

Bridging Enquiry Form Please email the completed form to: bridging@ariafinance.co.uk

01. Application Details

Broker											
Broker Name											
Broker Company											
Borrowing Entity	Pers	sonal 🔘	Ltd 🔾	Trust	LLP	Partnership (
Where lending is to a Ltd Co/LLP please provide name of company											
Mortgage Purpose	Purchase		Remortgage 🔵	Transfer of E	quity Se	econd Charge					
Loan Details											
Loan amount / LTV required											
Purpose of loan											
Loan Term Required			Required co	mpletion date	D D	M M Y Y					
Interest payment type			Rolled/	Retained (Service	Serviced Monthly					
Reason for bridging being re	quired										
Proposed exit route (sale of some other property, remortgage,	- 1	ty, sale of									
Property Details											
Security Address											
Property Value/Purchase Price											
Current Mortgage Balance (Remortgage)			Current Lend (Remortgage								
Current monthly mortgage payment			Applicant exproperty?	ver resided in	Yes 🔾	No 🔾					
BTL Type (Flat/House/Studio)			Leas	ehold 🔾	Fre	eehold 🔾					
Above commercial unit?	Yes 🔾	No 🔾	High rise? (h stories, is the floor is secur	ere a lift, what							
Ex Local?	Yes 🔾	No 🔾	EPC Rating								
Multi unit? (how many units in block and size)			Date Purcha	sed	D D	M M Y Y					
Rental Income	£		Currently let	?	Yes 🔾	No 🔾					
Tenant type (working professionals, DSS tenants, etc)			Single AST,	Multiple AST's?							
Where property requires any of cost and brief overview of		rovide deta	ils								



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02. Applicant Details

Applicant 1							
Full Names							
Date of Birth	D	D	M	M	Υ	Υ	
Address (3 years address history)							
Personal Income	£						
Occupation							
Contact Tel. Number							
How many BTL properties owned?							
How many commercial properties owned?							
How many years letting experience?		BTL		Commercial			
Previous experience with refurbishment projects?		Yes 🔾		No 🔾			
Does applicant own a residential property?	Yes O No O						
Residential status	Homeowner Tenant Living with Family			t Ŏ			

Applicant 2						
Full Names						
Date of Birth	D	D	M	M	Υ	Υ
Address (3 years address history)						
Personal Income	£					
Occupation						
Contact Tel. Number						
How many BTL properties owned?						
How many commercial properties owned?						
How many years letting experience?		BTL Comme			nme	rcial
Previous experience with refurbishment projects?		Yes No (No C	
Does applicant own a residential property?	Yes No No					
Residential status		Livi		Т	owne enan	t Ŏ

03. Ex-Pat

Applicant 1	
Country of Residency	
Nationality	
Occupation	
Income (UK taxed and UK equivalent)	
Number of UK Properties Owned	
Number of properties with mortgages for more than 12 months	

Applicant 2	
Country of Residency	
Nationality	
Occupation	
Income (UK taxed and UK equivalent)	
Number of UK Properties Owned	
Number of properties with mortgages for more than 12 months	



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U4. Ad	ditiona	I Information

Deposit source (Purchases)	
Credit history – any CCJs/ Defaults/missed payments – if yes provide details	
Additional information – please provide any further details relating to the enquiry	

I confirm that the information contained within this application is true and correct to the best of my knowledge.

I have the client's authority to share this information.

I have advised the applicant(s) that a formal credit search may be carried out in their name(s) with credit reference agencies who will record details of the search and may create a financial association with those with whom they are linked financially. The applicant(s) has/have given authority to my company to instruct Aria Finance to carry out a formal credit search and/or to instruct others to do so in connection with obtaining finance on their behalf.

If you do not have the applicants authority to carry out a credit search, please do not sign below. However you can still send the completed form back to us and we will provide indicative terms, which will be based on the assumption customer has clear credit, unless otherwise stated.

Signed by Broker or Applicant									
Name		Date	D	D	M	M	Υ	Υ	
Signature									