

VERSION 0.4  
NOVEMBER 1, 2017



## MORTGAGE AND PROTECTION QUESTIONNAIRE

**NEVILLE GREEN MORTGAGES**

**76a STATION ROAD**

**CLACTON ON SEA**

**ESSEX**

**CO15 1SP**

**TEL: 01255 473046**



Our initial advice is **free** however, Neville Green Mortgages charge **£99.00** on full application and a further **£200.00** on production of your mortgage offer.

Where applicable we also require your debit/credit card details for the lenders valuation fee.

Name on card	
Type of card	
Card Number	
Valid From	
Expiry Date	
Last 3 Digits <small>(signature strip)</small>	

Banking details for each applicant are required on application

<b>Applicant 1:</b>	
Bank Name	
Sort Code	
Account Number	
<b>Applicant 2:</b>	
Bank Name	
Sort Code	
Account Number	

**ALL INFORMATION PROVIDED IS KEPT STRICTLY CONFIDENTIAL AND ONLY USED BY NGM STAFF FOR APPLICATION PURPOSES**



Please be advised we are unable to start your mortgage application until we have **ALL** the relevant documents and correct Questionnaire information. This could have a detrimental effect on the mortgage lenders decision if not accurate or complete.

To proceed can we please have the following original documents to certify:

- 1) Photo ID = Passport or Driving licence
- 2) Address verification = Bank statement or Utility bill showing name and address, no more than 3 months old
- 3) Latest 3 months' payslips and most recent P60 if employed
- 4) Latest 3 months bank statements
- 5) 3 Years SA302 forms and tax summarise if self employed
- 6) Working tax credits information – All Pages
- 7) Proof of deposit = Bank / Building Society statements

**PLEASE NOTE: ALL DOCUMENTS MUST BE ORIGINALS WE CAN NOT EXCEPT PHOTOCOPIES OR SCREEN SHOT DOCUMENTS**

Neville Green Mortgages

76a Station Road

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Essex CO15 1SP

Tel: 01255 473046

E-mail: [enquiries@nevillegreenmortgages.com](mailto:enquiries@nevillegreenmortgages.com)

MORTGAGES – LIFE AND CRITICAL ILLNESS ASSURANCE- BUILDINGS & CONTENTS – LIFE TIME MORTGAGES

**FIRST APPLICANT NAME:**

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**SECOND APPLICANT NAME:**

	Previous Surname		

**D.O.B**

<b>APPLICANT ONE:</b>	<b>APPLICANT TWO:</b>

**CURRENT ADDRESS (3 YEARS HISTORY REQUIRED)**

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**DATE MOVED IN**

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**RESIDENTIAL STATUS – OWNER/TENANT/LIVING WITH FAMILY**

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**PREVIOUS ADDRESS – (PLEASE COMPLETE A FULL 3 YEARS HISTORY AND DATES)**

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**CONTACT DETAILS:**

Home Telephone Number:		
Mobile Number:		
Work Number:		
E-mail Address:		
SKYPE Address:		

**NAME AND D.O.B OF ANY DEPENDENTS:**

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**EMPLOYED WORK DETAILS:**

Occupation:		
Job Title:		
Work Name & Address:		
Start Date:		
Basic Salary:	£	£
Commission:	£	£
Over time or Bonus:	£	£

**SELF EMPLOYED DETAILS:**

Occupation:		
Job Title:		
Owner/Partner (%)		
Start date:		
Company Name & Work Address:		
NET Profit last 3 years:	£ £ £	

**ADDITIONAL INCOME: FAMILY TAX CREDITS, CHILD BENEFIT ETC**

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**ACCOUNTANTS DETAILS:**

Company Name:	
Address:	

**NATIONAL INSURANCE NUMBERS:**

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**MORTGAGE & PURCHASE DETAILS:**

Your Target Mortgage amount:	£
Maximum monthly mortgage budget:	£
Preferred Term:	years
Your deposit amount	£
Source of deposit – Own Savings/ family gift / Equity	
Property Address to purchase: (if applicable)	
Purchase Price:	£
Description: House-Bungalow-Flat. No. of beds (If flat please provide lease details)	
Estate Agent details:	
Solicitors details: (If you do not have a solicitor in place we can arrange a competitive quote for you)	

**REMORTGAGING OR EXISTING MORTGAGES AND BUY-TO-LETS**

	Residential Property	2 <sup>nd</sup> Property Buy to Let	3 <sup>rd</sup> Property Buy to let
Current Lender:			
Balance:	£	£	£
Monthly Payment:	£	£	£
Current Rate:			
Rent Received	////////////////////	£	£
House Value:	£	£	£

**OUTSTANDING CREDIT (FULL DETAILS OF ANY CREDIT/LOAN OR HP YOU CURRENTLY HAVE)**

	Applicant 1	Applicant 2	Joint
Type of Credit and company name (CC-Loan-HP)			
Balance:			
Monthly Payment:			
Term remaining:			
To be repaid with Mortgage loan (Y/N)			

Type of Credit and company name (CC-Loan-HP)			
Balance:			
Monthly Payment:			
Term remaining:			
To be repaid with Mortgage loan (Y/N)			



**ANY CREDIT DIFFICULTIES:**

Please provide us with any information and dates relating to credit difficulties, CCJ's, or defaults you may have.

Applicant 1	Applicant 2

**ANY OTHER RELEVANT INFORMATION OR ADDITIONAL PROPERTY DETAILS**

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**PROTECTION NEEDS**

	Applicant 1	Applicant 2
If you or your partner dies, is it important that you protect against the financial consequences of death?		
If you or your partner were to suffer a critical illness or permanent disability, is it important to repay your mortgage and other loans?		
If you or your partner were unable to work in the long term (2 years+) due to illness or accident, is it important to you to be able to pay your mortgage and other bills?		
If you or your partner were unable to work in the short term (1-2 years) due to illness or accident, is it important to you to be able to pay your mortgage and other bills?		
Do you require Buildings Cover?		
Do you require Contents Cover?		
Notes:		

**HEALTH AND LIFESTYLE**

	Applicant 1	Applicant 2
How would you describe your health? (good-average-poor)		
Have you smoked in the last 12 months?		
Height		
Weight		
Have you been in hospital in the last 3 years?		
Do you take any medication?		
Is there any hereditary issues in your immediate family?		

Did either of your parents have any serious health issues before the age of 65?  If yes, please provide details.		
Have you ever had a protection application loaded or declined?		
Do you participate in any Hazardous pursuits?		
Additional Health Notes:		

**Please return your application to:**

**[enquiries@nevillegreenmortgages.com](mailto:enquiries@nevillegreenmortgages.com)**

**Or by post or in person to**

**Neville Green Mortgages  
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