



BROKERS

I R E L A N D

NETWORK SERVICES

MORTGAGE APPLICATION FORM

BROKERS IRELAND NETWORK SERVICES,

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DETAILS OF INTRODUCING INTERMEDIARY

Brokerage Name _____

Address _____

Telephone _____ Fax _____

E-mail _____ Authorisation No. _____

Disclosure of intermediary Status (where applicable). (e.g. only acts on behalf of one lender or one insurance company)

If this application has been introduced to you, by a third party (including an appointed introducer) please provide the introducer's name and address.

EXPLANATORY TEXT

This application form is divided into two parts. The first part captures information about you, the applicant. The second part gives important information about mortgages offered by a given mortgage lender, including statutory warnings. In part two your signature is required in relation to your application for a mortgage loan and your consent is sought in relation to various matters.

Please ensure that all applicants sign part one and two of the application.

PART ONE

INFORMATION ABOUT APPLICANT

Please indicate the reason for your application

First time buyer Re-Mortgage Purchase Residential Investment Property

Let to Buy Top-up Switcher Other

If 'Other' please specify _____

Failure to disclose the above information may result in the withdrawal of a lender appointment.

Have you or any of your staff met the customer face-to-face? Yes No

Section A – Personal Details

APPLICANT ONE

Forenames _____
Surname _____
Other/Previous Names _____
Title _____
Date of Birth (dd/mm/yyyy) _____
Nationality _____
PPS Number _____
Marital Status MARRIED REMARRIED SINGLE SEPARATED/DIVORCED WIDOW/ER CO HABITANT OTHER
No. of Children _____
Children's Ages _____

CURRENT ADDRESS

Are you: OWNER TENANT WITH PARENTS/RELATIVES OR FRIENDS Rent € _____ pm
Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
County _____
Country _____
Time at address _____ years _____ months

CORRESPONDENCE ADDRESS

Same as above
Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
County _____
Country _____

PREVIOUS ADDRESS (if less than 3 years at existing address)

Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
County _____
Country _____
Time at address _____ years _____ months
Address description as per IIB HL form required for DOE House Price Survey

CONTACT DETAILS

Home Telephone Number _____
Work Telephone Number _____
Mobile Telephone Number _____
E-mail _____

APPLICANT TWO

Guarantor
Forenames _____
Surname _____
Other/Previous Names _____
Title _____
Date of Birth (dd/mm/yyyy) _____
Nationality _____
PPS Number _____
Marital Status MARRIED REMARRIED SINGLE SEPARATED/DIVORCED WIDOW/ER CO HABITANT OTHER
No. of Children _____
Children's Ages _____

CURRENT ADDRESS

Are You: OWNER TENANT WITH PARENTS/RELATIVES OR FRIENDS Rent € _____ pm
Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
County _____
Country _____
Time at address _____ years _____ months

CORRESPONDENCE ADDRESS

Same as above
Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
County _____
Country _____

PREVIOUS ADDRESS (if less than 3 years at existing address)

Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
County _____
Country _____
Time at address _____ years _____ months

CONTACT DETAILS

Home Telephone Number _____
Work Telephone Number _____
Mobile Telephone Number _____
E-mail _____

Section B – Income & Employment

APPLICANT ONE

APPLICANT TWO

CURRENT INCOME

Gross basic wage/salary pa € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Overtime per annum € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Bonuses per annum € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Commissions per annum € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Other income per annum (non rental) € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Lodger income per annum € _____

Residential Investment income per annum € _____

Total gross income per annum € _____

Total joint financial income pa € _____

Total NET income per month € _____

Nature of Income _____

Employment Status _____
○ EMPLOYED | ○ EMPLOYED & SELF EMPLOYED | ○ HOMEMAKER | ○ OTHER | ○ RETIRED | ○ SELF EMPLOYED

CURRENT INCOME

Gross basic wage/salary pa € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Overtime per annum € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Bonuses per annum € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Commissions per annum € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Other income per annum (non rental) € _____
○ GUARANTEED | ○ REGULAR | ○ IRREGULAR

Lodger income per annum € _____

Residential Investment income per annum € _____

Total gross income per annum € _____

Total joint financial income pa € _____

Total NET income per month € _____

Nature of Income _____

Employment Status _____
○ EMPLOYED | ○ EMPLOYED & SELF EMPLOYED | ○ HOMEMAKER | ○ OTHER | ○ RETIRED | ○ SELF EMPLOYED

EMPLOYMENT DETAILS

EMPLOYMENT DETAILS

Please choose a category for each applicant from the attached list – Note 1 (Section G)

Please choose a category for each applicant from the attached list – Note 2 (Section G)

Occupation _____
○ CONTRACT | ○ PERMANENT | ○ TEMPORARY

Employer's Name _____

Address Line 1 _____

Address Line 2 _____

Address Line 3 _____

County _____ Country _____

Telephone Number _____

Nature of Business _____

Length of Service with employer _____ years _____ months

App 1 App 2

Occupation _____
○ CONTRACT | ○ PERMANENT | ○ TEMPORARY

Employer's Name _____

Address Line 1 _____

Address Line 2 _____

Address Line 3 _____

County _____ Country _____

Telephone Number _____

Nature of Business _____

Length of Service with employer _____ years _____ months

PREVIOUS EMPLOYMENT (if less than 1 years at current employer)

PREVIOUS EMPLOYMENT (if less than 1 years at current employer)

Employer's Name _____

Address Line 1 _____

Address Line 2 _____

Address Line 3 _____

County _____ Country _____

Occupation _____

Length of Service with employer _____ years _____ months

Employer's Name _____

Address Line 1 _____

Address Line 2 _____

Address Line 3 _____

County _____ Country _____

Occupation _____

Length of Service with employer _____ years _____ months

Section B – Income & Employment

APPLICANT ONE

APPLICANT TWO

SELF EMPLOYED DETAILS

SELF EMPLOYED DETAILS

Name of firm/company _____
 Address Line 1 _____
 Address Line 2 _____
 Address Line 3 _____
 County _____ Country _____
 Nature of Business _____
 How long has the business been established _____
 Time Involved _____
 Average profit over three years € _____
 Percentage shareholding/partnership interest _____ %
 Name of accountant _____
 Name of accounting firm _____
 Address Line 1 _____
 Address Line 2 _____
 Address Line 3 _____
 County _____ Country _____
 Telephone number _____
 Fax Number _____
 3 years audited accounts available _____
 Tax affairs up to date YES | NO

Name of firm/company _____
 Address Line 1 _____
 Address Line 2 _____
 Address Line 3 _____
 County _____ Country _____
 Nature of Business _____
 How long has the business been established _____
 Time Involved _____
 Average profit over three years € _____
 Percentage shareholding/partnership interest _____ %
 Name of accountant _____
 Name of accounting firm _____
 Address Line 1 _____
 Address Line 2 _____
 Address Line 3 _____
 County _____ Country _____
 Telephone number _____
 Fax Number _____
 3 years audited accounts available _____
 Tax affairs up to date YES | NO

Section C – Financial & Credit History

Current Bank/Building Society _____
 Address Line 1 _____
 Address Line 2 _____
 Address Line 3 _____
 County _____ Country _____
 Account Type _____
 Account Number _____
 Sort Code _____
 I have held this account for _____ years _____ months

Current Bank/Building Society _____
 Address Line 1 _____
 Address Line 2 _____
 Address Line 3 _____
 County _____ Country _____
 Account Type _____
 Account Number _____
 Sort Code _____
 I have held this account for _____ years _____ months

SAVING ACCOUNT INFORMATION

Financial Institution	A/C Number	Monthly Savings	App1	App 2	Balance
_____	_____	€ _____	<input type="radio"/>	<input type="radio"/>	€ _____
_____	_____	€ _____	<input type="radio"/>	<input type="radio"/>	€ _____
_____	_____	€ _____	<input type="radio"/>	<input type="radio"/>	€ _____
_____	_____	€ _____	<input type="radio"/>	<input type="radio"/>	€ _____
_____	_____	€ _____	<input type="radio"/>	<input type="radio"/>	€ _____
_____	_____	€ _____	<input type="radio"/>	<input type="radio"/>	€ _____

Section C – Financial & Credit History

MORTGAGE 1

Inception Date _____
 Mortgage Term _____
 Est. Sale Price € _____
 Are you selling this property YES | NO
 Name of Lender _____
 Mortgage Acct. No. _____
 Address of Lender _____

Property Value € _____
 Balance Due € _____
 Year Purchased _____
 If fixed, for how many years _____
 Payments missed in last 6 months _____
 Payments missed in last 12 months _____
 Payments per month _____
 Rental Income per month € _____
 Address of Property _____

Type of Mortgage
 ANNUITY | ENDOWMENT | INTEREST ONLY | OTHER | PENSION

Type of Rate
 DISCOUNT VARIABLE | FIXED | PENSION | INTEREST ONLY | OTHER

Is property registered in any name other than that of the applicant
 Details _____

MORTGAGE 2

Inception Date _____
 Mortgage Term _____
 Est. Sale Price € _____
 Are you selling this property YES | NO
 Name of Lender _____
 Mortgage Acct. No. _____
 Address of Lender _____

Property Value € _____
 Balance Due € _____
 Year Purchased _____
 If fixed, for how many years _____
 Payments missed in last 6 months _____
 Payments missed in last 12 months _____
 Payments per month _____
 Rental Income per month € _____
 Address of Property _____

Type of Mortgage
 ANNUITY | ENDOWMENT | INTEREST ONLY | OTHER | PENSION

Type of Rate
 DISCOUNT VARIABLE | FIXED | PENSION | INTEREST ONLY | OTHER

MORTGAGE 3

Inception Date _____
 Mortgage Term _____
 Est. Sale Price € _____
 Are you selling this property YES | NO
 Name of Lender _____
 Mortgage Acct. No. _____
 Address of Lender _____

Property Value € _____
 Balance Due € _____
 Year Purchased _____
 If fixed, for how many years _____
 Payments missed in last 6 months _____
 Payments missed in last 12 months _____
 Payments per month _____
 Rental Income per month € _____
 Address of Property _____

Type of Mortgage
 ANNUITY | ENDOWMENT | INTEREST ONLY | OTHER | PENSION

Type of Rate
 DISCOUNT VARIABLE | FIXED | PENSION | INTEREST ONLY | OTHER

FINANCIAL COMMITMENTS

How many existing loans do you have _____ Amount Borrowed Applicant 1 € _____ Applicant 2 € _____

Financial Institution	Account Number:	App1	App 2	Amount Owing	Payment (Mly)	Purpose	Final Payment Date	Refinance?
_____	_____	<input type="radio"/>	<input type="radio"/>	€ _____	€ _____	_____	_____	<input type="radio"/> YES <input type="radio"/> NO
_____	_____	<input type="radio"/>	<input type="radio"/>	€ _____	€ _____	_____	_____	<input type="radio"/> YES <input type="radio"/> NO
_____	_____	<input type="radio"/>	<input type="radio"/>	€ _____	€ _____	_____	_____	<input type="radio"/> YES <input type="radio"/> NO
_____	_____	<input type="radio"/>	<input type="radio"/>	€ _____	€ _____	_____	_____	<input type="radio"/> YES <input type="radio"/> NO

Rent € _____ Maintenance Payments € _____ Total € _____

CREDIT HISTORY

Have you ever:

	App1	App 2
Been refused a mortgage on this or any other property	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Had a court order registered against you	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Been insolvent, declared bankrupt or made any arrangements with creditors or any other action pending	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Had arrears on your existing mortgage with the last 24 months	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO

Details _____

PART TWO Section D – Mortgage Details

CUSTOMER TYPE

First Time Buyer Max Approval Required Yes No
Remortgage House First Applicant Yes No
Second Property Second Applicant Yes No
RP
If joint application, is title of property to be in joint names Yes No

SECTION ONE (PURCHASE ONLY)

Purchase price/cost of Building € _____ Savings* € _____
Site Price (if applicable) € _____ Grant € _____
Legal & stamp duty (if applicable) € _____ Gifts € _____
Repairs/Renovations € _____ Other funds* € _____
Other costs* € _____ Total Expenditure € _____ Total Finance € _____

*Please supply details of other cost and/or savings, or other funding sources _____

Is purchase: Local Authority Housing Scheme Affordable Housing Shared Ownership Affordable Housing Local Authority Tenant Purchase

If affordable House, please provide: Purchase Price € _____ Market Value € _____

SECTION TWO (RE-MORTGAGE ONLY)

Remortgage amount € _____
Property value € _____
Loan Value % _____
Year of original purchase _____
Current mortgage outstanding € _____
Age of property _____
New Mortgage required € _____
Purpose of additional borrowing _____

MORTGAGE

What type of repayment method do you require _____ Other/Initial years _____
Mortgage term (Years) _____ ENDOWMENT MORTGAGE | INTEREST ONLY | OTHER | PENSION BACKED | REPAYMENT/ANNUITY
Loan amount € _____ Commencement date _____
Type of rate required _____ TRACKER | DISCOUNT VARIABLE | FIXED | PENSION | INTEREST ONLY | OTHER Fixed for (years) _____

SOLICITOR

Solicitor Name _____
Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
County _____ Country _____
Phone Number _____
Mobile Number _____
Fax Number _____

Section E – Property Details

PROPERTY

Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
County _____
Country _____

See page 2 for address requirements

Type of Property NEWLY BUILT HOUSE | ONE OFF BUILT HOUSE | APARTMENT | SECOND HAND PROPERTY
Estimated completion/closing date _____
New Property
Number of floors in block (If apartment) _____
Estimated Value € _____

NUMBER OF ROOMS

Living rooms _____
Bedrooms _____
Kitchens _____

Dining rooms _____
Bathrooms _____
Utility rooms _____

IF BUYING OR BUILDING A NEW PROPERTY

Homebuilders Bond
Part of a development
Premier Guarantee
Is fixed price contract in place
Tenure of property Freehold Leasehold
Vacant possession Yes No
HB47/architects certificate available
Type of construction _____
Private Owner Occupation Only Yes No

Direct labour construction Employee Labour
Stage payment required
Number of payments _____
Architect's level of supervision
Number of years remaining on lease _____
Age of property _____

PEOPLE OVER 18 LIVING AT THE ADDRESS

Full Name	Date of Birth	Relationship with applicant
_____	_____	_____
_____	_____	_____
_____	_____	_____

SELLING AGENT DETAILS

First Name _____
Last Name _____
Telephone Number _____
County _____

Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
Country _____

VALUER DETAILS

First Name _____
Last Name _____
Telephone Number _____
County _____
Company Name _____

Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
Country _____
PIBA To Pay

CONTACT FOR ACCESS FOR VALUATION

First Name _____
Last Name _____
Telephone Number _____
County _____

Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
Country _____

Section E – Property Details

ARCHITECT DETAILS

Name _____ Telephone Number _____

BUILDER DETAILS

Name _____ Telephone Number _____

Section F – Alternative Lending

PLEASE COMPLETE THIS SECTION IF ALTERNATIVE LENDING IS SOUGHT

Have you had a mortgage on any other property other than previously detailed? Yes No

If yes, please give Details _____

Have there ever been any missed Repayments or revoked Credit Cards or Judgements? Yes No

If yes, please specify by completing the following:

1. Current Mortgage - Highest Number of Installment Arrears in last 12 months € _____
2. Current Mortgage - Highest Number of Installment Arrears in last 6 months € _____
3. Other Facilities - Highest Number of Other Arrears in last 12 months € _____

Have any judgement proceedings relating to debt ever been brought against you or any Judgments made against you?

Yes No

If yes, please specify by completing the following:

1. Judgments - Total Value Judgments Outstanding in last 24 months € _____

Have you ever had a mortgage application declined on this or any other property? Yes No

If yes, please give Details _____

Are there any matters which should be brought to the Lenders Attention? Yes No

If yes, please give Details _____

Section G – Declarations

COMMENTS & DECLARATIONS

Declarations have been signed Yes No
Customer has consented to Consumer Credit Act Yes No
Customer has consented to Data Protection Act Yes No

CONSENTS – (CONSENT(S) BY APPLICANTS TO BROKER

At Home
At Work
Leave message at home
Contact employer
Email
SMS
Consented to be contacted

DIRECT DEBITS

Day of Month to Debit Account _____

BANK DETAILS

Bank Name _____
Name(s) of Account _____ Address Line 1 _____
Bank Sort Code _____ Address Line 2 _____
Account Number _____ Address Line 3 _____
County _____
Country _____

CUSTOMER ADDRESS

Address Line 1 _____ Date Signed _____
Address Line 2 _____
Address Line 3 _____
County _____
Country _____

Section G – Declarations

GUARANTOR DETAILS

Some mortgage lenders may request that another party guarantee the loan. If another individual is to guarantee the loan, please enter their details in this section.

First Name(s) _____ Surname _____
 Date of Birth _____ Home Telephone _____
 Address _____ Work Telephone _____
 _____ Mobile Phone _____
 _____ E-mail _____
 Occupation _____ Basic Income € _____
 Relationship to applicant(s) _____

THESE QUESTIONS MUST BE ANSWERED

Are you aware of any health issues that may affect your ability to work and meet the repayments of this facility? Yes No

If yes, please provide details _____

Are you aware of any possible changes to your future circumstances that would affect your ability to meet repayments on this facility? Yes No If yes, please provide details _____

Warning: If you do not meet the repayments on your credit agreement, your account will go into arrears. This may affect your credit rating, which may limit your ability to access credit in the future.

PART 1 DECLARATION

I/we hereby declare that I/we have read and understood this part of the mortgage application form and that the information I/we have tendered herein is correct.

Signed _____ Dated _____
 (Applicant 2 if applicable)
 Signed _____ Dated _____

NOTES TO PART ONE OF THE APPLICATION FORM EMPLOYMENT SECTOR (NOTE 1)

Agriculture, Hunting, Forestry	A	Financial Intermediation	J
Fishing	B	Real Estate, Renting and Business Activities	K
Mining and Quarring	C	Public Administration and Defence	L
Manufacturing	D	Education	M
Electricity, Gas and Water Supply	E	Health and Social Work	N
Construction	F	Other Services	O
Wholesale and Retail Trade	G	Private Household with Employed Persons	P
Hotel and Restaurant	H	Extra-territorial Organisations and Bodies	Q
Transport, Storage and Communications	I		

NOTES TO PART ONE OF THE APPLICATION FORM OCCUPATION (NOTE 2)

Manager or Administrator	1	Craft and Related	5
Professional	2	Personal and Protective Services	6
Associate Professional and Technical	3	Sales	7
Clerical and Secretarial	4	Plant and Machine Operatives	8
		Other	9

Section H – Notes & Messages

Lined writing area with 20 horizontal lines.

Section I – Checklist

CHECKLIST OF SUPPORTING DOCUMENTS

FIRST APPLICANT

SECOND APPLICANT

Proof of Identity - Passport or Driving Licence	<input type="checkbox"/>	<input type="checkbox"/>
proof of Residence - A recent utility bill*	<input type="checkbox"/>	<input type="checkbox"/>
Income Certificate completed by your Employer	<input type="checkbox"/>	<input type="checkbox"/>
P60	<input type="checkbox"/>	<input type="checkbox"/>
Last 3 payslips	<input type="checkbox"/>	<input type="checkbox"/>
<i>*No more than 3 months old ie. ESB, telephone, Credit Card Statement</i>		
Last 3 years audited accounts (For Self Employed)	<input type="checkbox"/>	<input type="checkbox"/>
Statement of Affairs	<input type="checkbox"/>	<input type="checkbox"/>
Confirmation of TAX Affaris	<input type="checkbox"/>	<input type="checkbox"/>
Last 3 months Bank Statements	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Separation Agreement or Divorce	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Term Loans	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Mortgage Statement	<input type="checkbox"/>	<input type="checkbox"/>
Evidence of Deposit	<input type="checkbox"/>	<input type="checkbox"/>
Gift Letter	<input type="checkbox"/>	<input type="checkbox"/>