

# Westhill Financial Services

## BRIDGING FINANCE PRIORITY APPLICATION

Please complete and sign and return completed form to  
020 8301 6248 (fax) or e-mail maurice@westhillgroup.co.uk



### APPLICANT(S)

	Applicant 1	Applicant 2
Full Name:		
Date of Birth:		
Address:		
How long have you lived at this address? If less than 3 years please give previous address:		
Contact Tel Nos:	Home: Work: Mobile:	Home: Work: Mobile:

### FINANCE REQUIREMENT

Loan Amount Required: £	Purpose of Loan:
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### CURRENT PROPERTY DETAILS

Purchase Price: £	Mortgage Balance: £	Estimated Value: £
Date of Purchase:	Term:	No. of bedrooms:
Freehold/Leasehold (delete as applicable)	Ex Council: <input type="checkbox"/> No <input type="checkbox"/> Yes	Council Discount: £
Mortgage Lender:		
Mortgage Account No:		
Second Charge: <input type="checkbox"/> Yes <input type="checkbox"/> No	Balance: £	Monthly Repayment: £



## EMPLOYMENT DETAILS

**If Self Employed please complete this section**

	Applicant 1	Applicant 2
Occupation:		
Limited Company or Sole Trader:		
Name & Address of Company:		
Time in employment:		
Gross Profit:		

**If Employed please complete this section**

	Applicant 1	Applicant 2
Occupation:		
Employer: (Name & Address)		
Time in employment:		
Gross Monthly Salary:		

*"I/We agree that, in order to comply with Data Protection Legislation, permission is hereby given to carry out all appropriate credit searches in order to process this loan application and I/we agree to be contacted as necessary."*

Signed: \_\_\_\_\_  
(Applicant 1)

Dated \_\_\_\_\_

Signed: \_\_\_\_\_  
(Applicant 2)

Dated \_\_\_\_\_