



White Rose Finance

Fast Competitive Finance Solutions

SECURED LOAN - PROJECT FACT FIND

Please complete this fact find electronically if possible and email to: enquiries@whiterosefinance.com

This section for internal use.	
AFC / Professional Associate:	E-mail:
	Date:

1. Applicant Details

	First Applicant		Second Applicant	
Title	M	F	M	F
Surname				
First Name(s)				
Previous Name(s)				
Nationality				
Date of Birth (dd/mm/yy)				
Marital Status				
Applicant Relationship				
Dependents	No.	Ages.	No.	Ages.
Current Address				
Postcode				
Telephone Number				
Mobile Number				
Date moved in to current address				
If at Current Address Less than Three Years Previous Address				
Anticipated Changes to Circumstances – If yes Please Specify				

2. Loan Required

Loan Amount	
Loan Purpose	
Required Term	

White Rose Finance Group Ltd
 Unit 11, Ousegate Business Centre
 Ousegate
 SELBY, YO8 4NN



Tel: 0845 838 1954 Fax: 01757 700963
 e-mail enquiries@whiterosefinance.com Web: www.whiterosefinance.com
 Consumer Credit Licence: 570063 Data Protection: Z 9035227



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3. Income Details				
	First Applicant		Second Applicant	
Occupation				
Employment Status	Employed	Self-Employed	Employed	Self-Employed
	Director % Shareholding		Director % Shareholding	
	Pensioner		Pensioner	
Salaried Employment Please complete the Following				
Is your job	Full-Time	Part-Time	Full-Time	Part-time
Employment Contract	Permanent	Temporary	Permanent	Temporary
Time in employment	Years		Years	
Employed Basic Income	£		£	
Guaranteed Additional (pa) -Overtime/Bonus etc.	£		£	
Regular Additional (pa) -Overtime/Bonus etc.	£		£	
Other Income (Please Specify)	£		£	
Employers Address				
Expected Retirement Age				
Self-Employed Please complete the Following				
Are Accounts Available	Yes	No	Yes	No
How many Years?				
Net Profit Last Year	£		£	
Previous Year	£		£	
The Year Before That	£		£	
Other Income (Please give amounts and details)				

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4. Existing Financial Commitments/Adverse Credit

First Applicant			Second Applicant		
Purpose	Monthly Payment	Current Balance	Purpose	Monthly Payment	Current Balance
Unsecured Loans			Unsecured Loans		
Secured Loans			Secured Loans		
	First Applicant		Second Applicant		
Any of the above loans in default or arrears	Yes	No	Yes	No	
If Yes Please Detail (Loan and amount)					
Ever had a mortgage or loan application refused?	Yes	No	Yes	No	
Are there CCJ's/IVA's registered against you or your company?	Yes	No	Yes	No	
Have you ever been bankrupt?	Yes	No	Yes	No	
Have you ever had a property repossessed?	Yes	No	Yes	No	

5. Consolidation Required

Please list below the above loans to be consolidated in the Secured Loan

Loan	Outstanding Balance	Monthly Payment	Current Arrears

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6. Current Residential Mortgage		
	Both Applicants	
Advised Value		
Current Lender		
Mortgage Outstanding		
Term Remaining	Years	
Monthly Payment	£	
Capital Outstanding		
Current Arrears		
Highest Arrears in last 36 months		
Repayment Method	Capital Only	Cap/Interest
Interest Rate Type	Variable	Capped
	Fixed	Discounted
	Flexible	Other

7. Declaration	
Do not sign this declaration unless you are entirely satisfied. If you have any questions or are not satisfied with any aspect, please ask for assistance before signing this document or any other mortgage form.	
I/We agree that this fact find is a true record of my/our circumstances. I/We accept that this fact find relates only to mortgages and is not a fact find for investment advice regulated under the Financial Services and Markets Act. I/We confirm that the personal and confidential information provided by me/us can be disclosed by the firm for the purpose of arranging a secured loan on my/our behalf and that I/We have read the completed fact find before signing below.	
First Applicant's Signature	Second Applicant's Signature
Date	Date

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