

## Client Information

TYPE OF ENTITY:	Limited Company <input type="checkbox"/>	Partnership <input type="checkbox"/>	Sole Trader <input type="checkbox"/>	Other <input type="checkbox"/>
IF PARTNERSHIP:	LLP - YES/NO <input type="checkbox"/>	NO. OF PARTNERS	<input type="text"/>	
IF LIMITED COMPANY:	NO. OF DIRECTORS <input type="text"/>	NO. OF 25% SHAREHOLDERS	<input type="text"/>	
DESCRIPTION OF BUSINESS	<input type="text"/>			
BUSINESS LEGAL NAME	<input type="text"/>	TRADING AS	<input type="text"/>	
TRADING ADDRESS	<input type="text"/>			
REGISTERED ADDRESS	IF DIFFERENT THAN THE ABOVE <input type="text"/>			
COMPANY REGISTRATION	<input type="text"/>	BUSINESS START DATE	<input type="text" value="DD"/>	<input type="text" value="MM"/>
TELEPHONE NUMBER	<input type="text"/>			
EMAIL ADDRESS	<input type="text"/>	WEBSITE	<input type="text"/>	

## Applicant 1

FULL NAME	<input type="text"/>	DATE OF BIRTH	<input type="text" value="DD"/>	<input type="text" value="MM"/>	<input type="text" value="YYYY"/>
POSITION IN BUSINESS	<input type="text"/>	% OF OWNERSHIP	<input type="text"/>		
FULL HOME ADDRESS	<input type="text"/>				
	<input type="text"/>	OCCUPANCY START DATE	<input type="text" value="MM"/>	<input type="text" value="YY"/>	
RESIDENTIAL STATUS:	Homeowner <input type="checkbox"/>	Living with Parents <input type="checkbox"/>	Private Renter <input type="checkbox"/>	Council <input type="checkbox"/>	
PREVIOUS ADDRESSES (if lived at current address for less than 3 yrs - please provide 3yr history)	ADDRESS 1 <input type="text"/>				
	<input type="text"/>	OCCUPANCY START DATE	<input type="text" value="MM"/>	<input type="text" value="YY"/>	
	ADDRESS 2 <input type="text"/>				
	<input type="text"/>	OCCUPANCY START DATE	<input type="text" value="MM"/>	<input type="text" value="YY"/>	
TELEPHONE NUMBERS	MOBILE <input type="text"/>	HOME <input type="text"/>	EMAIL ADDRESS	<input type="text"/>	

T 0800 121 7757

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A Tavistock Group Company

Please send your completed application form to [ufg-bridging-mailbox@ultimatefinance.co.uk](mailto:ufg-bridging-mailbox@ultimatefinance.co.uk)

## Applicant 2

FULL NAME	<input type="text"/>	DATE OF BIRTH	<input type="text"/>	<input type="text"/>	<input type="text"/>
POSITION IN BUSINESS	<input type="text"/>	% OF OWNERSHIP	<input type="text"/>		
FULL HOME ADDRESS	<input type="text"/>				
	<input type="text"/>	OCCUPANCY START DATE	<input type="text"/>	<input type="text"/>	
RESIDENTIAL STATUS:	Homeowner <input type="checkbox"/>	Living with Parents <input type="checkbox"/>	Private Renter <input type="checkbox"/>	Council <input type="checkbox"/>	
PREVIOUS ADDRESSES (if lived at current address for less than 3 yrs - please provide 3yr history)	ADDRESS 1 <input type="text"/>				
	<input type="text"/>	OCCUPANCY START DATE	<input type="text"/>	<input type="text"/>	
	ADDRESS 2 <input type="text"/>				
	<input type="text"/>	OCCUPANCY START DATE	<input type="text"/>	<input type="text"/>	
TELEPHONE NUMBERS	MOBILE <input type="text"/>	HOME <input type="text"/>	EMAIL ADDRESS	<input type="text"/>	

## Introducers Details

COMPANY NAME	<input type="text"/>	TELEPHONE NO	<input type="text"/>	PROCUREMENT FEE	<input type="text"/>
CONTACT NAME	<input type="text"/>	EMAIL ADDRESS	<input type="text"/>		

## Solicitors Details

COMPANY NAME	<input type="text"/>	TELEPHONE NO	<input type="text"/>
ACTING SOLICITOR	<input type="text"/>	EMAIL ADDRESS	<input type="text"/>
ADDRESS	<input type="text"/>		
	<input type="text"/>		

## Client Questionnaire

HOW HAS YOUR BUSINESS BEEN IMPACTED BY COVID-19?

ARE THERE ANY PENDING, THREATENED OR RECENTLY FILED CLAIMS AND JUDGEMENTS AGAINST YOU (PERSONALLY OR ON THE BUSINESS)?

DETAILS

PREVIOUS EXPERIENCE IN PROPERTY SECTOR

DETAILS

IS THE BUSINESS UP TO DATE WITH HMRC PAYMENTS (VAT, PAYE, CORPORATION TAX INLAND REVENUE ETC.)

DETAILS

## Loan Details

LOAN AMOUNT  TERM IN MONTHS  REPAYMENT

CHARGE  COMPLETION DATE

PROPERTY VALUE  MORTGAGE OUTSTANDING

ADDRESS

TENURE  PROPERTY TYPE

EXIT ROUTE

## Portfolio Information

NUMBER OF PROPERTIES	<input type="text"/>	ESTIMATED TOTAL VALUE	<input type="text"/>	ESTIMATED VALUE OF CHANGES OUTSTANDING	<input type="text"/>
DETAILS OF PREVIOUS INVESTMENTS	<input type="text"/>				

## Assets & Liabilities Statement

CLIENT NAME	<input type="text"/>
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## Property Portfolio - Applicant 1

ADDRESS 1	<input type="text"/>				
MORTGAGE	<input type="text"/>	VALUE	<input type="text"/>	RENTAL INCOME PCM	<input type="text"/>
ADDRESS 2	<input type="text"/>				
MORTGAGE	<input type="text"/>	VALUE	<input type="text"/>	RENTAL INCOME PCM	<input type="text"/>
ADDRESS 3	<input type="text"/>				
MORTGAGE	<input type="text"/>	VALUE	<input type="text"/>	RENTAL INCOME PCM	<input type="text"/>

## Property Portfolio - Applicant 2

ADDRESS 1	<input type="text"/>				
MORTGAGE	<input type="text"/>	VALUE	<input type="text"/>	RENTAL INCOME PCM	<input type="text"/>
ADDRESS 2	<input type="text"/>				
MORTGAGE	<input type="text"/>	VALUE	<input type="text"/>	RENTAL INCOME PCM	<input type="text"/>
ADDRESS 3	<input type="text"/>				
MORTGAGE	<input type="text"/>	VALUE	<input type="text"/>	RENTAL INCOME PCM	<input type="text"/>

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## Business Ownership and Control Structure

Please provide details of ALL Persons of Significant Control (PSC), even if already named as director within this form and other entities as per your company's PSC Register. For more information, please visit <https://www.gov.uk/government/news/people-with-significant-control-psc-who-controls-your-company>

	PERSON 1	PERSON 2
FULL NAME	<input type="text"/>	<input type="text"/>
PRIVATE ADDRESS	<input type="text"/>	<input type="text"/>
DATE OF BIRTH	<input type="text"/>	<input type="text"/>
SHAREHOLDING %	<input type="text"/>	<input type="text"/>
VOTERS RIGHTS %	<input type="text"/>	<input type="text"/>
APPOINT / REMOVE MAJORITY DIRECTORS	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
SIGNIFICANT INFLUENCE	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
SIGNIFICANT CONTROL	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
DOES THE INFORMATION ABOVE MATCH THE CURRENT PSC REGISTER RECORDED AT COMPANIES HOUSE?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
ARE THESE PEOPLE PERSONALLY KNOWN TO YOU?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

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## Privacy Notice

### Your personal information

We are committed to protecting all the personal information we collect from you, whether through this application form, on our website, in person or over the telephone.

This is a condensed version of how your data and data you supply may be used. Our full Privacy Policy is available on our website here: <https://www.ultimatefinance.co.uk/PrivacyPolicy>

Our Privacy Policy sets out:

- What personal information we may collect from you;
- How we will collect your personal information;
- Why we will use your personal information;
- When we may disclose your personal information to third parties;
- Your rights in relation to the personal information and how you can exercise these;
- The security measures we have in place to protect your personal information; and
- Where you can find further details on how long we will retain your personal information.

It is important that you read the Privacy Policy carefully to understand our practices regarding your personal information and how we will treat it.

**Please tick the box opposite if you do not want to receive these marketing emails from us.**

[You will continue to receive emails if they directly relate to the service we provide to you].

You can always unsubscribe from future emails by clicking on the "Unsubscribe" link in any email you receive or by contacting our marketing department at: [hello@ultimatefinance.co.uk](mailto:hello@ultimatefinance.co.uk).

**Please review the following statements carefully:**

- I confirm that the information contained in this application form is correct.
- If any information contained in this form changes, I will contact you immediately.
- I have read the privacy notice contained in this application form and understand how I may find more about how you will use my data.
- I understand that credit searches may be carried out in relation to me and the other individuals in this form and I confirm I have made them aware searches may be carried out.

**Please tick the box opposite to confirm you have read and understood the above statements.**

YOUR NAME

POSITION WITHIN THE BUSINESS

DATE

**For Broker completion only**

I am a broker completing on behalf of my client with their consent

**Please send your completed application form to [ufg-bridging-mailbox@ultimatefinance.co.uk](mailto:ufg-bridging-mailbox@ultimatefinance.co.uk)**

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