



Request for Decision in Principle

**This form can be completed electronically, saved and printed.
If completing manually, please complete in black ink and BLOCK CAPITALS. Complete all boxes that apply.**

Why have you chosen the Chorley Building Society: BDM Visit BDM Event Chorley Website Previously Submitted Business
 Existing Chorley Customer Sourcing System/Helpdesk Please state which sourcing system/helpdesk

Date:

House Purchase Remortgage Help to Buy Shared Ownership Right to Buy Right to Acquire DMS JBSP Please see page 7 Power of Attorney Please see page 7

Advisor Name Company Name
 Company FCA Registration No Email Address
 Office Address Telephone No

FCA Status (please tick as appropriate) Directly Authorised Appointed Representative Which Mortgage Network or Club is being used in connection with this application?
 Mortgage Club Name (if applicable)
 Mortgage Network (if applicable) Network FCA Registration Number (if applicable)
 Packager (if applicable) Packager FCA Registration Number (if applicable)

Which level of service have you provided in accordance with the Mortgage Conduct of Business rules? Advised Execution-only

If we are paying a procurement fee will any part of this be refunded to the applicant(s)? Yes No

If YES, how much will be refunded?

Is the applicant(s) paying a fee to you for arranging the mortgage? Yes No

If YES, how much will they pay?

When is the fee payable? On application On offer acceptance On completion

Do you consider there to be any vulnerabilities that the Society should be aware of to enable us to appropriately support your client(s)? Yes No
 (if yes please provide further information in the Additional information Section)

APPLICANT DETAILS - Please ensure you complete the applicant's details in the order they require the account to be created

	Applicant 1	Applicant 2
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="text"/> Other	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="text"/> Other
Surname	<input type="text"/>	<input type="text"/>
First name(s)	<input type="text"/>	<input type="text"/>
Middle name(s)	<input type="text"/>	<input type="text"/>
Previous surname	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Current address	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
Date moved to current address	<input type="text"/>	<input type="text"/>
Current residency status:	<input type="checkbox"/> Homeowner <input type="checkbox"/> Renting <input type="checkbox"/> Living with Parents <input type="checkbox"/> Other please specify	<input type="checkbox"/> Homeowner <input type="checkbox"/> Renting <input type="checkbox"/> Living with Parents <input type="checkbox"/> Other please specify
First time buyer	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No



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Current outgoings (If homeowner)	£ <input style="width: 100%;" type="text"/> £ <input style="width: 100%;" type="text"/> £ <input style="width: 100%;" type="text"/>	Mortgage/rent Mortgage O/S Market value	£ <input style="width: 100%;" type="text"/> £ <input style="width: 100%;" type="text"/> £ <input style="width: 100%;" type="text"/>	Mortgage/rent Mortgage O/S Market value	
Will the current mortgage be repaid in full? If 'No', please add explanation in 'Additional Information' section.		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Nationality		<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
Permanent right to reside? <i>(only applicable if not British)</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Right to live or work in the UK under a Foreign National visa?		<input type="checkbox"/> Yes		<input type="checkbox"/> Yes	
Please confirm type of visa held		<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
Diplomatic immunity? <i>(only applicable if not British)</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you lived in the UK for three or more years?		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If the answer is no, please ring the Underwriting team for advice)</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If the answer is no, please ring the Underwriting team for advice)</i>	
If less than 3 years at current address, please provide previous address:		<input style="width: 100%; height: 80px;" type="text"/>		<input style="width: 100%; height: 80px;" type="text"/>	
Postcode		<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
Date moved in		<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
Date moved out		<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	

We require a minimum of 3 years address history for all applicants - continue in the 'Additional Information' section if necessary.

Do you have dependent children? Yes No

If Yes, please provide details below:

Full Name	Date Of Birth

Please also complete the following for any other proposed occupiers who will NOT be party to the mortgage:

Full Name	Date Of Birth	Dependent
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT DETAILS	Applicant 1	Applicant 2
Employment Status	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
If other, please state here	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
If employed on a contract select type of contract	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Is your current employment permanent?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, please provide full details in the Additional Information Section</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, please provide full details in the Additional Information Section</i>
Occupation	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Expected retirement age	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>



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Gross income from Employment	£ <input type="text"/> Annual	£ <input type="text"/> Annual
Net Income from Employment	£ <input type="text"/> Monthly	£ <input type="text"/> Monthly
Gross Additional Income from Employment	£ <input type="text"/> Annual	£ <input type="text"/> Annual
Frequency of Additional Income from Employment	<input type="text"/>	<input type="text"/>
Did you receive a payment of this additional income in the previous period?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Additional Income from Employment	<input type="text"/>	<input type="text"/>
Other Gross Income	£ <input type="text"/>	£ <input type="text"/>
Frequency of Other Gross income	<input type="text"/>	<input type="text"/>
Type of Other Income	<input type="text"/>	<input type="text"/>
Length of service	<input type="text"/> Years <input type="text"/> Months	<input type="text"/> Years <input type="text"/> Months
Are you in any probationary period? If yes, provide details	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

SELF EMPLOYED DETAILS

Title in company	<input type="text"/>	<input type="text"/>
Company trading name	<input type="text"/>	<input type="text"/>
Nature of business	<input type="text"/>	<input type="text"/>
Expected retirement age	<input type="text"/>	<input type="text"/>
Type of company	<input type="text"/>	<input type="text"/>
How long has the company been trading	<input type="text"/> Years <input type="text"/> Months	<input type="text"/> Years <input type="text"/> Months
% of shareholding:	<input type="text"/> %	<input type="text"/> %
Business Year End	<input type="text"/>	<input type="text"/>
Net profit: (If Sole trader / Partnership) <small>(Please provide information on the previous three years trading. The Society requires a minimum of two years trading supported by SA302s and corresponding tax overviews plus finalised accounts). (Please note if the income to be used in connection with this application includes retained profits/earnings the Society is unable to proceed on this basis).</small>	£ <input type="text"/> Year End <input type="text"/>	£ <input type="text"/> Year End <input type="text"/>
	£ <input type="text"/> Year End <input type="text"/>	£ <input type="text"/> Year End <input type="text"/>
	£ <input type="text"/> Year End <input type="text"/>	£ <input type="text"/> Year End <input type="text"/>
Salary/Dividend/Share of Net Profit (if Limited Company) <small>(Please provide information on the previous three years trading. The Society requires a minimum of two years trading supported by SA302s and corresponding tax overviews plus finalised accounts). (Please note if the income to be used in connection with this application includes retained profits/earnings the Society is unable to proceed on this basis).</small>	Salary <input type="text"/> Dividend <input type="text"/>	Salary <input type="text"/> Dividend <input type="text"/>
	Share of Net Profit (after Corporation Tax) <input type="text"/>	Share of Net Profit (after Corporation Tax) <input type="text"/>
	Year End <input type="text"/>	Year End <input type="text"/>
	Salary <input type="text"/> Dividend <input type="text"/>	Salary <input type="text"/> Dividend <input type="text"/>
	Share of Net Profit (after Corporation Tax) <input type="text"/>	Share of Net Profit (after Corporation Tax) <input type="text"/>
	Year End <input type="text"/>	Year End <input type="text"/>
	Salary <input type="text"/> Dividend <input type="text"/>	Salary <input type="text"/> Dividend <input type="text"/>
	Share of Net Profit (after Corporation Tax) <input type="text"/>	Share of Net Profit (after Corporation Tax) <input type="text"/>
	Year End <input type="text"/>	Year End <input type="text"/>
Do you have an accountant?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are your accounts prepared by someone with one of the following qualifications ACA ACCA FCA FCCA CA (Scottish) CIMA CIPFA	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

CREDIT HISTORY

Mortgages and other secured loans – (where more space is required please provide further details within the additional information section)
* If you have Buy to Let properties please complete next section.

	Lender	Address against which the loan is secured	Account Number	Outstanding Term	Outstanding Balance	Monthly Payment	Mortgage Repayment Type	Interest Rate	To be repaid?
App1 <input type="checkbox"/>									<input type="checkbox"/> Yes <input type="checkbox"/> No
App2 <input type="checkbox"/>									<input type="checkbox"/> Yes <input type="checkbox"/> No
App1 <input type="checkbox"/>									<input type="checkbox"/> Yes <input type="checkbox"/> No
App2 <input type="checkbox"/>									<input type="checkbox"/> Yes <input type="checkbox"/> No
App1 <input type="checkbox"/>									<input type="checkbox"/> Yes <input type="checkbox"/> No
App2 <input type="checkbox"/>									<input type="checkbox"/> Yes <input type="checkbox"/> No

Mortgaged Buy to Let Properties – please provide details below

Where more space is required please provide further details within the additional information section.

	Rental Address	Lender	Current Value	Outstanding Term	Outstanding Balance	Monthly Payment	Monthly Rent Received	Mortgage Repayment Type	Interest Rate	To be repaid?
App1 <input type="checkbox"/>										<input type="checkbox"/> Yes <input type="checkbox"/> No
App2 <input type="checkbox"/>										<input type="checkbox"/> Yes <input type="checkbox"/> No
App1 <input type="checkbox"/>										<input type="checkbox"/> Yes <input type="checkbox"/> No
App2 <input type="checkbox"/>										<input type="checkbox"/> Yes <input type="checkbox"/> No
App1 <input type="checkbox"/>										<input type="checkbox"/> Yes <input type="checkbox"/> No
App2 <input type="checkbox"/>										<input type="checkbox"/> Yes <input type="checkbox"/> No

Other unencumbered properties owned / part owned

Address of unencumbered property

Use of unencumbered property i.e. BTL or Second Home

Guarantor on any mortgages or secured loans – please provide details below

	Lender	Address against which the loan is secured	Scope of your liability under the Guarantee
App1 <input type="checkbox"/>			
App2 <input type="checkbox"/>			
App1 <input type="checkbox"/>			
App2 <input type="checkbox"/>			
App1 <input type="checkbox"/>			
App2 <input type="checkbox"/>			
App1 <input type="checkbox"/>			
App2 <input type="checkbox"/>			

Unsecured loans / credit cards / HP – please provide details below

Lender		Account Number	Outstanding Term	Outstanding Balance	Monthly Payment	To be repaid?	
App1 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App1 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App1 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App1 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App1 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App1 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
App2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

LOAN REQUIREMENTS

Amount required £ Purchase price/current value £ Postcode of Property

Purpose of Loan

Term Years Repayment type:

If Interest only - Repayment Strategy

Type of property

Number of bedrooms

If the property is a flat:

Number of floors in the building

Floor number of the flat

Is the building serviced by a lift? Yes No

Does the building require an EWS1? Yes No

If Yes we will require this to be in date and assessed as either A1 or A2
If No we will require certification that the building is compliant with building regulations 2018 from the building owner or developer

If the property is a new build or built within the last 10 years, name of Warranty provider

Have customers asked to add on fees where allowed? Yes No

Purchase only - please confirm source of deposit

Remortgage only - if originally purchased less than 6 months ago please confirm the reason for the remortgage

Purpose of Additional Funds
– for example debt consolidation, home improvements or capital raising

If the purpose of the loan is to purchase a second home please confirm how this property will be used
– for example a home for dependents, a commuter/weekend home or a holiday home

APPLICANT DECLARATIONS	1st Applicant		2nd Applicant	
Have you had a mortgage in the last 3 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had a mortgage or loan application refused?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had a County Court Judgement for debt or a loan default registered?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been declared bankrupt or been subject to an Individual Voluntary Arrangement (IVA)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever entered into any arrangements with your creditors or are you party to a voluntary arrangement? (please include deferred payments or payment holidays)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you had a court order / decree made against you for debt or is there any such action pending?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever (voluntarily or otherwise) had a property repossessed by a lender or entered any arrangements for mortgage arrears?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you, any member of your family, or any person living with you, ever been cautioned, convicted or charged (but not yet tried) in respect of any criminal offence (excluding motoring convictions)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If the answer is YES to any of the above, please enter full details below.
If further space is needed, please provide details in the additional comments section.

1st/2nd/Joint	Type (i.e. Mortgage, IVA, CCJ)	Relating To	Reason	Date Registered	Amount	Date satisfied / still outstanding

Monthly Income	
Net monthly take home pay (applicant 1)	£
Net monthly take home pay (applicant 2)	£
Any other income	£
Please state source of other income	
Total Monthly Income:	£
Monthly Expenditure	
Mortgage on another property	£
Rent (shared ownership applications)	£
Secured Loans	£
Personal Loans	£
Credit Card Minimum Payments	£
Store Card Minimum Payments	£
Hire Purchase / Lease Agreements	£
Student Loan	£
Home Shopping Credit Minimum Payments	£
Online Shopping Instalment Plan Payments	£
Help to Buy Loan (if applicable)	£
Overdraft Usage Charges / Interest	£
Nursery / Child Minding / School Fees	£
Maintenance / Alimony	£
Cost of Funding Repayment Strategy	£
Mobile Phone Contract	£
Broadband / Home Telephone	£
Council Tax	£
Gas & Electricity	£
Water	£
Other Utilities (ie Calor Gas, Oil)	£
Insurance (Life/Critical Illness)	£
Mortgage Protection / ASU / Inc Protection	£
Home Insurance	£
Ground Rent / Service Charges	£
Car Insurance / MOT / Car Tax / Maintenance	£
Travel Costs inc Fuel, Bus, Rail Fares	£
Other Insurance (Pet/Dental/Health)	£
Total Expenditure:	£
Net Disposable Income:	£

ADDITIONAL INFORMATION (please provide detailed information)

Lasting Power of Attorney Application

What is the relationship of the attorney(s) to the borrower (donor)?

Will the attorney(s) live in the property?

Why was the power of attorney set up?

Joint Borrower Sole Proprietor Mortgages – Additional Information

Applicants	Applicant 1	Applicant 2	Applicant 3	Applicant 4
Name	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
Applicant Status	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
Where Joint Borrower: Relationship to Owner(s)	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

I confirm that I have informed my client(s) about the way the Society processes their personal information, and that consent has been obtained for The Chorley Building Society to carry out a credit search, obtain details of their income and employment, take up references and check their identity as deemed necessary. I also confirm that were a spouse or financial associate has been declared as part of the application the client(s) have been asked to inform the spouse or financial associate that their personal information will also be processed by the Society.

Intermediary signature:

For Chorley Building Society use only

Affordability ID ESIS Number

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