

Income & Expenditure Form

- Please complete all relevant sections
- Should you require assistance in completing this form we can arrange for a field agent to visit you to discuss payment difficulties you are experiencing and to help with completing this form (please note a charge may apply)

Section A - Contact Details

Account Number	
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Customer One Full Name	Customer Two Full Name (if joint)

Property Address

Correspondance Address

Customer One	Customer Two (if joint)
Home Telephone	Home Telephone
Mobile	Mobile
Email	Email
Work	Work

Please tick the number you would like us to contact you on

Section B - Income - What money do you receive?

Please provide details for both parties (if joint account)

	Customer One			Customer Two		
Occupation						
Fulltime		Part Time			Part Time	
Income Received	£	£		£	£	
	Monthly	Weekly		Monthly	Weekly	
Wage (Net)	£			£		
Child Benefit?	Yes	No		Yes	No	
Other Benefit (Working tax credit, PIP, Carers allowance, Universal credit)	£			£		
CSA/Maintenance	£			£		
Pensions	£			£		
Other (Student grant, board or lodging, non dependent contributions)	£			£		
Savings + Investments*	Yes	No		Yes	No	
*If yes, please provide details						

Section C - Outgoings - Your living costs

Home & Contents		
	Monthly	Arrears (if applicable)
Mortgage	£	£
Second Mortgage (if	£	£

applicable)		
Ground Rent Service Charge	£	£
Council Tax	£	£
Insurance (Building, Contents, Pet Insurance, Life Insurance)	£	£
Mortgages Endowment	£	£

Utilities		
Gas	£	£
Electric	£	£
Water	£	£
Other fuel	£	£

Communications		
Home Phones	£	£
Mobiles	£	£
TV Packages	£	£
TV License	£	£

Food & Housekeeping	
	Monthly
Groceries	£
Alcohol	£
Meals at Work	£
Laundry/Dry Cleaning	£
School Meals	£
Smoking Products	£

Transport & Travel

Car Insurance	£
Road Tax	£
Fuel/Parking	£
MOT/Ongoing Maintenance	£
Vehicle Lease	£
Vehicle Hire	£
Public Transport	£

Personal Costs	
Clothing & Footwear	£
Toiletries	£
Hairdresser	£

Food & Housekeeping	
	Monthly
Groceries	£
Alcohol	£
Meals at Work	£
Laundry/Dry Cleaning	£
Newspaper/Magazine subscriptions	£

Care & Health Costs	
	Monthly
Prescription/Medicine	£
Dentistry	£
Opticians	£
Child Care	£
Child Maintenance	£
Child Pocket Money	£
After School Club/School Trips	£

Other Essential	
Criminal Fines	£
Loan from Family Member of Friends	£

Section D - Who do you owe money to?

Company/ Creditor	Monthly Payment	Balance Outstanding	Agreed Reduced Monthly Payment	Arrears (if applicable)
	£	£	£	£
	£	£	£	£
	£	£	£	£
	£	£	£	£
	£	£	£	£
	£	£	£	£

- If you have further creditors please use separate sheet
- Your mortgage is a priority debt and your home, we recommend you approach your creditors, with a view to reducing your monthly payments if you have not already done so.

Section E - Other information we need to be able to assist

Other Occupancies	
How many people reside in the property?	
Please provide ages and relationships?	

Sales or Property		
If you have a property on the market please include the following details		
Is the property being marketed?	Yes	No
Is the property on Rightmove/Zoopla?	Yes	No
What is the marketing price?	£	
How long has the property been on the market?	DD/MM/YYYY	

Section F - Anything else we need to know

Section G - Declaration

The information contained above is an accurate reflection of my current circumstances.

Customer One	Date

Customer Two	Date

Get in touch if you need this document in Braille, large print or audio tape.

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