

Mortgage application

Intermediary enclosures

Checklist

- | | | |
|---|---|--------------------------|
| 1 | Fully completed application form | <input type="checkbox"/> |
| 2 | Submission form | <input type="checkbox"/> |
| 3 | Valuation fee (if applicable) | <input type="checkbox"/> |
| 4 | Booking fee (if applicable) | <input type="checkbox"/> |
| 5 | 2 Years' signed accounts if self-employed or self-assessment returns together with tax calculation forms/CIS 25s. | <input type="checkbox"/> |
| 6 | Latest monthly payslips if employed (To cover the last one-month period) Photocopies accepted if originals witnessed. | <input type="checkbox"/> |
| 7 | Fully completed confirmation of verification of identity | <input type="checkbox"/> |



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Credit/debit card payment form

Please fill in the form using **BLOCK CAPITALS** and black ink. Tick any boxes which apply.

We are able to provide literature in alternative formats. The formats available are: large print, Braille, audio tape and PC disk. If you would like to register to receive correspondence in an alternative format please give us a call and ask for a 'Preferred Communication Request' form.

Completing this form

Name of first applicant

Name of second first applicant




Credit/debit card payment form

Valuation fee

Product change fee

Booking fee

 £

Add booking fee to loan? Please indicate

 Yes No Loan number

Amount added

 £

Please debit my credit/debit card account with (total)

 £

(The above fees are non-refundable)

Name of cardholder (as on credit/debit card)

Card number

Valid from Expiry date Switch issue number

Cardholder's signature

Date

Acceptable cards (please indicate)

 MasterCard Visa credit Visa debit (Delta) Maestro

For Regional Office use only

 Date of debit Amount debited £ Input by
Prism A/C No

Intermediary submission form



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- Mortgage application Remortgage application
 If applying for a Flexible Plus Mortgage, please also tick this box
 If a new build property, please tick this box

Supporting comments

Consultant/adviser name
 Company
 Full address

 Postcode
 For mortgage tracking updates:
 Email address
 cc. Email address
 Product code and rate
 Interest rate %

Other details
 Office
 Intermediary number
 Telephone number (Daytime) (Area code)
 Telephone number (Evening) (Area code)
 Fax number
 Please DO NOT send me a summarised fax offer
 Customer
 Agreement ref. number

Note: Prior agreement must be made on all cases over status.

General insurance

| | Accident, sickness and unemployment | Buildings | Contents |
|-------------------------------------|--|--------------------------|--------------------------|
| I am providing cover | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I am completing Santander Insurance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Supporting comments

Regulatory requirements

If you wish to use one of the following schemes for **Procurement fee payment**, please tick appropriate box.

| | | | |
|--|---|---|--|
| <input type="checkbox"/> 1st Mortgage Services | <input type="checkbox"/> MGM Assurance | <input type="checkbox"/> Park Row | <input type="checkbox"/> SP Mortgage Administration Centre |
| <input type="checkbox"/> A.P.S. Europe | <input type="checkbox"/> Mortgage Broking Services | <input type="checkbox"/> Paymentshield | <input type="checkbox"/> The Mortgage Alliance (TMA) |
| <input type="checkbox"/> Bankhall | <input type="checkbox"/> Mortgage 2000 (M2) | <input type="checkbox"/> Personal Touch Insurance | <input type="checkbox"/> The Mortgage Operation (TMO) |
| <input type="checkbox"/> Domain | <input type="checkbox"/> Mortgage Intelligence | <input type="checkbox"/> Pink Home Loans | <input type="checkbox"/> The Mortgage Partnership |
| <input type="checkbox"/> First Mortgage Options | <input type="checkbox"/> Mortgage Next | <input type="checkbox"/> Premier Mortgage Service | <input type="checkbox"/> Threesixty |
| <input type="checkbox"/> Friends Provident | <input type="checkbox"/> Mortgage Support Network Ltd | <input type="checkbox"/> Scottish Life Mortgages | <input type="checkbox"/> Your Move |
| <input type="checkbox"/> Independent Mortgage Direct (IMD) | <input type="checkbox"/> Network Data Ltd | <input type="checkbox"/> Sentinel Mortgages | <input type="checkbox"/> Other – Please state |
| <input type="checkbox"/> Lime | <input type="checkbox"/> Network Mortgages | <input type="checkbox"/> Sesame | <input type="text"/> |
| <input type="checkbox"/> Members' Mortgages | <input type="checkbox"/> Openwork | <input type="checkbox"/> St James Place | |

Are the applicants paying any fee to you to arrange the mortgage?

 Yes No

If yes, please advise amount

 £

Have you given advice on this mortgage application?

 Yes No

Method of sale (please tick as appropriate)

 Face-to-face
 Telephone
 Internet
 Postal

System KFI reference number (if applicable)

Please advise if the applicant(s) have any special needs for correspondence. For example Braille, large print, audio tape, PC disk or other format

Intermediary submission form (continued)

Confirmation

I confirm that:

- 1 I am authorised to act on behalf of the customer named on this application form.
- 2 I, or my company, have all appropriate authorisation from the FSA necessary for this application. If the application arises as a result of the activities of another person then that person is also appropriately authorised by the FSA or is exempt from authorisation.
- 3 I have witnessed the original payslips, if photocopies submitted.
- 4 If the application is for a CAT standards loan then I confirm that the applicant has not paid an arrangement fee.
- 5 I accept responsibility for the security of any information faxed to me (if I have chosen this method of transmission).
- 6 I will ensure that all information collected will be a true and accurate reflection of the customer's circumstances and I will keep that information up to date.
- 7 I have advised the customer that you may confirm income on any application, even where the customer has self-certified their income.
- 8 I have discussed the mortgage payments with the applicant(s) and can confirm that the applicant(s) can afford these payments.

Intermediary signature

Date

PLEASE NOTE: YOU WILL ONLY RECEIVE ACKNOWLEDGEMENT BELOW AFTER CASE HAS BEEN CREDIT SCORED, ALL FEES HAVE BEEN RECEIVED, VALUER INSTRUCTED AND CASE AGREED IN PRINCIPLE (UNDERWRITTEN).

Customer fees

Fees – must accompany application to commence underwriting. Please use credit/debit card payment form opposite for payment

Valuation fee (non-refundable) £ Booking fee (non-refundable) £ Other £

Payment by credit/debit card only.

Regional Office acknowledgement

(OFFICE USE ONLY) (to be posted to Intermediary)

REFERENCES BEING REQUESTED

Salary App 1 Yes No Tenancy Yes No

Salary App 2 Yes No Lender's Yes No

Salary App 3 Yes No Other

Salary G'tor Yes No Date survey instructed

Product booked

Intermediary number

Account number

PRISM reference

Date underwritten

Date offer due

Contact name

Service commitment: If all of the above information is provided we undertake to agree the application in principle and instruct the surveyor by the day after receipt, or advise you if we are unable to proceed for any reason. The offer will be available within 14 days, unless you are advised otherwise.



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Application for mortgage

Please fill in the form using **BLOCK CAPITALS** and black ink. Tick any boxes which apply.

Mortgage application Remortgage application If applying for a Flexible Plus Mortgage, please also tick this box

If purchasing a new build property, please tick this box

For office use only (for Remortgage application only)

Remortgage

Property owned mortgage-free

If part-regulated loan (completed Direct Debit form CPA1 0109 to be submitted with application)

Intermediary

Intermediary registration number

| | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

Mortgage choices

Customer type

Mover Loyal Mover

Remortgage First Time Buyer

A deal with a higher rate that will help with valuation and legal fees, etc?

Yes No

Pay arrangement fee and get a lower rate?

Yes No

Mortgage application number

Interest rate and product code

Booking fee added

To loan number

Interest type (ie fixed, variable, etc.)

Fixed rate issue numbers (if applicable)

Quota or control number (if applicable)

Application agreed in principle reference number

Solicitor's panel number (if applicable)

Consumer Credit licence number

Date

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Agreed by (full name) and staff number

Please tick ✓ the correct boxes or answer in the spaces provided using CAPITAL LETTERS. Please answer all the questions so that we can deal with your application as quickly as possible.

1 Personal details

1 First customer

Title (eg Mr, Mrs, Miss, Ms, Other)

Surname

First name(s)

Middle name(s)

Other names you're known by or commonly use (not nicknames)

Are you:

Male Female

Previous name(s)

(Please give any title, forename or surname by which you have previously been known, eg maiden name)

2 Nationality

2nd nationality (if you have dual nationality)

3 Marital status

Single Married To be married

Divorced Separated Widow/widower

4 Date of birth

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

1 Second customer

Title (eg Mr, Mrs, Miss, Ms, Other)

Surname

First name(s)

Middle name(s)

Other names you're known by or commonly use (not nicknames)

Are you:

Male Female

Previous name(s)

(Please give any title, forename or surname by which you have previously been known, eg maiden name)

2 Nationality

2nd nationality (if you have dual nationality)

3 Marital status

Single Married To be married

Divorced Separated Widow/widower

4 Date of birth

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

1 Personal details (continued)

5 Number of financial dependants

| Relationship to applicant | Age of dependant |
|---------------------------|------------------|
| | |
| | |
| | |
| | |

6 Is your country of residence the UK? Yes No

If no, please state country

First customer

7 Home address: If you've lived there for less than 3 years, give your address(es) for the last 3 years and state how long you lived at each.

Present address

Postcode

Time at current address

Previous address

Postcode

Time at previous address

Postcode

Time at previous address

(If more than one entry is necessary please give details on a separate sheet)

To be completed by the sole applicant

Do you have a partner or spouse living with you at your current address? Yes No

If yes, please give details

Title

First name

Surname

Date of birth

Are they Male Female

8 Daytime telephone number (including area code)

Evening telephone number (including area code)

A member of our staff may need to contact you regarding the progress of your application; please indicate the best time below (ie between 9am and 5pm)

5 Number of financial dependants

| Relationship to applicant | Age of dependant |
|---------------------------|------------------|
| | |
| | |
| | |
| | |

6 Is your country of residence the UK? Yes No

If no, please state country

First customer

7 Home address: If you've lived there for less than 3 years, give your address(es) for the last 3 years and state how long you lived at each.

Present address

Postcode

Time at current address

Previous address

Postcode

Time at previous address

Postcode

Time at previous address

(If more than one entry is necessary please give details on a separate sheet)

To be completed by the sole applicant

Do you have a partner or spouse living with you at your current address? Yes No

If yes, please give details

Title

First name

Surname

Date of birth

Are they Male Female

8 Daytime telephone number (including area code)

Evening telephone number (including area code)

A member of our staff may need to contact you regarding the progress of your application; please indicate the best time below (ie between 9am and 5pm)

2 Financial details

First customer

9 Employment status

Employed Self-employed

Employee with own company Contract

Other

(eg retired, unemployed, please specify)

If contracted:

Contract start date

Contract end date

What is the contract type?

Fixed short term Temporary

Second customer

9 Employment status

Employed Self-employed

Employee with own company Contract

Other

(eg retired, unemployed, please specify)

If contracted:

Contract start date

Contract end date

What is the contract type?

Fixed short term Temporary

2 Financial details (continued)

First customer

10 If employed:

Occupation

 Nature of duties

 Name and address of personnel department

 Postcode

 Daytime telephone number (including area code)

 Fax number (including area code)

 Salary reference number

Original start date
 Earnings –
 Basic wage/salary before tax £ Wk/mth/yr
 Regular overtime/allowances £ Wk/mth/yr
 Non-regular overtime/allowances £ Wk/mth/yr
 Stable secondary employment £ Wk/mth/yr

11 If self-employed: name and address of business

(please include past 2 years' accounts or CIS 25s/Self Assessment Returns and tax calculation forms/Tax Assessments with your application)

Occupation

 Postcode

 Type of business

 How long trading? Years How long under your control? Years
 Trading year

Please enter, in the boxes below, your income before tax for the past 3 years, as declared to HM Revenue & Customs:

| Year ended | Share of net profit | Net profit amount |
|---|------------------------|------------------------|
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> % | <input type="text"/> £ |
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> % | <input type="text"/> £ |
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> % | <input type="text"/> £ |

Name and address of accountant

 Postcode

 Contact name

 Reference

 Telephone number (including area code)

 Fax number (including area code)

Second customer

10 If employed:

Occupation

 Nature of duties

 Name and address of personnel department

 Postcode

 Daytime telephone number (including area code)

 Fax number (including area code)

 Salary reference number

Original start date
 Earnings –
 Basic wage/salary before tax £ Wk/mth/yr
 Regular overtime/allowances £ Wk/mth/yr
 Non-regular overtime/allowances £ Wk/mth/yr
 Stable secondary employment £ Wk/mth/yr

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|---|------------------------|------------------------|
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> % | <input type="text"/> £ |
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> % | <input type="text"/> £ |
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> % | <input type="text"/> £ |

Name and address of accountant

 Postcode

 Contact name

 Reference

 Telephone number (including area code)

 Fax number (including area code)

2 Financial details (continued)

First customer

12 Other income?

From where?

Amount per year

If this other income is from employment please give details on a separate sheet, including full name and address of any other employer.

13 Does your job entitle you to take part in a company pension scheme?

Yes No

National Insurance Number

14 At what age do you intend to retire?

15 If your current age plus mortgage loan term is greater than intended age of retirement please confirm how you will maintain mortgage payments in retirement.

Pension Stocks and shares
 Property and income Investment income
 Inheritance

Other

16 Please fill in numbers of any Santander savings accounts or cheque accounts that you have:

Account number

Account number

17 Financial commitments, eg hire purchase, credit cards, maintenance payments.

| Balance | Monthly payment | Purpose |
|---------|-----------------|---------|
| | | |
| | | |
| | | |

18 Have you ever been bankrupt, or been subject to an individual voluntary arrangement?

Yes No

19 Are you a discharged bankrupt?

Yes No

20 Have you ever had a property repossessed, or had a court order for debt registered against you, or not kept to any credit agreements?

Yes No

If yes to Question 18, 19 or 20, please give details on a separate sheet.

21 Monthly income and anticipated expenditure (must be completed in all cases)

A Total combined monthly income (after tax and NI)

B Monthly mortgage payment at SVR

C Maintenance payments

D Nursery/school/college/university fees

E Existing life assurance/private health premiums

Second customer

12 Other income?

From where?

Amount per year

If this other income is from employment please give details on a separate sheet, including full name and address of any other employer.

13 Does your job entitle you to take part in a company pension scheme?

Yes No

National Insurance Number

14 At what age do you intend to retire?

15 If your current age plus mortgage loan term is greater than intended age of retirement please confirm how you will maintain mortgage payments in retirement.

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 Property and income Investment income
 Inheritance

Other

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Account number

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Yes No

19 Are you a discharged bankrupt?

Yes No

20 Have you ever had a property repossessed, or had a court order for debt registered against you, or not kept to any credit agreements?

Yes No

If yes to Question 18, 19 or 20, please give details on a separate sheet.

3 Property details

If two or more people are applying, they should answer the following questions together.

22 Address of the property you wish to buy or are remortgaging

Postcode

23 Please confirm that you currently live, or are intending to live, in the whole of the property, either on the completion of your mortgage or at a later time.

 Yes No

If no, please tell us

Will a member of your immediate family live in the whole of the property, either on the completion of your mortgage or at a later time?

 Yes No

If no, please tell us

Will you and/or your immediate family live in more than 40% of the property, either on the completion of your mortgage or at a later time?

 Yes No

If no, please tell us

a) What other use will the property have (including full details of any business which will be carried out there)? Continue on a separate sheet if necessary.

b) Could the property be used solely for people to live in without any structural change?

 Yes No

c) Is any part of the property rented out?

 Yes No

If yes, please give details of tenants on a separate sheet.

24 Is the property you want to buy

 Freehold? Feudal (Scotland only)? Leasehold?

Number of years left on lease

 years

Ground rent

 £ per year

If this varies, please give details

Service charge

 £ per year

Feu duty/rent charge/chief rent (Scotland only)

 £

If a Scottish property, has a survey been carried out by a panel surveyor from which a transcription can be taken?

 Yes No

25 Type of property

 Bungalow Detached house
 Semi-detached house Terraced house
 Converted flat/maisonette Purpose-built flat/maisonette

Others (please describe)

If a flat, how many floors of flats are there?

 floors

Which floor is the flat situated on?

The floor

Number of bedrooms

Number of living rooms

Designated parking space

 Yes No

Garage

 Yes No

26 Year of construction of the property?

If a new build property, please provide name of builder

If it is a new property or built in the last 10 years is it being sold with National House Building Council Cover or Foundation 15 Cover?

 Yes No

If No, is/was the building of the property being supervised by an architect or surveyor?

 Yes No

If Yes, please give their name and address and qualifications

Postcode

Qualifications

27 In some cases an internal inspection may be required. Who should our valuer contact during working hours to obtain access to the property?

 Telephone present owner Telephone agent

If other, please give details.

28 If you are taking a repayment mortgage will you be taking out a Mortgage Protection Life Policy? Yes No

29 Santander Paymentcare mortgage payment protection insurance Paymentcare could help pay your mortgage and other bills if you are unable to work due to accident or sickness, unemployment or you leave work to become a carer for an immediate family member.

Yes, I wish to apply for Paymentcare cover. Please complete the Paymentcare section of this form. Yes

No, I do not require Paymentcare cover and I understand that I remain responsible for the mortgage payments if I am unable to work due to an accident, sickness or unemployment, or I leave work to become a carer. No

30 Completion date. When approximately do you plan to complete the purchase and move in? You may need to speak to the present owner or your solicitor before replying.

Date

31 Previous mortgage application

Have you applied for a mortgage on this property before? Yes No

If yes, to whom?

If yes, why didn't you go ahead with the application?

32 Will anyone over 17 be living at the property (except for the people using this form to apply)? Yes No

If yes, please give their full names

Are they a member of the family? Yes No

Will they be providing money to help buy the house? Yes No

33 Are you buying/did you buy the property under the local authority right to buy scheme? Yes No

If yes, what is the full council valuation/discount did you get? £

34 Is a guarantor to be used? Yes No

3 Property details (continued)

To be completed by first time buyers, customers moving home and customers purchasing a second property only.

35 Is this a private sale?
 Yes No

Are you receiving a vendor's sale cash incentive (eg paying legal or other costs, cashback, carpets, soft furnishings, etc.)? Yes No

If yes, what is the incentive and for how much?
 £

Name and address of present owner or builder if new

Postcode

Present owner's telephone number (daytime) (Area code)

Name and address of agent selling property to you

Postcode

Telephone number (Area code)

If you don't own a home are you currently:
 staying with friends or relatives? a tenant?

How long have you been a tenant/living with friends or relatives? Yrs

If you are a tenant, please give the following details:
 Rent £ Wk £ Mth

Name and address of landlord

Postcode

Landlord's telephone number (Area code)

Fax number (Area code)

Solicitor/licensed conveyancer who will act for you

Name and address of firm

Postcode

Name of person acting

Telephone number (Area code)

Fax number (Area code)

To be completed by Remortgage customers only.

36 Do you already have a mortgage or loan secured on this property other than with Santander UK plc? Yes No

If no, please go to Question 36a. If yes, please give the following details
 Full names of all present borrowers

Name and address of lender

Postcode

Lender's account number

Monthly repayment £

How much did you borrow to buy the property? £

Total amount still to pay £

Have you used this property for security on any other loan or financial commitment (including home improvement loans)? Yes No

If no, please go to Question 36a. If yes, please give the following details:
 Name and address of second lender(s)

Postcode

Your account/reference number

Monthly repayment £

Total amount still to pay £

36a Solicitor/licensed conveyancer who will act for you

Name and address of firm

Postcode

Name of person acting

Telephone number (Area code)

Fax number (Area code)

4 Loan details

To be completed by first time buyers, customers moving home and customers purchasing a second property only.

37 Purchase price of the property not including the value of any furnishings, carpets, curtains etc. or concessions offered by the vendor.

Purchase price

Less amount you are providing personally (deposit)

The amount you require from us to buy the property incl. any government loan (mortgage) a)

If you wish to borrow to improve the property please write the amount you wish us to consider (home improvement loan) b)

For Flexible Plus Mortgage, please detail the amount of available funds required (up to 90%) c)

The total amount of money you wish to borrow from us (mortgage + home improvement loan) a) + b)

Or for Flexible Plus Mortgage (mortgage + available funds) a) + c)

Please state source of deposit

Equity in current property Customer's own savings

Gift from family Previous property sale

Inheritance Other (please specify)

To be completed by Remortgage customers only.

38 Estimated value of property which loan is to be secured against

What is the purpose of this loan? (Tick one or more boxes and fill in the amount of money required for each purpose)

a) To pay back the original amount you borrowed to buy the property

b) To pay back an existing home improvement/renovation loan(s)

c) To pay for further home improvements (please provide full estimates)

d) To pay back existing non-home improvement loan(s)

e) To use for business purposes

f) To use for personal purposes

g) To purchase additional share of shared ownership property

h) For Flexible Plus Mortgage, please detail the amount of available funds required (up to 90%)

The total amount of money you wish to borrow from us excluding Higher Lending Charge (mortgage)

39 If an existing customer of Santander UK plc, will you be porting any loans? If so, please specify

| Loan amount | Product | Repayment type | Term | |
|-------------|---------|----------------|-------|--------|
| | | | years | months |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Are you applying to anyone else for a loan using the property as security? Yes No

If yes, please state the amount and who you are applying to

To be completed by all mortgage customers.

40 Over what term do you wish to repay the loan?
 Years Months

41 How do you wish to repay the loan? (For Flexible Plus Mortgage, any available funds you may draw will be repaid on the same basis as your initial mortgage loan.) (Please ask your local financial adviser if you are unsure.) If the loan is split by more than one product, please indicate all product codes, loan amounts, repayment types and terms.

Repayment options:

- By an ISA
- By an endowment policy
- By a pension policy
- By the repayment method
- By the investment method
- By interest only

| Loan amount | Product | Add fee to loan | Repayment type | Term | |
|-------------|---------|-----------------|----------------|-------|--------|
| | | | | years | months |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

If you have chosen repayment, go to Question 43.

If you have chosen interest only, please indicate how the capital sum will be repaid:

Pension Stocks and shares

Property and income Investment income

Inheritance

Other

42 Policies to be used in connection with loan. If you have more than one policy, please give details on a separate sheet. Name and address of life assurance company

Postcode

Policy number

Maturity date/retirement date

Premium

Monthly Quarterly Annually Single

Policyholder

If it is an endowment, what is the sum assured?

Name of person(s) assured

43 Is the property under a shared ownership scheme? Yes No

Or a shared equity scheme? Yes No

Or a low-cost housing scheme? Yes No

What is your percentage of ownership? %

If applicable, what is the additional percentage being purchased? %

Do you have the option to buy the remaining share? Yes No

What rent will you be paying? per month

To whom?

Local authority? Registered housing association?

Unregistered housing association?

Builder/developer? Other?

Please write their name and address on a separate sheet.

4 Loan details (continued)

44 Are you applying to anyone else for money towards the purchase price or associated costs, including renovation grants? Yes No

If yes, how much and where from?

45 Choosing your payment day

For your convenience and control you can choose the day of the month that we collect your mortgage payment by Direct Debit. This will, for example, enable the payment to coincide with the day you are paid. This should be between the 1st and the 28th of the month inclusive.

Which day of the month do you want us to collect your mortgage payment? Please specify a date.

5 Present housing

To be completed by first time buyers, customers moving home and customers purchasing a second property only.

First customer

46 Have you ever owned any property before? (In the UK or abroad) Yes No

Do you own a property now? Yes No
 If no, please provide details, on a separate sheet, of changes in property ownership (eg mortgage, sale price) occurring in the past 3 years.
 If yes, how much would you be likely to get if you sold?

Have you a mortgage on your present property? Yes No
 If yes, please give the following details:
 Is this mortgage going to be repaid on or prior to taking out this new mortgage? Yes No
 Is it currently with Santander UK plc? Yes No
 Please state the name(s) in which the mortgage is held

Name and address of lender where account held

Postcode

Account number

Balance to pay

Monthly repayment

Second customer

46 Have you ever owned any property before? (in the UK or abroad) Yes No

Do you own a property now? Yes No
 If no, please provide details, on a separate sheet, of changes in property ownership (eg mortgage, sale price) occurring in the past 3 years.
 If yes, how much would you be likely to get if you sold?

Have you a mortgage on your present property? Yes No
 If yes, please give the following details:
 Is this mortgage going to be repaid on or prior to taking out this new mortgage? Yes No
 Is it currently with Santander UK plc? Yes No
 Please state the name(s) in which the mortgage is held

Name and address of lender where account held

Postcode

Account number

Balance to pay

Monthly repayment

6 Statement and liabilities

This is not mandatory for all applications. However, in some circumstances you will be asked to complete the following questions.

Assets

| Details of assets (if property, also provide address) | Owners | Estimated value |
|---|--------|-----------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |

Liabilities

| Type of liability | Name, address and reference of creditor | Secured (yes/no) | If yes, please provide asset(s) no. (see above) | Monthly repayment or terms of repayment | Amount outstanding |
|-------------------|---|------------------|---|---|--------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |

Examples:

Types of assets: cash/savings/deposits, stocks and shares, life policies (indicate surrender value), property and land (both residential and commercial), cars/vehicles, overseas property, trusts, income assets, boats/vessels/moorings, business interests (inc. shareholdings and partnerships).

Types of liabilities: mortgages (first/second and subsequent), personal loans and hire purchase agreements, family loans, lease arrangements, other creditors (please specify), overdrafts, Lloyds underwriting liabilities, guarantees given, partnership liabilities.

Customer name

Sales team

7 Declaration – to be signed by mortgage applicants in all cases

Declaration

All those applying for a mortgage should read and sign this declaration.

General

This declaration relates to the information (the information) which I (the applicant) have given on this form and to any other information which I and third parties provide to you, Santander UK plc, or which you hold on me.

I confirm that I am entitled to disclose information about any joint applicant, partner/spouse or other third party named on the application form.

I acknowledge that for the purposes of this mortgage application and declaration, 'Santander UK plc' includes your successors in title and assigns.

I agree that:

- To the best of my knowledge and belief, the information is true and complete and I will notify you of any changes in my circumstances which occur before the mortgage is completed. I acknowledge that this information will be used to assess affordability of the mortgage and that I am aware of my approximate monthly payments and that I can afford these payments. I also understand that if I have chosen a variable interest rate and the interest rate increases, my monthly payment could increase. I am aware that taking on new or additional financial commitments of any kind during the period of the mortgage, where I have not received any corresponding increase in income, could affect my ability to meet the mortgage payments as they fall due and that my home will be at risk if I fail to maintain the mortgage payments. You may take up such references and make such enquiries about me as you consider necessary (eg from an employer or other financial institution). I give my permission to any person to disclose information to you in connection with this application. I understand that this may include a request to confirm my income and that you may also request this information from me if I originally self-certified my income in this application.
- You may release any information relating to this application or the mortgage to any person consenting to the mortgage, the conveyancer acting on the mortgage, any company managing them and any financial adviser and I give each of them permission to release any such information to you.
- You may transfer, assign or otherwise deal with any interests you may have in the mortgage or any other security and enter into contractual arrangements with other parties in connection with the funding of the mortgage. This includes passing any information relating to this mortgage account to such other parties, their agents or advisers for the purpose of funding the mortgage.
- You may pass any information or documentation relating to this mortgage account (and any additional loans) to any guarantors while they remain liable on their guarantees.
- I acknowledge that details of the property and the purchase price may be recorded on a database which will be used by you and other organisations to value properties, as well as for administration, research and statistical purposes.
- I confirm that if this application is successful, the provisions of this declaration will continue to apply throughout the life of the mortgage.
- If I have paid a booking fee for a particular product then I acknowledge that the fee is non-transferable and non-refundable.
- I acknowledge that to assist you in improving your service, you may record or monitor telephone calls.
- You may disclose the information to insurers, reinsurers and their respective advisers and agents for any purpose relating to any insurance you may arrange. The information may also be disclosed to regulatory bodies and other organisations so they can check your compliance with regulatory requirements and voluntary codes of practice.
- If the loan will not be for the benefit of all borrowers (eg the loan is for the benefit of one borrower and not both, or the loan is for the benefit of a third party), then I should tick the box, provide details of the purpose of the loan, and the name and address of the person who will benefit.
- Where I have given information to a mortgage intermediary for the purposes of a mortgage application, I consent to my details being manually input and subsequently transmitted electronically.
- I have confirmed that I or a member of my immediate family currently live(s), will be living or am/ls intending to live, in at least 40% of the property as a dwelling. I understand that immediate family means anyone who is a spouse, parent, brother, sister, child, grandparent or grandchild; or any other person (whether or not of the opposite sex) whose relationship with me has the characteristics of the relationship between husband and wife. I confirm that Santander UK plc's mortgage will be a first charge on the property.

Higher Lending Charge

- I understand that if the loans exceed 90.09% loan to value, I may be required to pay a Higher Lending Charge calculated on the amount which is treated as the property's value (this amount is normally the same as the current valuation of the property, but for loans made at the time of purchase or soon afterwards it may be the purchase price, if this is lower than the current valuation). I note that an explanation of the Higher Lending Charge is in 'A straightforward guide to your mortgage'.
- If I am required to pay a Higher Lending Charge I authorise you to deduct the Higher Lending Charge from the amount of the loan offered to me and I understand that it will not be refundable (if for example the mortgage is redeemed).
- I acknowledge that I will have to repay all sums due under the mortgage even if I pay the Higher Lending Charge.
- I understand that if I subsequently receive an additional loan from you on the security of the property, I may be required to pay a Higher Lending Charge if the total amount then owing to you, including the additional loan, exceeds 90.09% loan to value.

Valuation

I have read the valuation services section in 'A straightforward guide to your mortgage' and require:

- Valuation for Mortgage Purposes ①
- Home Buyer Survey and Valuation for Mortgage Purposes
- Private Building Survey and Valuation for Mortgage Purposes

(Tick the one you require)

for the property detailed above and (in Scotland only) any other property or properties to which I may extend this application either verbally or in writing. (These three reports do not apply to business premises.)

If my choice is the Valuation for Mortgage Purposes I understand that:

- You will provide me with a copy of the valuation
- Santander UK plc is not the agent of the surveyor or firm of surveyors, or my agent, and I am not making an agreement with the surveyor or firm of surveyors
- I must satisfy myself without reference to the Valuation for Mortgage Purposes or to any offer of loan by Santander UK plc, as to the condition of the property and the reasonableness of the sale price

Note: The information in the Valuation for Mortgage Purposes will be limited because of the nature of the inspection. We therefore recommend that you consider whether or not to ask Santander UK plc to arrange for a Home Buyer Survey or arrange a private building survey.

If my choice is Home Buyer Survey:

- I understand that the surveyor will not carry out a private building survey

Fee enclosed ②

Valuation fees that have been paid will be refunded if a valuation is cancelled prior to the surveyor's visit to the property otherwise the fee is not refundable. The payment of this fee does not mean that Santander UK plc must offer a loan.

- ① In some remortgage cases, subject to eligibility, we will only carry out a limited external valuation (External Inspection Valuation) or use an Automated Valuation Model (AVM). If this is the case no valuation report will be provided and you will not pay a valuation fee.
- ② For a Valuation for Mortgage Purposes the fee includes a mortgage set-up fee of £90 with the balance representing the valuation fee.

For Home Buyer Survey the fee includes both the valuation fee and the mortgage/survey set-up fee of £100.

8 Data protection statement and signatures

In addition to the consents I have already given in the declaration above, I agree that whether or not this application is accepted, you may use and share all the information I give to you Santander UK plc or you hold on me including information on transactions on the account with the group of companies to which you belong (the Santander Group), your associated companies, service providers or agents who may be based in other countries. I understand that you will make sure that my information is only used in line with your instructions and your own strict policies on confidentiality. If you transfer my information to another country, you will also make sure that you give it the same levels of protection as needed under the UK Data Protection Act.

I agree that you may use my information in this way for administration purposes and to:

- provide and run the account or service I have applied for and develop and improve your products and services;
- identify and let me know by post, phone or electronic media (including email or SMS) of products or services, which your group of companies and associated companies think, may interest me. (When deciding whether to provide me with details of a credit product you may search the files of credit reference agencies who will not make a record of this search available to other lenders who search my file.); and
- invite me to take part in market research surveys.

If I would prefer not to receive up-to-date information on other products and services or to be included in market research, I can tick the following boxes: Please do not contact me by phone by post by electronic media for market research . Unless I have said otherwise, by continuing with this application, I consent to you contacting me using any of the methods shown above.

I understand that when you assess this application you will use the information for credit assessment, which may include credit scoring. For more information on how credit scoring works, I can read the 'Your application and credit scoring' section of the 'A straightforward guide to mortgages' leaflet. You may make any enquiries relating to me that you consider necessary (for example, from another financial institution) and search the files of credit reference agencies which will keep a record of each search. This could affect my ability to get credit elsewhere within a short period of time. Details about this application (whether or not it goes ahead) will be recorded at the credit reference agency.

A financial link between joint applicants or between myself and any named partner or spouse will be created at the credit reference agency. This will link our financial records, where each will be taken into account in all future applications by either or both of us. If I already have a financial association, you will assess my application on this basis. This situation will continue until one of us successfully files for a 'disassociation' at the credit reference agency. You will also pass details about me and how I run my account (if my application is successful) to credit reference agencies.

Before you can open my account, you will check my details with fraud prevention agencies, and may make searches at credit reference agencies who will supply you with information including information from the electoral register, for the purposes of verifying my identity. Scoring methods may be used to verify my identity. A record of this process will be kept that may be used to help other companies to verify my identity. If I give you false or inaccurate information and fraud is identified, details will be sent to fraud prevention agencies. Law enforcement agencies may access and use this information.

You and other organisations may search and use the records held by credit reference and fraud prevention agencies about me and my financial associates or partner/spouse and others in my household, to prevent crime, fraud and money laundering and for example:

- to check details provided on applications for credit and credit related or other facilities;
- to verify my identity if I or my financial associate applies for other facilities;
- to help make decisions about credit and credit related services, insurance proposals and claims, and all types of facilities for me, my financial associate or partner/spouse and other members of my household;
- to check the operation of credit and credit related accounts and to manage accounts and facilities, including tracing debtors and recovering debt;
- to help make decisions about job applicants and employees; and
- to undertake statistical analysis and system testing.

You and other organisations may search and use from other countries the information recorded at fraud prevention agencies. Further information on the credit reference agencies and fraud prevention agencies you use is available by telephoning 0845 602 0319.

You may also give essential information about my account to others if needed to run my account and for regulatory purposes. You will keep information about me after my account is closed.

I understand that the other reasons for which you may give information about me and my mortgage account to your group and associated companies and/or third parties are described in the 'Your Application and Credit Scoring' section of the 'A straightforward guide to your mortgage'.

I understand that my mortgage intermediary or you will give me a copy of the completed application form if I ask you to.

I understand I have a right to see certain records you hold about me if I pay a fee and I can get an information sheet explaining my rights from any branch.

I declare that:

- I am aged 18 or over.
- I understand that it is an offence to make a false declaration.
- I have read and understand the General Declaration (and in particular point 1) and the Data Protection statement above.

Please do not sign this form until you have received and read the enclosed 'A straightforward guide to your mortgage'.

First customer signature

Date

Second customer signature

Date

IF ANY OF YOUR PLANS CHANGE PLEASE TELL US IMMEDIATELY

Please remember to complete the Direct Debit section

Please provide additional information which has been requested in any of the questions or which you feel will help with the assessment of your application on a separate sheet if necessary.

For Regional Office use only

FTB Sw Ex Rm AI

Mortgage A/C number

Interest rate

Quota control number

Intermediary

Intermediary number

Solicitor's panel number

Application agreed in principle

Agreed by (full name) and staff number

Date

Application for Santander Paymentcare mortgage payment protection insurance

Please fill in the form using **BLOCK CAPITALS** and black ink. Tick any boxes which apply.

Please complete the following questions to the best of your knowledge and belief

1 Personal details

For joint applications, full details of both applicants must be included.

First customer

Title

Mr Mrs Ms Miss

Other

Are you: Male Female

First name

Middle name(s)

Surname

Other names you are known by or commonly use (not nicknames)
(please include title, first name and surname)

Date of birth

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Nationality

Second nationality (if you have dual nationality)

Do you live in the UK?

Yes No

If no, please state country

Occupation

Are you self-employed?

Yes No

Daytime telephone number (including area code)

Second customer

Title

Mr Mrs Ms Miss

Other

Are you: Male Female

First name

Middle name(s)

Surname

Other names you are known by or commonly use (not nicknames)
(please include title, first name and surname)

Date of birth

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Nationality

Second nationality (if you have dual nationality)

Do you live in the UK?

Yes No

If no, please state country

Occupation

Are you self-employed?

Yes No

Daytime telephone number (including area code)

2 Address details

Property to be insured/mortgaged (if different from present)

Postcode

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

Present address

Postcode

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

3 Cover and benefits

Do you have an existing Santander Paymentcare policy? Yes No

Cover required (please tick)

– Accident, sickness and unemployment (including carer cover)
12 months cover with a 28-day waiting period
£7.77 per month per £100 of cover

– Accident and sickness 12 months cover with a 28-day waiting period
£4.20 per month per £100 of cover

Please note that your Paymentcare premium includes Insurance Premium Tax at the current rate.

MINIMUM BENEFIT £100 PER MONTH

MAXIMUM BENEFIT £2,000 OR 50% OF GROSS MONTHLY SALARY – WHICHEVER IS THE LOWER.

Joint cover

Split of benefit if the policy is in joint names (benefits may be split in bands of 10% and must total 100%)

First customer %

Second customer %

Please state start date of cover (if not linked to a new mortgage)

Benefit details

Please give details of monthly outgoings you would like to cover

a) Monthly mortgage payment (including any other loans secured on your home) £

b) Monthly endowment, ISA or life premiums £

c) Monthly buildings and contents insurance premium £

d) Optional cover for regular monthly commitments £

e) Total basic monthly benefit (a+b+c+d) £

f) Monthly Paymentcare premium (e x premium rate %) £

g) Total monthly benefit (e+f) (rounded up to nearest £1.00) £

TOTAL MONTHLY PREMIUM PAYABLE (g x premium rate %) £

Please indicate which of the following dates you would prefer us to debit your premiums

1st 8th 15th 22nd 28th

4 Important notes

Your duty of disclosure

You must disclose any facts known to you which are likely to affect the insurer's decision to accept the risk of insurance (and, if so, on what terms). You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance.

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce liability under the contract in respect of a claim or may cancel the contract. If your disclosure is fraudulent, the insurer may also have the option of voiding the contract from the beginning and reclaiming any money paid out for previous claims.

The law

There is a choice of law for this insurance, but unless we agree otherwise, the law for that part of the UK where you live at the start date will apply.

Complaints procedure

If the insurer cannot resolve your complaint and you remain dissatisfied or the insurer has not issued a final response letter within 8 weeks of you first complaining, you can refer this to the Financial Ombudsman Service. The Ombudsman's address is: Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR. None of the above affects any rights you may have to take action against the insurers.

The type of insurance service we provide

This policy is underwritten by CGU Underwriting Limited, registered in England. Registered number 94405. Registered office: St Helens, 1 Undershaft, London, EC3P 3DQ. A member of the Aviva group. Authorised and regulated by the Financial Services Authority. The insurer is covered by the Financial Services Compensation Scheme and you may be entitled to compensation from the scheme if the insurer cannot meet its obligations. Further information about compensation arrangements is available from the Financial Services Compensation Scheme.

5 Declaration and data protection statement

This section **MUST** be completed. If you require joint cover both customers **MUST** sign the form.

Please read carefully before signing and dating this application form. I wish to apply to join the Paymentcare scheme and I declare that:

- I am aged 18 years or over and under 65.
- I am in paid work of at least 16 hours per week (which is not of a temporary nature) and have been so for the last 6 months.
- I live in the UK.
- I am paying or about to pay a mortgage provided by Santander UK plc or Alliance & Leicester plc.
- I am up to date with my monthly repayments, if I have an existing mortgage.
- I am not aware that I am going to become unemployed in the near future.
- I realise that I may not be covered for any medical condition, whether diagnosed or not, which I am aware of or for which I have received treatment or advice in the past 12 months if this persists or returns in the first 12 months of the policy.

I certify that I have read and understood the Paymentcare policy summary and I am aware of the terms, conditions, exclusions and restrictions of the policy. If I am self-employed or work on a fixed term contract I am aware of how the policy terms, conditions and exclusions affect me.

I am aware that a specimen policy is available on request. I agree that any monthly benefit paid under this policy will be paid into the account from which the premium is collected unless I choose otherwise. If I have a mortgage provided by Santander UK plc or Alliance & Leicester plc, I agree that the monthly benefit may be paid directly to either Santander UK plc or Alliance & Leicester plc, as directed by Santander UK plc, for example if my mortgage account is in arrears. I realise that failure to disclose relevant facts may result in benefit not being paid under this policy. I declare that according to my knowledge and belief, the information given on this application form is true and complete and I understand that it will form the basis of the proposed contract of insurance between myself and CGU Underwriting Limited, the insurer. I realise I should keep a record of this and all information supplied (including letters) for the purpose of entering into the contract.

Data protection – how my information will be used

This declaration relates to the information I give on this form and to any other information which I give to you, Santander UK plc and the underwriters or which you hold on me. I understand that you will use the information to help you provide the policy for which I have applied and you will keep information about me after my insurance has ended. I understand I have the right to see certain records you hold about me if I pay a fee and I can get an information sheet explaining my rights from any branch.

Whether or not this application is accepted, you may share and use all the information I give to you or you hold on me including information on transactions on the policy with the group of companies to which you belong (the Santander group), associated companies, underwriters, service providers or agents, who may be based in other countries. I understand that you will make sure that my information is only used in line with your instructions and your own strict policies on confidentiality. If you transfer my information to another country, you will also make sure that you give it the same levels of protection as needed under the UK Data Protection Act.

Before you can open my account, you will check my details with fraud prevention agencies, and may make searches at credit reference agencies who will supply you with information including information from the electoral register, for the purposes of verifying my identity. Scoring methods may be used to verify my identity. A record of this process will be kept that may be used to help other companies to verify my identity. If I give you false or inaccurate information and fraud is identified, details will be sent to fraud prevention agencies. Law enforcement agencies may access and use this information.

You and other organisations may search and use the records held by credit reference and fraud prevention agencies about me and my financial associates or partner/spouse and others in my household, to prevent crime, fraud and money laundering and for example:

- to check details provided on applications for credit and credit related or other facilities;
- to verify my identity if I or my financial associate applies for other facilities;
- to help make decisions about credit and credit related services, insurance proposals and claims, and all types of facilities for me, my financial associate or partner/spouse and other members of my household;
- to check the operation of credit and credit related accounts and to manage accounts and facilities, including tracing debtors and recovering debt;
- to help make decisions about job applicants and employees; and

- to undertake statistical analysis and system testing.

You and other organisations may search and use from other countries the information recorded at fraud prevention agencies. Further information on the credit reference agencies and fraud prevention agencies you use is available by telephoning 0845 602 0319.

Sensitive personal data – In order to assess the terms of the insurance contract or administer claims that arise, you may need to collect information about me that the Data Protection Act defines as sensitive (such as medical history or criminal convictions). By proceeding with this insurance, I consent to this information being used by you or your agents.

I agree that you may use my information in this way for administration, statistical and research purposes and also to:

- Provide and run the policy I have applied for and to develop and improve your products and services.
- Identify and let me know by post, phone or electronic media (including email and SMS) of products or services, (which your group of companies and its associated companies think may interest me. (If I am over 18, when deciding whether to provide me with details of a credit product you may search the files of credit reference agencies who will not make a record of this search available to other lenders who search my file.)
- Invite me to take part in market research surveys.

Where I said, when applying, that I did not want to receive such marketing information or take part in market research, I understand that you will respect my wishes. Unless I have said otherwise, I agree to you contacting me using any of the methods shown above.

You may also give essential information about my policy to others if needed to run my policy and for regulatory purposes.

I understand that in the event of an insurance claim, any information I give to the underwriters, whether on this form, the claim form or otherwise, will be placed onto a Register of Claims through which insurers share such information to prevent fraudulent claims. I understand that a list of participants and the name and address of the operator are available from the insurer. I agree that other insurers may share and use the information to check the answers on this form or on any claim I may make.

I confirm that I have read and understood the declarations on this page.

If joint cover is required, both customers must sign.

First customer signature

Date

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Second customer signature

Date

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Office use only (please complete before sending to Santander Paymentcare)

Regional office number

Sales team number

Intermediary code

Sales code

Staff application Yes No

Mortgage account number

Lender

Exchange date

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Completion date

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

FSA registration number where applicable

Intermediary name (for Trigold only)

Name of company (for Trigold only)

Peace of Mind home insurance Intermediary submission form

Please fill in the form using **BLOCK CAPITALS** and **black ink**. Tick any boxes which apply.

Consultant/adviser name

Company

Full address

Postcode

Introducer number

Has advice been given in respect of the sale of this insurance?

 Yes No

Office

Introducer FSA registration number

For Appointed Representatives only:

Please tell us the FSA registration number of your principal

Daytime telephone number (including area code)

Evening telephone number (including area code)

Fax number (including area code)

If you wish to use one of the following schemes for Procurement Fee Payment, please tick the appropriate box.

1st Mortgage Services

A.P.S. Europe

First Mortgage Options

Genesis Homeloans Plc

Independent Mortgage Direct (IMD)

Legal & General (Mortgage Club)

Mortgage 2000 (M2)

Mortgage Choice UK Ltd

Mortgage Intelligence

Mortgage Next

Mortgage Support Network Ltd

Network Data Ltd

Openwork

Park Row

Paymentsshield

Personal Touch Insurance

Pink Home Loans

Prudential PMS

Scottish Life Mortgages

Scottish Provident TMA

Sentinel Mortgages

SP Mortgage Administration Centre

The Mortgage Operation (TMO)

The Mortgage Partnership

Other – please state

Confirmation

I confirm that:

1. I am authorised to act on behalf of the customer named on this application form.
2. All customers have been identified in accordance with the existing agreement with Santander UK plc.
3. I, or my company, have all the appropriate authorisation from the FSA for this application. If the application arises as a result of the activities of another person, then that person is also appropriately authorised by the FSA or is exempt from authorisation.
4. I will ensure that all information collected will be a true and accurate reflection of the customer's circumstances and I will keep information up to date.

Intermediary signature

Office use only

Regional office number

Sales team number

Campaign code

Intermediary number

Santander UK plc. Registered Office: 2 Triton Square, Regent's Place, London NW1 3AN, United Kingdom. Registered Number 2294747. Registered in England. www.santander.co.uk Telephone 0870 607 6000. Calls may be recorded or monitored. Authorised and regulated by the Financial Services Authority except in respect of its consumer credit products for which Santander UK plc is licensed and regulated by the Office of Fair Trading. FSA registration number 106054. Santander and the flame logo are registered trademarks.

Santander UK plc advises on mortgages, a limited range of life assurance, pension and collective investment scheme products and acts as an insurance intermediary for general insurance.

1b Joint applicant details

Please complete where appropriate.

Title
 Mr Mrs Ms Miss
 Other

Are you: Male Female

First name

Middle name(s)

Surname

Other names you are known by or commonly use (not nicknames)
 (please include title, first name and surname)

Date of birth

Nationality

Second nationality (if you have dual nationality)

Is your country of residence the UK?
 Yes No

If no, please state country

What is your home address?

 Postcode

Occupation (job title and brief description)

Daytime telephone number (including area code)

Evening telephone number (including area code)

Email address

If there are more than 2 applicants, please complete the information required in 1b on a separate sheet for the additional applicant(s).

2 Property details

This section **MUST** be completed, please tick boxes where appropriate.

Type of property

Standard

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Detached house | <input type="checkbox"/> Semi-detached house | <input type="checkbox"/> End terraced house | <input type="checkbox"/> Mid terraced house |
| <input type="checkbox"/> Detached bungalow | <input type="checkbox"/> Semi-detached bungalow | <input type="checkbox"/> Terraced bungalow | <input type="checkbox"/> Maisonette |
| <input type="checkbox"/> Converted flat | <input type="checkbox"/> Purpose-built flat | <input type="checkbox"/> Flat above business with firebreak floor | |

Non-standard

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Chalet | <input type="checkbox"/> Property with multiple outbuildings | <input type="checkbox"/> Flat above business with no firebreak floor | <input type="checkbox"/> Service flat within employer's premises |
| <input type="checkbox"/> Building under construction | <input type="checkbox"/> Mansion | | |

Other – please specify

Is the property mortgaged?

Yes No

If yes, who is the mortgage provider?

If you have a mortgage provided by Santander UK plc or Alliance & Leicester plc, please state your mortgage number

Number of bedrooms (include all rooms used as a bedroom or originally built as a bedroom – even if not used as one)

Year the property was built (approximately)

When did or when are you planning to move in?

2 Property details (continued)**Ownership of property:**

- I own the property and my family live there
- Rented furnished from the local authority
- Rented unfurnished from the local authority
- Rented furnished from a landlord
- Rented unfurnished from a landlord
- Tied under a lease agreement
- Freeholder with lessee occupying
- Let to a family or individual*
- Let to multiple families or individuals*
- Let to a housing association or local authority*
- Let to benefit claimants or students*

* If you ticked any of these boxes, please answer the following:

Is the property classed as a bedsit?

- Yes No

Please give us details of the current letting agreement

Start date

| | | | | | |
|---|---|---|---|---|---|
| M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|

Will the entire letting period be for more than three years?

- Yes No

Do you pay local authority business rates?

- Yes No

Security details

Is the property:

a) fitted with approved locks to all accessible doors and windows?

- Yes No

b) fitted with a smoke detector?

- Yes No

c) in a police approved Neighbourhood Watch Area?

- Yes No

d) fitted with an approved burglar alarm?

- Yes No

If yes, please specify

- National Security Inspectorate (NSI)
- Security Systems and Alarms Inspection Board (SSAIB)
- Association of Chief Police Officers (ACPO)
- Other alarm

Is the burglar alarm under an annual maintenance contract?

- Yes No

Details of the home/occupancy information

a) What is the main construction of the walls?

- | | |
|---|---|
| <input type="checkbox"/> Brick | <input type="checkbox"/> Brick/timber frame |
| <input type="checkbox"/> Stone | <input type="checkbox"/> Timber frame |
| <input type="checkbox"/> Asbestos | <input type="checkbox"/> Cob construction |
| <input type="checkbox"/> Flint | <input type="checkbox"/> Metal (not corrugated iron) |
| <input type="checkbox"/> Prefab building | <input type="checkbox"/> Stramit construction |
| <input type="checkbox"/> Timber or timber/plaster | <input type="checkbox"/> Wattle and daub construction |
| <input type="checkbox"/> Woodwall or woodwork | <input type="checkbox"/> Plastic/glass/fibreglass |
| <input type="checkbox"/> Essex construction | <input type="checkbox"/> Concrete |
| <input type="checkbox"/> Other | |

b) What is the main construction material of the roof?

- | | |
|---|--|
| <input type="checkbox"/> Tile | <input type="checkbox"/> Slate |
| <input type="checkbox"/> Asbestos | <input type="checkbox"/> Asphalt |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Corrugated iron |
| <input type="checkbox"/> Felt on timber | <input type="checkbox"/> Fibre glass |
| <input type="checkbox"/> Metal | <input type="checkbox"/> Stramit |
| <input type="checkbox"/> Thatch (reed or fibre) | <input type="checkbox"/> Timber |
| <input type="checkbox"/> Turnerised | <input type="checkbox"/> Woodwork construction |
| <input type="checkbox"/> Glass or plastic | <input type="checkbox"/> Shingle |
| <input type="checkbox"/> Other | |

c) In what capacity is the home used?

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Permanent home | <input type="checkbox"/> Holiday home |
| <input type="checkbox"/> Let to others | <input type="checkbox"/> Weekday home |
| <input type="checkbox"/> Weekend home | <input type="checkbox"/> Other |

Is the home:

d) solely occupied by you and members of your household?

- Yes No

Frequency of occupancy

- regularly occupied
- regularly unoccupied for 4 days or more
- unoccupied for 30-60 consecutive days
- unoccupied for more than 60 consecutive days

e) used for business purposes?

- | | |
|--|--|
| <input type="checkbox"/> No office use | <input type="checkbox"/> Office use with no visitors |
| <input type="checkbox"/> Office use with visitors | |
| <input type="checkbox"/> Registered childminding (1 to 3 children) | <input type="checkbox"/> Registered childminding (4+ children) |
| <input type="checkbox"/> Unregistered childminding (1 to 3 children) | <input type="checkbox"/> Unregistered childminding (4+ children) |
| <input type="checkbox"/> Other business type | |

f) self-contained with separate lockable entrances and no shared facilities under the sole control of you or members of your household?

- Yes No

g) in a good state of repair, free from damage of any kind and maintained in this state?

- Yes No

Has the home or its surrounding area:

a) ever suffered from subsidence, landslip, heave, coastal or river erosion?

- Yes No

b) ever been affected by flood or have you been advised that they are susceptible to flood?

- Yes No

2 Property details (continued)

Details of the household

Have you, or any member of your household:

a) been declared bankrupt or been the subject of any bankruptcy proceedings?

Yes No

b) been refused insurance, had any cover cancelled or had any special terms applied by any insurer?

Yes No

c) made an insurance claim or suffered a loss within the last 5 years, whether insured or not? If more than one claim, please specify on a separate sheet.

Yes No

If yes, please complete the following:

Date of claim or loss:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Reason for claim (eg burglary)

Amount claimed for

£

Section of policy claimed against:

Buildings Contents
 Personal possessions Not insured
 Legal expenses

Claim status

Settled Pending No claim made

d) been convicted of or cautioned with (or charged but not yet tried with) any criminal offence (excluding motoring convictions)? ¹

Yes No

If yes, please fill in the following:

Which member of the household

Conviction date

Type (eg fraud)

Fine

Sentence type (eg imprisonment or fine)

Length of sentence

If you or any member of your household has more than one conviction, please specify on a separate sheet.

¹ Where a conviction is spent under the Rehabilitation of Offenders Act 1974, you need not advise us of this.

3 Buildings insurance

Complete if required.

i) Our Peace of Mind buildings insurance provides an unlimited sum insured. If, however, your property is non-standard (see Section 2), or has more than 6 bedrooms, you must specify the sum insured:

£

ii) Please select your voluntary excess by ticking the appropriate box ²

£0 £50 £100 £150 £200
 £250 £300 £350 £400

Extended accidental damage option

Do you require extended accidental damage cover for your buildings?

Yes No

For further information please refer to the policy booklet which is available on request.

² There is a compulsory £75 excess for all buildings and buildings extended accidental damage claims. For subsidence, ground heave and landslip claims, the compulsory excess is £1,000. Compulsory excesses are in addition to any voluntary excess selected and any excess applied by the insurer.

4 Contents insurance

Complete if required.

i) Our Peace of Mind contents insurance provides an unlimited sum insured. If, however, your home has 6 or more bedrooms, the amount of contents cover must be specified (minimum amount £35,000)

£

Peace of Mind contents insurance provides cover for valuables, eg jewellery and watches.

If you require more than £10,000 of valuables cover, please specify the amount

£

If any individual valuable kept within the home is worth more than £1,000, this needs to be detailed on your policy. Please complete the item specification section on the following page.

ii) Please select your voluntary excess by ticking the appropriate box ³

£0 £50 £100 £150 £200
 £250 £300 £350 £400

Extended accidental damage option

Do you require extended accidental damage cover for your contents?

Yes No

For further information please refer to the policy booklet which is available on request.

³ There is a compulsory £75 excess for all contents and contents extended accidental damage claims. Compulsory excesses are in addition to any voluntary excess selected and any excess applied by the insurer.

7 Data protection statement

Please read carefully before signing and dating this application form. If this application is made in joint names this section applies to each person separately.

Whether or not I become a customer, you may share and use all the information I give to you Santander UK plc and the underwriters or you hold on me including information on transactions on the account, with the group of companies to which you belong (the Santander Group), your associated companies, service providers or agents who may be located in other countries.

I understand that you will make sure that my information is only used in accordance with your instructions and your own strict policies on confidentiality. If you transfer my information to another country, you will also make sure that it is given the same levels of protection as required under the UK Data Protection Act.

I agree that you may use my information in this way for insurance administration. For this purpose, you may pass the information to selected third parties and reinsurers. I agree to you processing personal data including sensitive personal data about me and other people who may be insured under the contract. I understand that all personal data I give must be accurate. I confirm that I am allowed to give you information about any joint applicant, partner or spouse or third party and I have the specific permission of those other people who are insured to give you their personal data. I give you my permission for you to check the information I give, including checking whether I have criminal convictions in the event of a claim.

I understand all information, including sensitive personal data relating to convictions, given by individual policyholders may be made available to all policyholders named on the policy.

I agree that you may use my information for administration purposes and to:

- Provide and run the account or service I have applied for and develop and improve your products and services.
- Identify and let me know by post, phone or electronic media (including email and SMS) of products or services, which your group of companies and its associated companies think may interest me. (If I am over 18, when deciding whether to provide me with details of a credit product you may search the files of credit reference agencies, who will not make a record of this search available to other lenders who search my file.)
- Invite me to take part in market research surveys.

Where I indicated, when applying, that I did not want to receive such marketing information or take part in market research, I understand that you will respect my wishes. Unless I have said otherwise, by continuing with this application, I agree to you contacting me using any of the methods shown above.

I agree to you asking for information from other insurers to check the answers I have provided and I give my permission for the giving of such information for such purposes.

Before you can set up my policy, you will check my details with fraud prevention agencies, and may make searches at credit reference agencies who will supply you with information including information from the electoral register, for the purposes of verifying my identity. Scoring methods may be used to verify my identity. A record of this process will be kept that may be used to help other companies to verify my identity. If I give you false or inaccurate information and fraud is identified, details will be sent to fraud prevention agencies. Law enforcement agencies may access and use this information.

You and other organisations may search and use the records held by credit reference and fraud prevention agencies about me and my financial associates or partner/spouse and others in my household, to prevent crime, fraud and money laundering and for example:

- to check details provided on applications for credit and credit related or other facilities;
- to verify my identity if I or my financial associate apply for other facilities;
- to help make decisions about credit and credit related services, insurance proposals and claims, and all types of facilities for me, my financial associate or partner/spouse and other members of my household;
- to check the operation of credit and credit related accounts and to manage accounts and facilities, including tracing debtors and recovering debt;
- to help make decisions about job applicants and employees; and
- to undertake statistical analysis and system testing.

You and other organisations may search and use from other countries the information recorded at fraud prevention agencies. Further information on the credit reference agencies and fraud prevention agencies that you use is available by telephoning 0845 602 0319.

You may also give essential information to others where this is needed to run and/or renew my policy and to regulatory bodies for the purposes of monitoring and/or enforcing the insurer's compliance with any regulatory rules or codes. You will keep information about me after my insurance has expired. I understand I have the right to see certain records you hold about me if I pay a fee and I can get an information sheet explaining my rights by telephoning the Customer Service Helpline detailed in the policy.

8 Important notes

Please read carefully before signing this application form.

Claims and Underwriting Exchange Register

Insurers pass information to the Claims and Underwriting Exchange Register, run by Insurance Database Services Ltd (IDS Ltd). The aim is to help us to check information provided and also to prevent fraudulent claims. When we deal with your request for insurance, we may search the register. When you tell us about an incident (such as a fire, water damage or theft) which may or may not give rise to a claim, we will pass information relating to it to the register. You can ask us for more information about this. You should show this notice to anyone who has an interest in the property insured under the policy.

Complaints

If the insurer cannot resolve your complaint and you remain dissatisfied or the insurer has not issued a final response letter within 8 weeks of you first complaining, you can refer this to the Financial Ombudsman Service. The Ombudsman's address is: Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR. None of the above affects any rights you may have to take action against the insurers.

The law

There is a choice of law for this insurance, but unless we agree otherwise, the law for that part of the UK where you live at the start date will apply.

Your duty of disclosure

You must disclose any facts known to you which are likely to affect the insurer's decision to accept the risk of insurance (and, if so, on what terms). You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance. If you are unsure as to whether to disclose any information, do not hesitate to contact us.

You do not need to disclose convictions regarded as 'spent' under the Rehabilitation of Offenders Act 1974. Should you have any doubt about what you should disclose, do not hesitate to contact us.

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce liability under the contract in respect of a claim or may cancel the contract. If your disclosure proved to be fraudulent, the insurer may also have the option of voiding the contract from the beginning and reclaiming any money paid out for previous claims.

The type of insurance service we provide

This policy is underwritten by CGU Underwriting Ltd, registered in England number 94405. Registered office: St Helens, 1 Undershaft, London EC3P 3DQ. A member of the Aviva Group. The family legal protection option is insured by Ultimate Insurance Solutions Limited on behalf of certain underwriters at Lloyd's. The insurers are authorised and regulated by the Financial Services Authority and are covered by the Financial Services Compensation Scheme. You may be entitled to compensation from the scheme if the insurers cannot meet their obligations. Further information about compensation arrangements is available from the Financial Services Compensation Scheme.

9 Declaration

This section MUST be completed. If you require joint cover both customers must sign the form. If this application is made in joint names this section applies to each person separately.

I confirm that I have read and understood the data protection statement and Important notes.

I understand that, if appropriate, you will pass the information on this form and about any incident I may give details of to IDS Ltd so that they can make it available to other insurers. I also understand that, in response to any searches you may make in connection with this application or any incident I have given details of, IDS Ltd may pass you information it has received from other insurers about other incidents involving anyone insured under the policy.

I have checked all the details contained within this application form and declare that everything is correct to the best of my knowledge and believe that no material fact has been withheld or suppressed.

I agree that this shall form the basis of the contract between me and CGU Underwriting Limited, together with Ultimate Insurance Solutions Limited on behalf of certain underwriters at Lloyd's, if the family legal protection option is selected.

First customer signature

Date

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Second customer signature

Date

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

10 Checklist

Have you:

- Fully completed 'Your details'?
- Fully completed 'Property details'?
- Provided full details of the insurance cover you require within 'Buildings insurance' and/or 'Contents insurance'?
- Provided bank/building society details?

Direct Debit forms

Mortgage

Instruction to your bank or building society to pay by Direct Debit



PART OF THE SANTANDER GROUP

8 0 9 1 0 3

Name and full postal address of your bank or building society

To: The Manager

Bank/building society

Postcode

Name of account holder(s)

Bank or building society sort code

Bank or building society account number

Banks and building societies may not accept Direct Debit instructions for some types of account.

To be detached by our Mortgage Service Centre only

Originator's identification number

Our mortgages name and address

Postcode

Mortgage account number (Our office use only)

Instruction to your bank or building society

Please pay Santander UK plc Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit guarantee. I understand that this instruction may remain with Santander UK plc and, if so, details will be passed electronically to my bank or building society.

Signature(s)

Date

DD MM YYYY



Paymentcare

Instruction to your bank or building society to pay by Direct Debit

Santander Paymentcentre, PO BOX 230, Borehamwood, WD6 2ZX.



Reference number (for office use only)

Please complete parts 1-5 and return with your application form.

1. Full name and address of your bank or building society

To the Manager

Address

Postcode

Banks and building societies may not accept Direct Debit instructions for some types of account.

2. Name of account holder(s)

Originator's identification number

8 8 0 0 2 2

3. Sort code

4. Account number

5. Instructions to your bank or building society

Please pay Santander Paymentcare Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Santander Paymentcare and, if so, details will be passed electronically to my bank or building society.

Signature(s)

Both account holders to sign if applicable

Date DD MM YYYY



Home insurance

Instruction to your bank or building society to pay by Direct Debit



Reference number (for office use only)

Please complete parts 1-5 and return with your application form.

1. Full name and address of your bank or building society

To the Manager

Address

Postcode

Banks and building societies may not accept Direct Debit instructions for some types of account.

2. Name of account holder(s)

Originator's identification number

9 7 1 4 5 1

3. Sort code

4. Account number

5. Instructions to your bank or building society

Please pay Santander General Insurance Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Santander General Insurance and, if so, details will be passed electronically to my bank or building society.

Signature(s)

Both account holders to sign if applicable

Date DD MM YYYY

