# **BUY TO LET MORTGAGE**

# **Application Form**



Please use BLOCK CAPITALS and fill in all sections or tick boxes, as appropriate.

APPLICATION TYPE	
Regulated Family BTL Ho	oliday BTL Consumer BTL
Standard BTL Ex-pat	triate BTL Special Purpose Vehicle (SPV)  Limited Company BTL
Product Applied for & Product Code	
MORTGAGE INTERMEDIARY DETAILS	
Individuals Name	Name of Principal/Network
Business Name	FCA No. of Principal/Network
Business Address	Mortgage Club (if applicable)
	Name of Packager (if applicable)
Mobile No	
Email Address	Has the applicant been seen face to face?
Webiste Address	Advised? YES NO
FCA Registration No	Execution Only? YES NO
State here the date you issued a mortgage illustration to your client	
Consent	
I, as the acting mortgage intermediary, hereby give my consent for my details t product information from the Mansfield Building Society by email.	to be held on the Mansfield Building Society database and would like to receive
YES NO	
I can confirm that the firm is authorised by the Financial Conduct Authority and	d has appropriate permissions to advise on/arrange regulated mortgage contracts.
Signed: Dated:	

# FEES APPLICABLE TO THE MORTGAGE APPLICATION

List below fees which are applicable to the product and those which you have included in your illustration to the applicant(s)

Type of Fee	To whom payable	When payable	Refundable Yes/No	Amount (£)

APPLICATION FEE					
If an application fee is payable with the selected product, please indicate below how you wish to pay this fee.					
I enclose a cheque payable to 'The Mansfield Building Society' in respect of the application fee.					
I wish to pay the application fee by debit/credit card. We will contact you for payment on receipt of your application.					

### **SUBMISSION CHECKLIST**

A number of documents are required to be submitted together with this mortgage application form.

Please ensure that these documents are submitted with the application form to avoid delays.

You should note that the processing of your mortgage application will be delayed if you do not submit the documents indicated in the checklist along with the required application fee. The application fee can be paid by cheque or debit/credit card on submission of the application.

Applicant 1 Applicant 2

<b>Proof of earnings</b> 3 months latest payslips	Proof of Deposit (if applicable)
Latest 2 years accounts and HMRC Tax Assessments	Proof of mortgage or rent payments  12 months proof of mortgage or rent payments
Latest 3 months full bank statements showing salary credits	Proof of rental income 3 months proof of rental income on property (if already let)
Latest P60  Proof of any other income	A copy of the exisitng Assured Shorthold  Tenancy Agreement(s)
Most recent confirmation of retirement income	Proof of anticipated rental income (ARLA letter or equivalent)
Pension forecasts State/Final Salary Scheme/ Personal Pension Scheme	Assests and liability statement for all BTL properties (on page 17)  SA105's (submitted to HMRC)
Copy of the most recent contract of employment (if contract worker)	
ADDITIONAL SUPPORTING INCLUDED	ON FOR SPV BTL LENDING  YES NO
Latest copy of the Company's Memorandum	Certificate of Incorporation
Articles of Association	Latest 2 years trading accounts (if available)

Applicant 1 Applicant 2

# BUSINESS DETAILS: SPV Limited Company BTL lending ONLY

Is this a Special Purpose Vehicle (SP	V)?	Yes	: No:	
Name of business:				
Registered address:				
Postcode:				
SIC Code:				
Business telephone number:				
Correspondence address (if different to business address):				
Postcode:				
Registeration number:			]	
Date of incorporation:	DD/MM/YY	YY		
Please provide names of any persons			low	
	involved within the bo.			
		Position	n business	
Full name(s)		(Shareholder, Dir	n business ector, Secretary)	Percentage shareholding
Full name(s)		(Shareholder, Dir	n business ector, Secretary)	Percentage shareholding
Full name(s)		(Shareholder, Dii	n business ector, Secretary)	Percentage shareholding
Full name(s)		(Shareholder, Dii	n business ector, Secretary)	Percentage shareholding
Full name(s)		(Shareholder, Dir	n business ector, Secretary)	Percentage shareholding
How long has the company been trading?		(Shareholder, Dii	n business ector, Secretary)	Percentage shareholding
How long has the company been	Yes No	(Shareholder, Di	n business ector, Secretary)	Percentage shareholding
How long has the company been trading?	Yes No	(Shareholder, Di	n business ector, Secretary)	Percentage shareholding
How long has the company been trading?  Has the company created any fixed and/or floating charges and/or debentures?	Yes No	(Shareholder, Di	n business ector, Secretary)	Percentage shareholding
How long has the company been trading?  Has the company created any fixed and/or floating charges and/or debentures?	Yes No	(Shareholder, Di	n business ector, Secretary)	Percentage shareholding
How long has the company been trading?  Has the company created any fixed and/or floating charges and/or debentures?	Yes No	(Shareholder, Di	n business ector, Secretary)	Percentage shareholding
How long has the company been trading?  Has the company created any fixed and/or floating charges and/or debentures?	Yes No	(Shareholder, Di	n business ector, Secretary)	Percentage shareholding

# COMMERCIAL / BUY TO LET MORTGAGE APPLICATION FORM

(1) PERSONAL DET	AILS			
Are you a;	Applicant Shareholder/Dire	ector	Applicant Shar	reholder/Director
	Applicant - Not named on the deeds (	JBSP)	Applicant - Not named on	the deeds (JBSP)
	Applicant 1		Ap	oplicant 2
Mr/Mrs/Miss/Ms/Other:				
First name(s) in full:				
Surname:				
Marital/Civil Partnership status: (If separated or divorced has settlement been agreed? Please give details on page 14)				
Previous surname:				
Date of birth:	DD/MM/YYYY		DD/MM/YYYY	
Anticipated/expected retirement age:				
National Insurance number:				
Nationality:				
Country of Residence:				
How long have you resided in your country of residence?				
Do you have indefinite leave to remain	in the UK? Yes:	No:		Yes: No:
Home telephone number:				
Mobile telephone number:				
Work telephone number:				
Email address:				
Number of dependents (children/adults)	Age(s):		Age(s):	
(2) ADDRESS HISTO	NDV			
CURRENT ADDRESS	KI			
Address:				
Postcode:				
Date moved in to this address:	Month: Year		Month:	Year:
If you have resided at your current	address for less than 3 years, please	e provide details of	your previous address(es)	on page 6
Are you registered on the electoral roll	at this address?	es: No:		Yes: No:
If you are not registered at this add	lress, please provide an explanation	regarding this on th	he additional information	page on page 14
Are you a	Homeowner with mortgage with	Homeowner out mortgage	Homeowner with mortgage	Homeowner without mortgage
	Living with family/friends Tenant	Other	Living with family/friends	Tenant Other
	If 'Other', Please note in the ad	ditional information section	· · · · · · · · · · · · · · · · · · ·	note in the additional information section
Would you like this to be used as your	correspondence address? Ye	es: No:		Yes: No:
If 'No', please confirm your				
preferred correspondence address/service address				
D			i .	

	Applicant 1	Applicant 2
Name of current Lender/Landlord:		
Address of Lender/Landlord:		
Postcode:		
Current monthly mortgage/rent payment:	£	£
Mortgage account number: (if applicable)		
Mortgage account holders:		
Date commenced:	MM/YYYY	MM/YYYY
Current mortgage balance outstanding:	£	£
Is the property to be sold on or before	completion of this mortgage? Yes: No:	Yes: No:
If being sold, how much for?	£	£
If you own any other propert	ies please complete the property portfolio sec	tion of this form on page 15
PREVIOUS ADDRESS		
Previous address:		
Postcode:		
Were you:	Homeowner Homeowner with mortgage	Homeowner Homeowner with mortgage
	Living with family/friends Tenant Other	Living with family/friends Tenant Other
	If 'Other', Please note in the additional information section	If 'Other', Please note in the additional information section
Date moved into this address:	MM/YYYY	MM/YYYY
Name of previous Lender/Landlord:		
Address:		
Postcode:		
Monthly payment:	£	£

### (3) EMPLOYMENT DETAILS **CURRENT EMPLOYMENT** Applicant 1 Applicant 2 Permanent Contract Fixed Term Contract If employed, do you have as Permanent Contract Fixed Term Contract Temporary Temporary Part Time Contract Part Time Contract Contract Contract Job title Employer's name: Employer's address: Postcode: Where is your usual place of work (if different from the above)? Nature of business: Employed within your family business? No No: DD/MM/YYYY DD/MM/YYYY Employment start date: Are you in a probationary period? Yes: No No: If 'Yes', when does this probationary DD/MM/YYYY DD/MM/YYYY period end? How many hours per week are you contracted for? Payroll number: Contact name for employment Employer's telephone number: Employer's email address: Have you been served with a notice of redundancy or other notice of Yes: No Yes No termination by your employer? If fixed term contract: When did you commence your current DD/MM/YYYY DD/MM/YYYY contract? What is the end date of your current DD/MM/YYYY DD/MM/YYYY contract? **PREVIOUS EMPLOYMENT** If you have been in your current employment for less than 3 years, please complete this section. Job title: Employer's name: Employer's address: Postcode: Employment start date: DD/MM/YYYY DD/MM/YYYY DD/MM/YYYY DD/MM/YYYY Employment end date: Reason for leaving:

### SELF EMPLOYMENT DETAILS

If you are self employed or a company director please complete the section below.

		Аррі	icant 1				Арр	licant 2		
Are you a:	Director	Partne	r	Sole Trader		Director	Partne	er	Sole Trader	
Name of business:										
Company address:										
Postcode:										
Company telephone number:										
Company email address:										
Nature of business:										
Company registration number:										
How long has the company been trading?	Years:		Months	:		Years:		Months:		
What percentage of the shares in the business do you own?		%					%			
COMPANY ACCOUNTANT DE	TAILS									
Name of firm:										
Address:										
Postcode:										
Telephone number:										
Email address:										
Accountant's name:										
Qualification:										
PREVIOUS SELF EMPLOYED	DETAILS									
Please provide full details of any o	ther self-emplo	yment with	in the las	t 3 years on th	ne ad	ditional informa	tion section	on page :	14	
4 INCOME DETAIL	C									
GROSS INCOME FROM EMPI										
Basic salary:	Yearly amount:	£				Yearly amount:	£			
Shift allowance/Commission:	Yearly amount:	£				Yearly amount:	£			_
Guaranteed overtime/bonus:	Yearly amount:	£				Yearly amount:	£			
Regular overtime/bonus:	Yearly amount:	£				Yearly amount:	£			
Car allowance:	Yearly amount:	£				Yearly amount:	£			
Net rental income:	Yearly amount:	£				Yearly amount:	£			
Second job income:	Yearly amount:	£				Yearly amount:	£			

IN	COM	IE FROM SELF-EMP	LOYMENT		A	pplica	nt 1							Α	pplicant 2				
Year	ende	d (latest 2 years)	Мо	ost rec	ent year )			viou			r		Most re	cent year	F	Previo	ous ye		
Net <sub>l</sub>	orofit:		£			£						£			£				
Divid	ends:		£			£						£			£				
Dire	ctors	remuneration:	£			£				_		£			£				
ОТ	HEF	?																	
Priva	ite pe	nsion income:	Yearly ar	nount:	£							Yea	arly amount:	£					
State	e pen:	sion income:	Yearly ar	nount:	£					_		Yea	arly amount:	£					
Main	itenar	nce by court order:	Yearly ar	nount:	£					_		     Yea	arly amount:	£					
Main	itenar	nce by private arrangemen	nt: Yearly ar	nount:	£					_		l     Yea	arly amount:	£					
	er ber		Yearly ar		£					_		] 	irly amount:						
		please specifiy type of ben	-	1100116.						_		160	iny antioonic.						
		IER INFORMATION -																	
Are t	here	any expected material ch	anges to you	ır incom	e in the		Yes:		٦,	No:					Υe			No:	
futur	e, wh	ich may impact your abilit	ty to repay th	e mortg	jage?		1 65.		'	NO.						5.	'	NO. [	
lf 'Ye	s', ple	ase describe these change	es:																
										_									
ls an	y of tl	ne income noted above p	aid in a curre	ncy oth	er than Sterlir	ng?	Yes:		1	Vo:					Ye	s:		No: [	
											rm which					⁄es', Plea			
							incor which				rrency in ne					ome and			:y in
								onal i age 14		nati	on section	on				ditional i page 14		ition se	ection
<b>(</b> 5	) (	OMMITTED E	VDENI	DITI	IDE														
( <u>)</u>	<i>)</i>	Type of commitment	APEN	יווע	PKE.														
		(student loans, credit cards, loans, maintenance, childcare, overdrafts, store																	
Арр	Арр	cards, mail order, hire	Account Number	Name	of Provider		Secu	ıred?	,		Accor Outstar	unt	Monthly	Credit Limit	Contract	To be	e repa tgage	id by	this
Ē	_	payments etc.)	- Tromber	ranic		Yes		No:		7 [	£	iu.i.g	£		cira date	Yes:	Juge	No:	
						Yes	:	No:			£		£			Yes:		No:	
						Yes	:	No:			£		£			Yes:		No:	
						Yes		No:			£		£			Yes:		No:	
						Yes	:	No:			£		£			Yes:		No:	
						Yes	:	No:			£		£			Yes:		No:	
						Yes	:	No:			£		£			Yes:		No:	
						Yes	<u> </u>	No:			£		£			Yes:		No:	
						Yes		No:			£		£			Yes:		No:	
If yo	ou ha	ve any other mortgages,	, please prov	ide full (	details on paç	ge 15													
												]							
Are	all cre	edit cards cleared on a mo	onthly basis?				Yes:			No:					Ye	3S:		No:	
Do y	ou h	ave a current overdraft fa	cility?				Yes:			No:					Ye	ès:		No:	
muc	es', on h hav 5 mor	which account and how e you been overdrawn in oths?	the																

# 6 CREDIT HISTORY

If you answer yes to any of the questions below, please provide full details and an explanation of circumstances in the box provided

	Арр	1		App 2	2
	Yes	No	Yes		No
a) Have you ever personally or as a Company Director been bankrupt (sequestration)?					
<b>b)</b> Are you aware of any impending bankruptcy (sequestration) or arrangement with creditors?					
C) Are you currently in a Debt Management Plan (Debt Arrangement Scheme), IVA (Protected Trust Deed) or in a payment arrangement with your creditors?					
d) Have you ever had a County Court Judgement (Decree), Default Notice or any other Court Order for non-payment of a debt against you in the last 36 months?					
e) If you are self-employed or a controlling Director, have you ever had a County Court Judgement (Decree) or any other Court Order for non-payment of a debt made against your firm/company?					
f) Have you had any payday loans in the last 2 years?					
g) Have you ever had a property repossessed or voluntarily surrendered a property?					
h) Have you ever been refused a mortgage, loan or any other credit?					
i) Are any legal proceedings being taken against you in relation to any financial commitment?					
j) Have you, or has any person resident with you, had any criminal convictions or are there any pending prosecutions?					
k) Have you given a financial guarantee to any person or company in the last 3 years?					
Have you ever failed to keep up the payments on any secured or unsecured commitment in the last 2 years?					
m) Are there any other matters that should be bought to the attention of the Society?					
Please provide information on dates, dates satisfied, amount(s), reasons, if payments are up-to-da	te and a	any oth	ner details in this	box	

7 PROPERTY TO	BE MORTGAGED
Full address of property to be mortgaged:	
Postcode:	
Type of valuation required:	Basic Mortgage RICS Homebuyer Valuation Survey
Name and address of Agent/Vendor:	
Postcode:	
Telephone number:	
Are you related to or are you in any bu	usiness relationship with the vendor? Yes: No:
If 'Yes', what is the nature of this relation	onship?
Please tell us the number of: Living Rooms	Kitchens Bathrooms Bedrooms WCs Basements
Is there a garage? Yes:	No:
Type of property: House	Bungalow Purpose-built flat/ Converted flat/ maisonette
If the property is a flat: On which floor is the flat?	How many floors are in the block?
Property style: Detached	Semi-Detached Terraced Other: (Please specify)
Tenure: Freehold	Leasehold Commonhold Heritable (Scotland)
Is the freehold being purchased? Yes:	No:
If 'Yes', please provide further details:	
If leasehold, please confirm:	
Annual ground rent:	£
Annual service charge:	£
Unexpired lease term (years):	
Name and address of Landlord/ Management Company:	
Is the property of traditional construction?	No:
Type of walls: Brick	Stone If 'Other' please state:
Type of roof: Tile	Slate If 'Other' please state:
When was the property built? (Year)	
If the property is under 10 years old, is there a valid NHBC or other similar certificate?	Yes: No: N/A:
If 'Yes', please provide full details:	
Is the property ex local authority?	Yes: No:
Is the property a listed building?	Yes: No:

Is the property subject to a section 106 Section 75 agreement?	Yes No
If 'Yes', Please provide full details:	
Will any business be carried out in the property?	Yes No
If 'Yes', Please provide full details:	
8 YOUR MORTGAG	GE REQUIREMENTS
Please indicate whether: Purch	Remortgage Transfer of Equity
Loan amount: £	
Purchase Price/Estimated value of property.	
Term of Mortgage:	years
Capita Repayment method: Repayr	I and Interest Only Part and Part If part and part, please from the solid second secon
. карау.	Confirm the split
If Interest Only, please provide details o	f the selected Repayment Strategy.
a) Sale of this property	f) Pension Lump Sum
<b>b)</b> Savings	g) Unit Trust or Investment Trust plan
c) Endowment policy	h) Sale of an unencumbered UK located BTL/holiday home property
d) Stocks and Shares	i) Sale of other property
e) Existing Personal Equity Plans	j) Proven Inheritance
	k) If Other, please specify
Currency of Repayment Strategy (if not	: sterling):
IF PURCHASE	
Source of deposit - Tick the boxes that apply:	Savings: Equity from other property.
	Other:
Ple	ease provide full details:
If a gift, please confirm the amount:	£
Name and address of donor:	
Postcode:	
Relationship to applicant(s):	

### IF REMORTGAGE (OR TRANSFER OF EQUITY) Amount required to repay existing £ mortgage: Amount required to repay a second £ charge: Amount required to purchase another £ Please specify: Amount required for home improvements: £ Amount required for debt consolidation: Amount required for divorce settlement: £ Other: **BUY TO LET INFORMATION** £ Please confirm the expected or current monthly rental payment If holiday let, please confirm the expected or current rental income achieveable in: Low season £ Mid season £ High season £ Is or will the property be let to a close relative? Yes No: If 'Yes', please state the relationship: Do you intend to live in the property at anytime in the future? Yes No: Have you or a relative ever lived in the property to be mortgaged at any time in the past? No Do you own any other properties? No: If 'Yes', please provide full details in the property portfolio section on page 15: 10 **SOLICITOR DETAILS** Name of individual acting for you: Name of firm: Firm address: Postcode: Telephone number: Fax number: Email address:

# (12) PROPERTY PORTFOLIO

Borrower(s) names

Please include any properties that you are currently in the process of purchasing (continue on a second sheet if necessary):

Borrower (1, 2, joint etc)	Full Address	Lender	Estimated	Loan	Date of Purchase	Property Type House, Flat. HMO	Montly creating Preceived P	Current Monthly Payment	Current Interest Rate	Int rate type (fixed, discount, funcker)	Interest Rate End Date	Current tenancy end date	Rental voids in last 24 months (in months)	Rental voids in Held as Ltd last 24 Co/months (in Personally?	Is this let to Family or was it previously your own residential property?
I/We hereby	1/We hereby confirm that the above is a true statement of my/our current Buy to Let Mortgage Portfolio	nt of my/our current Bu	uy to Let Mortg	age Portfolio											

Buy to Let Mortgage Application Form: Page 15

Signed applicant 2: FULL NAME: Date:

Signed applicant 1: FULL NAME: Date:

# (13) PROPERTY PORTFOLIO: Assets and Liabilities

Borrower(s) names

Liability Value							
Details						PLEASE COMPLETE SEPARATE PROPERTY PORTFOLIO SCHEDULE (PAGE 15)	
Liabilities	Outstanding Tax Liability	Guarantor Liabilities	Other Loans/borrowings	Other	Residential Property Mortgage outstanding	Total Buy to Let investment property mortgages outstanding	TOTAL
Value							
Details incl. provider						PLEASE COMPLETE SEPARATE PROPERTY PORTFOLIO SCHEDULE (PAGE 15)	
Assets	Cash / Savings	Investment Funds e.g. Shares/ISAs/PEPS	Pensions / Life Policies	Other (please give details)	Own Residential Property	Buy to Let / Investment Properties	TOTAL

1 / We hereby confirm that the above is a true statement of my/our current assests and liabilities

Signed applicant 1:	LL NAME:
Š	J.

2021	
per	
Octo	

Date:

### (14) DECLARATION - PLEASE READ CAREFULLY BEFORE YOU SIGN

At The Mansfield Building Society, we take your privacy seriously. The personal information that you provide to us and how we process it will depend on the products and services that you apply for or obtain from us.

Our Privacy Notice gives full details of the types of information we collect from you, how we use, store and share this information, together with your individual rights. You can obtain a copy from any of our branches, you can ask us to post a copy to you or download the document from mansfieldbs.co.uk. It is important that you, and any other applicant read the Privacy Notice.

It is important that the information you give us is accurate and up to date. The Society reserves the right to withdraw any Offer of Advance if the information provided in this form is found to be false or inaccurate.

In order to process your application, we will perform credit and identity checks on you with one or more credit reference agencies ("CRAs"). To do this, we will supply your personal information to CRAs and they will give us information about you. We will continue to exchange information about you with CRAs while you have a relationship with us.

If you make a joint application (e.g. with your spouse, partner or a family member), we will also collect personal information about that person. CRAs will also link your records together and these links will remain on your and their files until such time as you or your partner successfully files for a disassociation with the CRAs to break that link.

The personal information we collect from you will also be shared with Fraud Prevention Agencies who will use it to prevent fraud and money laundering and to confirm your identity. We will record this information and retain it in accordance with our Privacy Notice, whether the application is successful or not.

We will take up all necessary references from the information that you have provided and that are relevant to this application.

We will also pass information to financial and other organisations involved in fraud prevention to protect ourselves and our customers from theft and fraud. We, and other companies will use this information if decisions are made about you or others at your address(es) on credit or credit-related services or motor, household, credit, life or any other insurance facilities. It may also be used for tracing and claims assessment. If false or inaccurate information is provided and fraud identified, details will be passed to fraud prevention agency/ies to prevent fraud and money laundering.

We will provide confidential information about your finances to any person(s) giving a guarantee or other security, or to their legal adviser whilst we are processing this application and during the life of the mortgage.

I/We hereby apply for an advance to be made to me/us in accordance with the General Mortgage Conditions of The Mansfield Building Society and the provisions of the Mortgage Deed.

### I/We declare that:

**APPLICANT 1** 

- 1. I am/We are aged 18 years and over.
- 2. The information given in this application is true and correct to the best of my/our knowledge.
- 3. I/We will inform the Society of any changes to this information immediately.
- 4. I/We fully understand that the payment of the valuation fee shall not bind the Society to grant an advance.
- 5. I/We fully understand that the making of an advance will not imply any warranty by the Society as to the reasonableness of the purchase price, the soundness of construction or state of repair of the property.
- 6. I/We understand that borrowers (except corporate borrowers) are members of The Mansfield Building Society and bound by its rules.
- 7. I/We have read and accept the above statement regarding Data Protection Your personal information and what we do with it.
- 8. I/We will ensure that the property is insured for the full reinstatement value, on or before completion of my/our mortgage

### Print name in Date Signed **BLOCK CAPITALS APPLICANT 2** Print name in Signed: Date **BLOCK CAPITALS APPLICANT 3** Print name in Signed: Date BLOCK CAPITALS **APPLICANT 4** Print name in Signed: Date **BLOCK CAPITALS**

Would you like to receive information about our other products and services?				
From time to time we would like to contact you with details of other products and services we provide, including our community activities and latest news. If you consent to us contacting you for this purpose, please tick to say how you would like us to contact you:				
APPLICANT 1 APPLICANT 2				
Post Email Telephone Text Message Post Email Telephone Text Message				
Please ensure you have provided us with the relevant contact details in the 'Personal Details' section of this application form to enable us to contact you through your preferred method(s)				
You can update your marketing preferences or stop receiving marketing from us at any time by writing to us at Regent House, Regent Street, Mansfield, Nottinghamshire NG18 1SS, calling us on 01623 676300, visiting any of our branches, completing the online form at mansfieldbs.co.uk or by following the instructions on how to update your preferences in any marketing email or other communication that you receive from us.				

YOUR HOME MAY BE REPOSSESSED IF YOU DO NOT KEEP UP REPAYMENTS ON YOUR MORTGAGE

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Reference number 206049.

The Mansfield Building Society is a member of the Building Societies Association.

### **Principal Office:**

Regent House Regent Street Mansfield Nottinghamshire NG18 1SS

t: 01623 676300 w: mansfieldbs.co.uk

Direct Applications: 01623 676345 Intermediary Applications: 01623 676360

Branch Offices:

25 Market Place 22-26 Low Street 91 New Square **48 Station Street** Mansfield Sutton-in-Ashfield Chesterfield Kirkby-in-Ashfield Nottinghamshire Nottinghamshire **Derbyshire** Nottinghamshire **NG17 7AS NG18 1JA NG17 1DG S40 1AH** 

t: 01623 676350 t: 01623 554265 t: 01246 202055 t: 01623 756601

### **15) HOUSEHOLD INSURANCE**

We require that your property is insured for the full reinstatement value, on or before completion of your mortgage.

Protecting your property and its contents is an important decision and we feel that you should be able to select the level of cover to meet your own requirements.

The Mansfield Building Society does not provide household insurance products, however we have partnered with Uinsure an award winning insurance provider, to offer competitive 5 star defaqto rated\* Home Insurance.

Uinsure's Home Insurance brings together a selected panel of leading UK insurers to compete purely on price against a common worded policy. Uinsure do not provide advice and they will not give you a personal recommendation, however they will provide you with all the information you need on the policy options to help you make your own decision.

Key benefits of Uinsure Home Insurance:

- Up to £1 million rebuilding costs to cover against loss or damage to the structure of your home
- £75,000 contents cover provided as standard with the option to increase to £100,000
- Optional extras that are right for you and you only pay for the additional cover you need
- Home Insurance is underwritten by a selected panel of leading UK insurers
- Experienced claims service with UK-based staff

• Exherienced ciaims service mini out ha	sed stall		
<ul> <li>Maximum defaqto 5 star rating* provid</li> </ul>	es you with independent expert reassurance about the	quality of your home insurance polic	.y
* Uinsure Home Insurance has received 5 star defaq	to rating 2014-2019		
contacting you to discuss your insural	•		
•	nistered by Uinsure Limited. Uinsure Limited is aut umber 463689). Registered address: The XYZ Buil		
ARRANGING YOUR OWN INSURAN	CE		
I/We do not wish to take advantage	e of household insurance provided by Uinsure and I/we	wish to arrange my/our own insurance	ce cover.
I/We understand and agree to:			
Accept sole responsibility for the choic conditions or excesses imposed	e of insurer, the sum insured, the extent of cover and	the financial consequences of any ten	ms,
<ol><li>Ensure the sum insured is not less tha approved</li></ol>	n the rebuilding figure which will be detailed in the Off	er of Advance once the mortgage has	been
·	policy includes financial protection against loss or dam ood, Storm, Theft, Escape of Water, Malicious Damage,		
4. The interest of The Mansfield Building	Society is noted on the policy		
5. Undertake to pay all premiums as they	fall due to maintain the policy cover for the life of the	mortgage	
6. The society accepts no responsibility fo	or any loss suffered by me/us in connection with the in	surance of the property, however cau	ised
APPLICANT 1			
Signed:	Print name in BLOCK CAPITALS	Date:	
APPLICANT 2			
Signed:	Print name in BLOCK CAPITALS	Date:	
16 PROTECTION INSU	JRANCE		
Stonebridge Protect Limited, a specialist	ist death and and/or critical illness is important. The Ma provider of life, critical illness and income protection pi fferent types of cover to protect you and your family, a	oducts. Stonebridge Protect Limited	are able

Stonebridge Protect Limited is an appointed representative of Stonebridge Mortgage Solutions LTD which is authorised and regulated by the Financial Conduct Authority.

,	t to your name, address, date of birth, email address and tele the purpose of them contacting you to discuss your protect	
APPLICANT 1		
Signed:	Print name in	Date <sup>.</sup>

APPLICANT 2

Signed: BLOCK CAPITALS Date:

Print name in BLOCK CAPITALS Date:



### Instructions to your Bank or Building Society to pay by **Direct Debit**



Please fill in the whole form using a ball point pen and send it to:

The Mansfield Building Society Regent House Regent Street Notts NG18 1SS

Name(s) of Account Holder(s):		FOR MANSFIELD BUILDING SOCIETY OFFICIAL USE ONLY. This is not part of the instruction to your bank or building society  Mortgage Reference Number:
	Society Account Number: Branch Sort Code  postal address of your Bank or Building Society::	Instruction to your Bank or Building Society Please pay The Mansfield Building Society Direct Debits from the
То:	The Manager Bank/Building Society	account details in this instruction subject to the safeguards assured I the Direct Debit Guarantee.  I understand that this instruction may remain with The Mansfie
Address:		Building Society and, if so, details will be passed electronically to n Bank/Building Society.
		Signature(s):
Postcode:		Date:
Reference:		

Service User Number:

4 0 0 7 3 3

Bank and Building Societies may not accept Direct Debit instructions for some types of accounts

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This guarantee should be detached and retained by the Payer.

### The Direct Debit Guarantee

- This Guarantee is offered by all Banks and Building Societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit The Mansfield Building Society will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request The Mansfield Building Society to collect a payment, confirmation of the amount and date will be given to you at the time of the request
- If an error is made in the payment of your Direct Debit by The Mansfield Building Society or your Bank or Building Society, you are entitled to a full and immediate refund of the amount paid from your Bank or Building Society
  - -if you receive a refund you are not entitled to, you must pay it back when The Mansfield Building Society asks you to
- You can cancel a Direct Debit at any time by simply contacting your Bank or Building Society. Written confirmation may be required. Please also notify us