Life Assurance		
Child care		
Leisure/Entertainment		
Mobile Telephone		
School fees		
Committed Expenditure		
Loans/ HP		
Maintenance Payments		
Other Mortgage Payments		
Lease payments		
Credit/Store Cards		
Total Monthly Outgoings		

Declarations

I agree that this information is a true record of my discussions with the clients and that this information is true to the best of my knowledge.

I agree that Beverley Building Society may use this information to satisfy any other regulatory requirements from time to time in force.

Advisor name.....Signature.....Date.....