

LOAN APPLICATION FORM

Your Trusted Partner For Finance

0161 333 1981  newbusiness@charlesstreetfinance.com



CHARLES
STREET
FINANCE
EST. 1983

To use the full interactivity of this PDF form, please complete using Adobe Acrobat Reader which is [free to download from Adobe here](#)

1) YOUR DETAILS

If more than 2 applicants please complete another version of the application form with those details only.

	Applicant 1	Applicant 2 (if applicable)
Full name		
Date of birth	(dd/mm/yyyy)	(dd/mm/yyyy)
Contact telephone number		
Email address		
Employment status		
Nationality		
Occupation		
Time in current employment	(months/years)	(months/years)
Your total monthly income after tax & National Insurance		
Please provide 3 years' address history		
Current home address and postcode		
Time at current address	(months/years)	(months/years)
Previous home address		
Time at address	(months/years)	(months/years)
Previous home address		
Time at address	(months/years)	(months/years)

2) COMPANY DETAILS

Only complete this section if the application is being made by a Limited company

Limited Company Name	
☐ SIPP ☐ SSAS ☐ LLP ☐ TRUST	Limited Company Reg. No.
Registered Address	

LOAN APPLICATION FORM

Your Trusted Partner For Finance

0161 333 1981  newbusiness@charlesstreetfinance.com

3) LOAN DETAILS

How much do you want to borrow?	Over how long?		months
Serviceability of loan	☐ Serviced ☐ Roll Up ☐ Retained		
Do you want an interest-only mortgage?	☐ Yes ☐ No	Anticipated completion date	
Loan purpose			
Have you had a loan with us before?	☐ Yes ☐ No		
Please confirm the source of your deposit			
Is more than 40% of the security occupied by yourself or a member of your immediate family?	☐ Yes ☐ No	Will more than 50% of this loan be used for a business purpose?	☐ Yes ☐ No
For interest-only mortgages:			
How do you plan on repaying the original sum borrowed when the loan ends?			

4) PROPERTY BEING USED TO SECURE THIS LOAN

Address and postcode			
What type of property is it?			
What will the security be used as/for?			
If the security is residential, how many bedrooms?			
Are you using our loan to purchase the security?	☐ Yes ☐ No		
Purchase date, or if a new purchase, date sale agreed			
Purchase price	Estimated current value		
Do you already have a mortgage secured against this property?	☐ Yes ☐ No		
If Yes - Who is the mortgage provider			
Current balance			

LOAN APPLICATION FORM

Your Trusted Partner For Finance

0161 333 1981 newbusiness@charlesstreetfinance.com



5) ADDITIONAL SECURITY DETAILS

If you are providing more than 2 properties as additional security, please provide these details on the property schedule and submit that along with the application form.

	Additional security 1	Additional security 2
Address and postcode		
Type of property		
If residential, how many bedrooms?		
Are you using our loan to purchase the security?	☐ Yes ☐ No	☐ Yes ☐ No
Purchase date, or if a new purchase, date sale agreed		
Purchase price		
Estimated current value		
Do you already have a mortgage secured against this property?	☐ Yes ☐ No	☐ Yes ☐ No
Mortgage provider		
Current balance		

6) YOUR SOLICITOR DETAILS

Solicitor firm name	
Solicitor contact name	
Solicitor telephone number	
Solicitor email address	
Solicitor registered address and postcode	

LOAN APPLICATION FORM

Your Trusted Partner For Finance

☎ 0161 333 1981 ✉ newbusiness@charlesstreetfinance.com



7) AUTHORISATION

IMPORTANT - AUTHORISATION MUST BE COMPLETED

By submitting this form you are confirming and declaring the information contained and supplied is true, accurate, correct and complete to the best of your knowledge and belief.

By submitting this form, you understand that we will use your personal information as set out in our Fair Processing Notice which you can find on our website at: <https://www.charlesstreetfinance.com/fpn/>

We'd like to keep you up to date on our other products and offers that may be of interest to you.

If you do not wish to receive this information, please tick this box ☐

I confirm I have read the [Fair Processing Notice](#) please tick this box to confirm ☐

I confirm I have read the [Tariff of Charges](#) please tick this box to confirm ☐

	Applicant 1	Applicant 2
Signature		
Print name		
Date		

Please complete this form electronically and return via email to:
newbusiness@charlesstreetfinance.com

SUBMIT