



**DECISION IN PRINCIPLE FORM**

TO PREVENT ANY DELAY IN PROCESSING YOUR REQUEST PLEASE PROVIDE ALL DETAILS REQUESTED IN CAPITALS AND FAX TO: 01702 530 509

INTERMEDIARY FIRM :	CONTACT NAME :
CONTACT NUMBER :	EMAIL ADDRESS :
FSA AUTHORISATION NUMBER :	CCL NUMBER :

Is this application for an FSA regulated loan ? Yes  No

Is this application for buy to let purposes ? Yes  No

Will the funds be utilised for predominantly business purposes ? Yes  No

Specify purpose for requiring funds \_\_\_\_\_

Specify mechanism for the repayment of the bridging finance \_\_\_\_\_

Specify the time the funds are required for \_\_\_\_\_ (Months)

Net Amount (after deduction of all fees) required by the customer £ \_\_\_\_\_

If customer is a limited company or limited liability partnership, specify full name & registration number

\_\_\_\_\_

Customer(s) personal details (If limited company or limited liability partnership, provide shareholder details) :

<u>Customer 1</u>	<u>Customer 2</u>
Full name:	Full name:
Residential address:	Residential address:
Post Code:	Post Code:
Tel No:                      Mob :	Tel No:                      Mob :
Date of Birth:	Date of Birth:
Occupation :	Occupation :
Net Income (after tax) :	Net Income (after tax):
Net Asset Value (of customer) :	Net Asset Value (of customer) :

Property offered as security: Domestic [ ] Commercial [ ] Combined [ ] First charge [ ]

Second charge [ ]

Security address :
Security description :

If the application is for a purchase, purchase price of property: £
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**Outstanding mortgage(s) on security (if applicable)**

Lender \_\_\_\_\_ Estimated value of property £ \_\_\_\_\_

Outstanding Mortgage £ \_\_\_\_\_

Payment up to date? Yes  No  If NO, amount of arrears £ \_\_\_\_\_

**Valuation**

Have you instructed a valuation? Yes  No

**OR**

Do you require Affirmative to instruct a valuation? Yes  No

- If yes, please provide contact name & number to arrange survey \_\_\_\_\_

Additional Property offered as security: Domestic  Commercial  Combined

First Charge  Second Charge

Security address:

Security description:

**Outstanding mortgage(s) on security (if applicable)**

Lender \_\_\_\_\_ Estimated value of property £ \_\_\_\_\_

Outstanding Mortgage £ \_\_\_\_\_

Payment up to date? Yes  No  If NO, amount of arrears £ \_\_\_\_\_

**Payment Options**

Pay monthly by Standing Order Mandate

Retained interest

Number of months to be retained \_\_\_\_\_ (The total loan including retained interest must fit within the LTV)

**Provide any additional information** you believe will assist your customer(s) application, including any documents, e.g. existing valuations, mortgage offers, redemption statements etc.

**Solicitors Details**

Name of Firm \_\_\_\_\_ Name of Solicitor \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_ Tel No \_\_\_\_\_

**TICK IF THE BELOW DOES NOT APPLY**

We hold the customer(s) authority for Savills Lending Solutions Ltd and / or any of it's subsidiaries to conduct a search with a credit reference agency and understand that such a search may be conducted upon receipt of this DIP Form.