

Please note – when filling out this form please use the tab and arrow keys to move between the relevant fields. Ensure you do **not** use the return or enter keys.

Your information

For details of how we and others will use your information please look for the padlock symbol either in the accompanying Terms and Conditions, Consent Form for Credit Checks or contact 01442 877991.

1. Business details

Personal name of Proprietor/Director	<input type="text"/>	
Company number (if applicable)	<input type="text"/>	
Company trading name (if applicable)	<input type="text"/>	
Address line 1	<input type="text"/>	
Address line 2	<input type="text"/>	
Address line 3	<input type="text"/>	
Address line 4 OR overseas country	<input type="text"/>	
Postcode	<input type="text"/>	<input type="text"/>
Contact number	<input type="text"/>	
Fax number	<input type="text"/>	
Date commenced trading	<input type="text"/>	(DD/MM/YYYY)

What are your main business activities?

2. Credit relationships – please complete the details below for all the existing credit relationships

Name of lender/Source of finance	<input type="text"/>		
Type of loan/funding (e.g. HP/leasing)	<input type="text"/>		
Amount outstanding	£ <input type="text"/>	Monthly instalments	£ <input type="text"/>
Credit limit (if applicable)	£ <input type="text"/>	Final repayment year (if applicable)(YYYY)	<input type="text"/>

Name of lender/Source of finance	<input type="text"/>		
Type of loan/funding (e.g. HP/leasing)	<input type="text"/>		
Amount outstanding	£ <input type="text"/>	Monthly instalments	£ <input type="text"/>
Credit limit (if applicable)	£ <input type="text"/>	Final repayment year (if applicable)(YYYY)	<input type="text"/>

Name of lender/Source of finance

Type of loan/funding (e.g. HP/leasing)

Amount outstanding £ Monthly instalments £

Credit limit (if applicable) £ Final repayment year (if applicable)(YYYY)

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Type of loan/funding (e.g. HP/leasing)

Amount outstanding £ Monthly instalments £

Credit limit (if applicable)£ Final repayment year (if applicable)(YYYY)

3. Business/Organisation assets

Description of asset e.g. business premises/quoted shares etc

Owned by

Estimated present market value £

Existing mortgages/prior charges (if applicable) £

Description of asset e.g. business premises/quoted shares etc

Owned by

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Estimated present market value £

Existing mortgages/prior charges (if applicable) £

4. Ownership details – please give details for each person owning 20% or more of issued voting share capital

Name (in full)

Percentage ownership Date of birth (DD/MM/YYYY)

Years in this company/partnership Years in this type of business

Name (in full)	<input type="text"/>		
Percentage ownership	<input type="text"/>	Date of birth (DD/MM/YYYY)	<input type="text"/>
Years in this company/partnership	<input type="text"/>	Years in this type of business	<input type="text"/>

Name (in full)	<input type="text"/>		
Percentage ownership	<input type="text"/>	Date of birth (DD/MM/YYYY)	<input type="text"/>
Years in this company/partnership	<input type="text"/>	Years in this type of business	<input type="text"/>

Name (in full)	<input type="text"/>		
Percentage ownership	<input type="text"/>	Date of birth (DD/MM/YYYY)	<input type="text"/>
Years in this company/partnership	<input type="text"/>	Years in this type of business	<input type="text"/>

Name (in full)	<input type="text"/>		
Percentage ownership	<input type="text"/>	Date of birth (DD/MM/YYYY)	<input type="text"/>
Years in this company/partnership	<input type="text"/>	Years in this type of business	<input type="text"/>

5. Business/Organisation obligation(s)

Is the business/organisation or the owner(s)/partner(s) a guarantor or have they any other obligations?

Yes No

Does the business/organisation owe any arrears of VAT/PAYE/National Insurance/Corporation tax?

Yes No

Is the business/organisation or the owner(s)/partner(s)/director(s) involved in any claim or lawsuit?

Yes No

Has the business/organisation or any owner(s)/partner(s)/director(s)/officer(s) ever been subject of formal insolvency proceedings e.g. bankruptcy, trust deed, liquidation etc?

Yes No

If the answer to any of the above is 'Yes', please give brief details below

6. Other business interests

If the business is a limited company, do any of the owners listed above or any of the directors without shareholdings have any other business interests?

Yes No

If 'Yes', please give brief details below

For Relationship Manager use only

CIN

Date