

THIS PAGE MUST BE COMPLETED BY THE PROFESSIONAL INTRODUCER - INCOMPLETE INFORMATION WILL RESULT IN A DELAY IN PROCESSING THIS APPLICATION

Application No.

Applicant Name(s)

Professional Introducer Details

Company Name

Contact

Telephone no STD () Fax no STD ()

E-Mail Address

MCCB Code Product required

Please indicate Mortgage Club/Network to be used

Information required to process a Regulated Mortgage Application

Are you authorised by the FSA: For mortgages? Yes No
 For general insurance? Yes No

If yes, please confirm:

Your FSA registration number:

Whether you are: Directly Authorised
 An Appointed Representative
 If so who is the Principal

Principal's FSA Number

By signing the section below I/We confirm that I/we am/are not submitting this application on behalf of another unauthorised firm.

If no, please confirm

Whether you are: A Packager with no client contact
 (In this case please provide the name of the firm / individual who sold this mortgage together with their FSA number)
 Name FSA Number

Only dealing with Buy-to-Let mortgage business

Please also confirm, for all applications:

What level of advice you provided: Advised Non Advised

Have you charged the applicant(s) a fee for this advice, or for arranging this mortgage? Yes No

If yes, please confirm the cash equivalent of this fee: £

Do you have a refund policy? Yes No

If yes, how much of the fee will be refunded? £

Insurance arrangements

I am arranging the following buildings insurance/contents cover:

Company Sum Insured (if known) £

I am arranging the following mortgage payment insurance cover:

Accident Sickness Unemployment Through (Name of Company)

Signed (by Introducer): Date: