

Regulated Enquiry Form

r t: 0203 051 2331 r f: 0203 645 3804

Introducer I	Details								
Company Name					Mortgage Club				
Contact Name					FCA registration number				
Phone					Broker fee (£ / %)				
Email									
Borrower D	etails								
	Applicant 1	1			Applicant	2			
Title		First				First			
Middle			Surname				Surname		
Nationality									
Main residential address									
Postcode									
Is the property			Rented	Owned			Rented	(Owned
Outstanding mortgage	£				£				
Estimated value	£				£				
Loan Details	S								
Amount Required	£							Gross	Net
Term Required (Max 12 months)									
Purpose			Purchase	Refinance					
Reason for the loan?	,								
How will the loan be repaid?									



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Security Property Details

Address	Postcode					
Tenure	Property type					
Estimated value £	Purchase price £					
Does, has, or will the client (or an immediate family member) reside in the property?	No Yes					
Charge offered	First Second					
Outstanding mortgage balance £	Name of lender					
Please include details of any additional security below						

Additional Information