



Secured Bridging Loan Application

Please Complete For All Directors & Please Note That An Application Will Not Proceed If There Are Blanks. It Is VITAL To Complete All Parts

DIRECT APPLICATION O	PR BROKER *
I AM APPLYING DIRECT FOR MY BUSINESS	I AM A PROFESSIONAL
APPLICATION TYPE *	
UK BRIDGING LOAN	EUROPEAN BRIDGING LOAN
BROKER / INTRODUCER	DETAILS (If Applicable)

NAME COMPANY

BROKER / INTRODUCER CONTACT INFORM	1ATION (If Applicable)
CONTACT NUMBER EM	AIL
Applicant *	
Sole Proprietor Partnership	Ltd Company
Is This A Purchase Or A Refinance What Type Of Transaction Is This	
Please Select ~	
It Is Very Helpful To Know What We Are Assisting With At	The Outset
What Is The Value Of The Security / Proper	ty *
£	
This Is The Full Open Market Value Of The Property As It	Vill Be Now, Or When We Complete The Loan
Amount Of NET Loan Required (the cash ye deductions) *	ou need to receive after
£	
Please Enter The Amount You Require. Please Use Commas.	
Term Of Loan Required *	

We Will Lend From 1 Month To 18 Months	

If Refinance, Please Advise Of Any Ext Who With, The Balance Outstanding A Loan *	isting Loans On The Property Stating and The True Current Situation With Each
	//
Please Also Include Any Additional Land Registry C	harges Or Debentures And Their Balances Outstanding
Full Legal Name Of Business Or Borro	wing Entity *
If The Business Is An Individual, Please Put Full Name	
Registered Address For Business Or B	orrowing Entity *
Address 1	
Address 2	
City	County
Post Code	

ALL DIRECTORS / PARTERS - PERSONAL GUARANTEES

Regardless of loan size, every Director or Partner with 25% or more of the shares in the business will need to complete the next part and ultimately sign a personal guarantee. We can usually obtain PG insurance if Directors or Partners wish to indemnify themselves. It is normal in year one to obtain insurance for up to 80% of the liability.

1 - First (Maiı	n) Director / Partner F	or Purpose Of Loan	*
Title	First Name	Middle Name	Last Name
Date Of Birth	*		
DD-MM-YY	ΥΥ		
Must Be Included			
This Director / Pa Onboarded	rtner Will Be Our Key Contac	et If	
Mobile Numb	er For First (Main) Di	rector / Partner *	
For ID Purposes (Only.		
Residential S	tatus *		
Please Selec	et	~	
THIS IS NEEDED I	FOR THE PERSONAL GUARA	NTEE SCORE PLEASE DO N	NOT OMIT

How Long At This Address?

Please Complete Any Pre	vious Address In I	Last Three	Years In The Mis	c Section	Of This Form	
Home Address For	Main Partner	/ Direct	or*			
Address 1						
Address 2						
City			County			
Post Code						
Please List Any Bac CCJs/Bankruptcy/I						
NOTE - WE ARE HIGHLY : MATERIALISE LATER ON			BLEMS. ANY INA	CCURAC	Y HERE WILL	
2 - Second Directo	r / Partner					
Title	First Name	ı	Middle Name		Last Name	
Date Of Birth For S	econd Partne	er / Direc	tor			
DD-MM-YYYY		₽ D				

Must Be Included

Mobile Number For Second Director / Partner For ID Purposes Only. Residential Status For Second Partner / Director Please Select THIS IS NEEDED FOR THE PERSONAL GUARANTEE SCORE. PLEASE DO NOT OMIT. How Long At This Address For Second Partner / Director Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form Home Address For Second Partner / Director Address 1 Address 2 City County	Unique Email For Second Director / Part	ner
Mobile Number For Second Director / Partner For ID Purposes Only. Residential Status For Second Partner / Director Please Select THIS IS NEEDED FOR THE PERSONAL GUARANTEE SCORE, PLEASE DO NOT OMIT. How Long At This Address For Second Partner / Director Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form Home Address For Second Partner / Director Address 1 Address 2 City County		
For ID Purposes Only. Residential Status For Second Partner / Director Please Select THIS IS NEEDED FOR THE PERSONAL GUARANTEE SCORE. PLEASE DO NOT OMIT. How Long At This Address For Second Partner / Director Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form Home Address For Second Partner / Director Address 1 Address 2 City County	Must Be Included	
Residential Status For Second Partner / Director Please Select THIS IS NEEDED FOR THE PERSONAL GUARANTEE SCORE. PLEASE DO NOT OMIT. How Long At This Address For Second Partner / Director Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form Home Address For Second Partner / Director Address 1 Address 2 City County	Mobile Number For Second Director / Pa	artner
Residential Status For Second Partner / Director Please Select THIS IS NEEDED FOR THE PERSONAL GUARANTEE SCORE. PLEASE DO NOT OMIT. How Long At This Address For Second Partner / Director Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form Home Address For Second Partner / Director Address 1 Address 2 City County		
Please Select THIS IS NEEDED FOR THE PERSONAL GUARANTEE SCORE. PLEASE DO NOT OMIT. How Long At This Address For Second Partner / Director Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form Home Address For Second Partner / Director Address 1 Address 2 City County	For ID Purposes Only.	
THIS IS NEEDED FOR THE PERSONAL GUARANTEE SCORE. PLEASE DO NOT OMIT. How Long At This Address For Second Partner / Director Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form Home Address For Second Partner / Director Address 1 Address 2 City County	Residential Status For Second Partner /	Director
How Long At This Address For Second Partner / Director Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form Home Address For Second Partner / Director Address 1 Address 2 City County	Please Select	
Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form Home Address For Second Partner / Director Address 1 Address 2 City County	THIS IS NEEDED FOR THE PERSONAL GUARANTEE S	CORE. PLEASE DO NOT OMIT.
Address 1 Address 2 City County	How Long At This Address For Second I	Partner / Director
Address 1 Address 2 City County		
Address 1 Address 2 City County	Please Complete Any Previous Address In Last Three	Years In The Misc Section Of This Form
Address 2 City County	Home Address For Second Partner / Dir	ector
Address 2 City County		
City	Address 1	
City		
	Address 2	
	City	County
	Post Code	

	IIGHLY SYMPATHETIC TO PA ER ON IN THIS PROCESS	AST PROBLEMS. ANY INAC	CURACY HERE WILL
3 - Third Dire	ctor / Partner		
Title	First Name	Middle Name	Last Name
Date Of Birth	For Third Partner / D	Director	
DD-MM-YYY	Ύ	tt	
Must Be Included			
Unique Email	For Third Director / F	Partner	
Must Be Included			
Mobile Numb	er For Third Director	/ Partner	
For ID Purposes O	nly.		
Residential S	tatus For Third Partn	er / Director	
Please Selec		~	
			NOT ON
THIS IS NEEDED F	OR THE PERSONAL GUARA	ANTEE SCORE. PLEASE DO I	NOT OMIT.

Please Complete Any Previous Address In Last Three Years In The Misc Section Of This Form

Home Address For Third Partner / Dir	rector
Address 1	
Address 2	
City	County
Post Code	
Please List Any Bad Credit In Last 6 \ CCJs/Bankruptcy/Defaults Both Secu	
NOTE - WE ARE HIGHLY SYMPATHETIC TO PAST MATERIALISE LATER ON IN THIS PROCESS	PROBLEMS. ANY INACCURACY HERE WILL
4 - Fourth Director / Partner	
Title First Name	Middle Name Last Name
Date Of Birth For Fourth Partner / Dir	ector
DD-MM-YYYY	
Must Be Included	
Unique Email For Fourth Director / Pa	rtner

flust Be Included	
Mobile Number For Fourth	n Director / Partner
For ID Purposes Only.	
Residential Status For Fou	urth Partner / Director
Please Select	•
THIS IS NEEDED FOR THE PERSON	NAL GUARANTEE SCORE. PLEASE DO NOT OMIT.
How Long At This Address	s For Fourth Partner / Director
Places Complete Any Provious Ade	drace In Last Three Years In The Miss Section Of This Form
Please Complete Any Previous Ado	dress In Last Three Years In The Misc Section Of This Form
Please Complete Any Previous Add Home Address For Fourth Address 1	
Home Address For Fourth	
Home Address For Fourth Address 1	
Home Address For Fourth	
Home Address For Fourth Address 1	
Home Address For Fourth Address 1	
Home Address For Fourth Address 1 Address 2	Partner / Director
Home Address For Fourth Address 1 Address 2	Partner / Director

	ne format for any other directors and include them below. If they are or ouse then they MUST be included.	1
Please List <i>i</i>	Additional Directors Or Partners Here	
o Include Full N	ames, Address, DOB, Email & Mobile, Together With Residential Status & Any Credi	t Fi
	de A Brief Overview Of The Business (if applicable) And The The Loan *	

Please Use This For Any Other Information You Please Input NONE MAIN SECURITY 1 - THIS IS THE AL		
Street Address		
Street Address Line 2		
City Or Town		
	Please Select	~
Post Code	Country	
Please Provide A Description Of Th EG: 4 Bed Detatched, Kitchen, Lou Garden, In Need Of Refurbishment	inge, Dining Room, Double G	
Please Provide Details Of Any Addi Value, Current Debt And If We Are	<u> </u>	al Security Or I

Final Information	& Declaration
Submit my Application	
,	
	ed in this application will be shared with professional lenders
	lit decision and potentially a bridging loan offer. It is may be required
·	ny funds can be released.
to be vermed before an	ry ramas sam se released.
	ed under GDPR with the Information Commissioner and
	ANCES will your private information be passed to any other
party other than the bro	oker, and the lenders under consideration.
This is a business loan	and is not a domestic product and therefore not regulated
•	ion to borrow is with the borrower, and their advisers, and is
-	dvice given by Churchill Private Finance Limited or any
lender.	
The information provi	ided in this application herein are true and correct. I can
-	ner the lead partner or director, or the borrowers
-	ative, and I am duly authorised to submit this application
and duly authorise Cr soft credit checks. *	hurchill Private Finance Limited and any lender to run
Yes	



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