

**Bluestone.**  
mortgages

# Transfer of Equity Form



powered by  
 **shawbrook**

# Section 1

## Applicant details

Select one of the following:	
Add new applicant	<input type="checkbox"/>
Remove applicant	<input type="checkbox"/>
Add and remove applicant	<input type="checkbox"/>

## Fee details

Non refundable application fee

Legal fee (for office use only)

# Section 2

## Applicant details

Both parties need to complete if joint mortgage. Please complete up until section 2 & 3 if you are looking to be removed.

### Applicant 1

Title

First Name

Middle Name

Surname

Previous/Maiden Names

Date of Birth

### Applicant 2

Title

First Name

Middle Name

Surname

Previous/Maiden Names

Date of Birth

Relationship to Applicant 1

# Section 3

## Personal details

Address

  
 Postcode   

If you've lived at this address for less than 3 years, please provide previous address details below

Phone  Mobile

Email

Time at this address

Address

 Postcode 

Address

  
 Postcode   

If you've lived at this address for less than 3 years, please provide previous address details below

Phone  Mobile

Email

Time at this address

Address

 Postcode 

(Please sign the declaration outlined on page 16)

Only complete if looking to remain/be added

Expected Retirement Age

Marital Status

Number of Dependants

Ages of Dependants (If any)

Nationality

Are you currently living in the UK?  
 Yes  No

Expected Retirement Age

Marital Status

Number of Dependants

Ages of Dependants (If any)

Nationality

Are you currently living in the UK?  
 Yes  No

# Section 4

## Income details

Please complete if looking to remain on the mortgage

### Applicant 1

If you're employed:

Job Title

Employer Name

Address

Postcode

Phone

Email

Employment basis

Full Time  Part Time

Currently on probation?

Yes  No

What type of Business is it?

How long have you worked there?

Permanent position

Yes  No

Employee or works number

Contact name for employment reference

Do you own any shares in the business?

Yes  No

If yes, what percentage of shareholding

Gross basic salary

Overtime

Bonus

Comission

Other income

**Total**

Do you think your income will change in the foreseeable future?  Yes  No

**If yes, please provide full details in the additional information section at the end of this form.**

### Applicant 1

If you're a Contractor:

Which industry do you work in?

Contract type

Current contract length

Current contract expiry date

Time contracting

Time in this industry

Day rate

Who is contract with?

Occupation

Limited company name

Company registration number

Do you think your income will change in the foreseeable future?  Yes  No

**If yes, please provide full details in the additional information section at the end of this form.**

# Section 4 Continued

## Income details

If you're Self Employed or a Director:

Self Employment Type

Job Title

What type of Business is it?

Business Name

Address

Postcode

Phone

Email

Time trading

Company registration number

Shareholding

Your share of profit for the last 3 years:

Average share of net profit

Do you think your income will change in the foreseeable future?  Yes  No

**If yes, please provide full details in the additional information section at the end of this form.**

# Section 4 Continued

## Accountant details (if applicable)

### Applicant 1

Do you use an Accountant  Yes  No

Accountant Name

Address

Postcode

Phone

Fax

Email

### Other Income

Do you get income from anywhere else?  Yes  No

If yes confirm source, amount and frequency

# Section 4 Continued

## Income details

Only applicable if adding a party to the mortgage

### Applicant 2

Employment Type

If you're employed:

Job Title

Employer Name

Address

Postcode

Phone

Email

Employment basis

Full Time  Part Time

Currently on probation?

Yes  No

What type of Business is it?

How long have you worked there?

Permanent position

Yes  No

Employee or works number

Contact name for employment reference

Do you own any shares in the business?

Yes  No

If yes, what percentage of shareholding

Gross basic salary

Overtime

Bonus

Comission

Other income

**Total**

Do you think your income will change in the foreseeable future?  Yes  No

**If yes, please provide full details in the additional information section at the end of this form.**



# Section 4 Continued

## Income details

### Applicant 2

If you're a Contractor:

Which industry do you work in?

Contract type

Current contract length

Current contract expiry date

Time contracting

Time in this industry

Day rate

Tax code

Who is contract with?

Occupation

Limited company name

Company registration number

Do you think your income will change in the foreseeable future?  Yes  No

**If yes, please provide full details in the additional information section at the end of this form.**

If you're Self Employed or a Director:

Self Employment Type

Job Title

What type of Business is it?

Business Name

Address

Postcode

Phone

Email

Time trading

Company registration number

Shareholding

Your share of profit for the last 3 years:

Average share of net profit

Do you think your income will change in the foreseeable future?  Yes  No

**If yes, please provide full details in the additional information section at the end of this form.**

# Section 4 Continued

## Income details

### Applicant 2

Do you use an Accountant  Yes  No

Accountant Name

Address

Postcode

Phone

Fax

Email

### Other Income

Do you get income from anywhere else?  Yes  No

If yes confirm source, amount and frequency

# Section 5

## Credit History

### Applicant 1

Have you ever had a CCJ or Default?  Yes  No

If yes:

Type	Amount	Date Registered	Date Settled	Still Outstanding?
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No

Have you ever been declared bankrupt or entered into an IVA?  Yes  No

If yes:

Type  Date registered  dd/mm/yy Date discharged  dd/mm/yy Still outstanding?  Yes  No

Have you ever had a property repossessed?  Yes  No

Number of mortgage or rent arrears in the last 12 months

Number of mortgage or rent arrears in the last 13-24 months

Number of unsecured credit arrears in the last 6 months:

Number of unsecured credit accounts over £500 currently in arrears:

**Please tell us the circumstances to help us understand why you've had payment problems in the additional information section at the end of this form.**

# Section 5 Continued

## Credit History

### Applicant 2

Have you ever had a CCJ or Default?  Yes  No

If yes:

Type	Amount	Date Registered	Date Settled	Still Outstanding?
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No
	£	dd/mm/yy	dd/mm/yy	<input type="radio"/> Yes <input type="radio"/> No

Have you ever been declared bankrupt or entered into an IVA?  Yes  No

If yes:

Type  Date registered  dd/mm/yy Date discharged  dd/mm/yy Still outstanding?  Yes  No

Have you ever had a property repossessed?  Yes  No

Number of mortgage or rent arrears in the last 12 months

Number of mortgage or rent arrears in the last 13-24 months

Number of unsecured credit arrears in the last 6 months:

Number of unsecured credit accounts over £500 currently in arrears:

**Please tell us the circumstances to help us understand why you've had payment problems in the additional information section at the end of this form.**

# Section 6

## Monthly Expenditure

(Applicant 1 (& Applicant 2 combined if adding a party to the mortgage))

### Applicant 1

#### Basic Essential Expenditure

##### Insurances

Mortgage Endowment / Mortgage PPI	£
Building and Contents Insurance	£
Pension and Life Insurance	£
Other Insurances	£

##### Utilities

Council Tax (Rates in NI)	£
Gas	£
Electricity	£
Water (N/A in Scotland or NI)	£
Other Utilities (coal, oil, calor gas)	£

##### Other Basic Essential Expenditure

TV License	£
Magistrates' or Sheriff Court Fines	£
Childcare Costs	£
Adult Care Costs	£
Telephone	£
Broadband	£
Mobile Phone	£
Housekeeping	£
Groceries	£

##### Essential Travel (work,school,shopping etc)

Public Transport	£
Car Insurance	£
Vehicle Tax	£
Fuel (Petrol, Diesel, Oil etc)	£
MOT and Car Maintenance	£
Breakdown or Recovery	£
Parking Charges or Tolls	£
<b>Total Basic Essential Expenditure</b>	£

#### Basic Quality of Living Costs

Cleaning and Toiletries	£
Clothing and Footwear	£
Nappies and Baby Items	£
Newspapers and Magazines	£
Cigarettes, Tobacco and Sweets	£
Alcohol	£
Laundry and Dry Cleaning	£
Pet Food	£
Unexpected / Emergency (e.g. Boiler repairs)	£
Holiday Allowance (Holiday cost and spending)	£
Household Goods and Repair	£
Other Housekeeping	£
Leisure and Entertainment	£
<b>Total Basic Quality of Living Costs</b>	£

Monthly alimony or maintenance payments

£

Monthly child support payments

£

Monthly school fee payments

£

Ground rent and service charged (if leasehold property)

£

**Total committed expenditure (exclude any to be repaid)**

£

# Section 6 Continued

## Monthly credit commitments for applicant 1

(Applicant 1 (& Applicant 2 combined if adding a party to the mortgage))

Please list any credit or comitted expenditure (ignore if less than 6 months remaining)

Lender Name	Balance	Monthly Payment	Secured?	Term Remaining	Type of credit	To be repaid from Additional Arrears?
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No
	£	£	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> Yes <input type="radio"/> No

# Section 7

## Property Details

Please tell us if anyone else over the age of 17 years will be living live in the property

Full name

Age

Relationship to applicants

**(Continue in the additional information if necessary)**

# Section 8

## Solicitor details

# Section 9

## Any additional details

**IF THERE IS ANYTHING CONTAINED IN THIS DOCUMENT THAT YOU DO NOT UNDERSTAND OR THAT YOU NEED CLARIFYING, PLEASE SPEAK TO YOUR INTERMEDIARY BEFORE SIGNING THIS DOCUMENT.**

**I UNDERSTAND THAT MY HOME MAY BE REPOSSESSED IF I DO NOT KEEP UP REPAYMENTS ON MY MORTGAGE**

I make this declaration, and confirm that the above matters are true:

Full Name Applicant 1	<input type="text"/>	Signed	<input type="text"/>	Date	<input type="text"/>
Full Name Applicant 2	<input type="text"/>	Signed	<input type="text"/>	Date	<input type="text"/>