



Loan Application: **DATA CAPTURE**

Loan Reference

Primary Applicant

Primary Property

Application ID

Applicant 1 ID

Applicant 2 ID

Property 1 ID

Property 2 ID

Borrower ID

PRIVACY

For information on how Colenko may use any personal data submitted as part of the application process, please see our privacy notice at www.colenko.com

Thank you for considering Colenko as your partner for Property Finance.

This form is an alternative to submitting an application via our partner portal, to assist applicants who are more comfortable with traditional off-line forms.

How to use this form

You must open this form on your computer using Adobe Acrobat Reader. [Click here to download the free application.](#)



Please complete the form in as much detail as you can. If you have already submitted an Enquiry, we can pre-fill the form with the information provided.



Please send your completed form to borrow@colenko.com. Applicants will be asked to sign an electronic declaration using DocuSign.

Your dedicated underwriter will be happy to help with any questions or support: **020 3920 6150** or borrow@colenko.com.

SECTION 1. BROKER INFORMATION

Broker Contact Details

First Name	<input type="text"/>	Last Name	<input type="text"/>
Mobile	<input type="text"/>	E-mail	<input type="text"/>
DDI	<input type="text"/>		

Broker Firm Details

Company	<input type="text"/>	FRN	<input type="text"/>
Authorisation	<input type="text"/>	Network	<input type="text"/>
Address	<input type="text"/>		

Broker Declaration

I confirm that I am acting (and am authorised by the applicant to act) on behalf of the applicant(s) and have their permission to access their information and supply it to you with this application and any time during the life of the loan. I have advised the applicant that Colenko may carry out a soft credit search as part of their initial underwrite. I confirm that to the best of my knowledge and belief, the information contained in this application is true.

I agree to receive marketing information about new/existing products and services (including email) from time to time, unless I notify you to confirm otherwise.

I understand I have the right to opt out of receiving some or all of the marketing communications you may send me at any time and can do so by emailing you at contact@colenko.com or calling **020 3920 6150**.

SECTION 2. LOAN DETAILS

Summary Details

Loan Product	<input type="text"/>	Sub Product	<input type="text"/>
Purpose of Loan	<input type="text"/>	Exit strategy	<input type="text"/>
Number of Applicants	<input type="text"/>	Applicant Credit Profile	<input type="text"/>
Number of Properties	<input type="text"/>	Legal charge	<input type="text"/>

Facility Details

Gross Facility	<input type="text"/>		
Drawdown Tranche	<input type="text"/>	Net Advance (<i>day 1</i>)	<input type="text"/>
Term (<i>months</i>)	<input type="text"/>	Retained Interest (<i>months</i>)	<input type="text"/>
Quoted Rate (%)	<input type="text"/>	Target Completion Date	<input type="text"/>

Project Summary

Exit Summary

Deposit

Source of Deposit	<input type="text"/>	Held in UK Account?	<input type="checkbox"/> <i>check if yes</i>
Details if not UK	<input type="text"/>		

SECTION 3. PROPERTY 1

Ownership

Title Number

Name of Legal Owner

Ownership Status

Ownership Type

Property Details

Street/#

County

Asset Group

Tenure

Occupied by Owner?

Main Residence?

Town

Postcode

Building Type

Remaining Lease (Years)

Holiday Let HMO

Non-Standard Construction

Valuation

Open Market Value

Gross Development Value

Previous Purchase Price

180 Day Value

Valuation Source

Previous Purchase Date

Refinance Details

Lender(s)

Mortgage (Current)

Payment Status

Mortgage (Ongoing)

Purchase Details

Assumed Purchase Price

Selling Agent/Auction House Details

Purchase Type

Explanation if purchasing at a price below market value

Proposed Works

Undergoing heavy refurbishment/development?

Does the property have a working kitchen and bathroom?

Planning permission in place?

Planning Reference Number

Planning Authority

Summary of proposed works

	<i>Project</i>	<i>Incurred</i>	<i>Outstanding</i>
Build Cost	<input type="text"/>	<input type="text"/>	<input type="text"/>
Professional Fees	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contingency	<input type="text"/>	<input type="text"/>	<input type="text"/>
CIL	<input type="text"/>	<input type="text"/>	<input type="text"/>
S106	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>Beginning</i>	<i>Additional</i>	<i>At completion</i>
Area (sq ft)	<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION 3. PROPERTY 2

Ownership

Title Number

Name of Legal Owner

Ownership Status

Ownership Type

Property Details

Street/#

County

Asset Group

Tenure

Town

Postcode

Building Type

Remaining Lease (Years)

Occupied by Owner?

Main Residence?

Holiday Let HMO

Non-Standard Construction

Valuation

Open Market Value

Gross Development Value

Previous Purchase Price

180 Day Value

Valuation Source

Previous Purchase Date

Refinance Details

Lender(s)

Mortgage (Current)

Payment Status

Mortgage (Ongoing)

Purchase Details

Assumed Purchase Price

Purchase Type

Selling Agent/Auction House Details

Explanation if purchasing at a price below market value

SECTION 4. APPLICANT INFORMATION

Applicant One

First Name (*per passport*)

Last Name

Date of Birth

Known by Other Names?

Marital Status

Nationality

Domicile

UK Residency (*Years*)

N. I. Number

Country of Birth

Mobile

Work Tel

E-mail address

Street/#

Town

County

Postcode

Residential Status

Years at current address

Previous addresses in the last three year

Street/#

Town

County

Postcode

Time at address From: To:

Street/#

Town

County

Postcode

Time at address From: To:

Have you met the applicant face to face? Yes No

Year first met

Applicant Two

First Name (*per passport*)

Last Name

Date of Birth

Known by Other Names?

Marital Status

Nationality

Domicile

UK Residency (*Years*)

N. I. Number

Country of Birth

Mobile

Work Tel

E-mail address

Street/#

Town

County

Postcode

Residential Status

Years at current address

Previous addresses in the last three year

Street/#

Town

County

Postcode

Time at address From: To:

Street/#

Town

County

Postcode

Time at address From: To:

Have you met the applicant face to face? Yes No

Year first met

SECTION 5. CORPORATE BORROWER

Company Name	<input type="text"/>	Company Number	<input type="text"/>
Country of Incorporation	<input type="text"/>	Date of Incorporation	<input type="text"/>
		Year End	<input type="text"/>
Street/#	<input type="text"/>	Town	<input type="text"/>
County	<input type="text"/>	Postcode	<input type="text"/>

Directors / Key shareholders (25%+)

Director?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Shareholding %	<input type="text"/>	Applicant?	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2
First Name	<input type="text"/>			Last Name	<input type="text"/>
Nationality	<input type="text"/>			Date of Birth	<input type="text"/>
Mobile	<input type="text"/>			E-mail	<input type="text"/>
Street/#	<input type="text"/>			Town	<input type="text"/>
County	<input type="text"/>			Postcode	<input type="text"/>

Director?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Shareholding %	<input type="text"/>	Applicant?	<input type="checkbox"/> Applicant 1 <input type="checkbox"/> Applicant 2
First Name	<input type="text"/>			Last Name	<input type="text"/>
Nationality	<input type="text"/>			Date of Birth	<input type="text"/>
Mobile	<input type="text"/>			E-mail	<input type="text"/>
Street/#	<input type="text"/>			Town	<input type="text"/>
County	<input type="text"/>			Postcode	<input type="text"/>

Director?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Shareholding %	<input type="text"/>	Last Name	<input type="text"/>
First Name	<input type="text"/>			Date of Birth	<input type="text"/>
Nationality	<input type="text"/>			E-mail	<input type="text"/>
Mobile	<input type="text"/>			Town	<input type="text"/>
Street/#	<input type="text"/>			Postcode	<input type="text"/>
County	<input type="text"/>				

Director?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Shareholding %	<input type="text"/>	Last Name	<input type="text"/>
First Name	<input type="text"/>			Date of Birth	<input type="text"/>
Nationality	<input type="text"/>			E-mail	<input type="text"/>
Mobile	<input type="text"/>			Town	<input type="text"/>
Street/#	<input type="text"/>			Postcode	<input type="text"/>
County	<input type="text"/>				

Subject to any CCJs?					
Number (past 36 m)	<input type="text"/>	Value (past 36 m)	<input type="text"/>		
Number (current)	<input type="text"/>	Value (current)	<input type="text"/>		
Other proceedings	<input type="text"/>				
Details	<input type="text"/>				

SECTION 6. EMPLOYMENT (If self employed please complete section B)

Applicant One

A. Employment details

Employment Type	<input type="text"/>
Company Name	<input type="text"/>
Street/#	<input type="text"/>
Town	<input type="text"/>
County	<input type="text"/>
Postcode	<input type="text"/>
Job Title	<input type="text"/>
Date Started	<input type="text"/>
Gross Basic Salary	<input type="text"/>

B. Self employed

Self Employment Type	<input type="text"/>
Company Name	<input type="text"/>
Nature of Business	<input type="text"/>
Street/#	<input type="text"/>
Town	<input type="text"/>
County	<input type="text"/>
Postcode	<input type="text"/>
Work Tel	<input type="text"/>
Date Started	<input type="text"/>
Net Profit (last year)	<input type="text"/>
Net Profit (2 yrs ago)	<input type="text"/>
% Share of business	<input type="text"/>
Other income	<input type="text"/>

C. Other income

Please provide details of other gross income that has not been declared in the employed and self-employed sections (e.g pension income and investment properties)

Applicant Two

A. Employment details

Employment Type	<input type="text"/>
Company Name	<input type="text"/>
Street/#	<input type="text"/>
Town	<input type="text"/>
County	<input type="text"/>
Postcode	<input type="text"/>
Job Title	<input type="text"/>
Date Started	<input type="text"/>
Gross Basic Salary	<input type="text"/>

B. Self employed

Self Employment Type	<input type="text"/>
Company Name	<input type="text"/>
Nature of Business	<input type="text"/>
Street/#	<input type="text"/>
Town	<input type="text"/>
County	<input type="text"/>
Postcode	<input type="text"/>
Work Tel	<input type="text"/>
Date Started	<input type="text"/>
Net Profit (last year)	<input type="text"/>
Net Profit (2 yrs ago)	<input type="text"/>
% Share of business	<input type="text"/>
Other income	<input type="text"/>

C. Other income

Please provide details of other gross income that has not been declared in the employed and self-employed sections (e.g pension income and investment properties)

SECTION 7. STATEMENTS OF ASSETS AND LIABILITIES

Applicant One

Main Residence

Ownership	<input type="text"/>
Asset	<input type="text"/>
Liabilities	<input type="text"/>
Street/#	<input type="text"/>
Postcode	<input type="text"/>

Other Property 1

Ownership	<input type="text"/>
Asset	<input type="text"/>
Liabilities	<input type="text"/>
Street/#	<input type="text"/>
Postcode	<input type="text"/>

Other Property 2

Ownership	<input type="text"/>
Asset	<input type="text"/>
Liabilities	<input type="text"/>
Street/#	<input type="text"/>
Postcode	<input type="text"/>

Other Property 3

Ownership	<input type="text"/>
Asset	<input type="text"/>
Liabilities	<input type="text"/>
Street/#	<input type="text"/>
Postcode	<input type="text"/>

Personal Chattels (*inc. vehicles, jewelry, artwork*)

Assets	<input type="text"/>
Liabilities	<input type="text"/>

Bank & Building Society (*balance & overdraft*)

Assets	<input type="text"/>
Liabilities	<input type="text"/>

Other Assets

Investments	<input type="text"/>
Pensions	<input type="text"/>
Insurances	<input type="text"/>
Savings	<input type="text"/>

Other Liabilities

Credit Card	<input type="text"/>
Overdrafts	<input type="text"/>
Loans	<input type="text"/>
Others	<input type="text"/>

Further Properties (aggregate)

Assets	<input type="text"/>
Liabilities	<input type="text"/>

Total Assets and Liabilities

Assets	<input type="text"/>
Liabilities	<input type="text"/>
Net Worth	<input type="text"/>

SECTION 7. STATEMENTS OF ASSETS AND LIABILITIES (CONT.)

Applicant Two

Main Residence

Ownership	<input type="text"/>
Asset	<input type="text"/>
Liabilities	<input type="text"/>
Street/#	<input type="text"/>
Postcode	<input type="text"/>

Other Property 1

Ownership	<input type="text"/>
Asset	<input type="text"/>
Liabilities	<input type="text"/>
Street/#	<input type="text"/>
Postcode	<input type="text"/>

Other Property 2

Ownership	<input type="text"/>
Asset	<input type="text"/>
Liabilities	<input type="text"/>
Street/#	<input type="text"/>
Postcode	<input type="text"/>

Other Property 3

Ownership	<input type="text"/>
Asset	<input type="text"/>
Liabilities	<input type="text"/>
Street/#	<input type="text"/>
Postcode	<input type="text"/>

Personal Chattels (*inc. vehicles, jewelry, artwork*)

Assets	<input type="text"/>
Liabilities	<input type="text"/>

Bank & Building Society (*balance & overdraft*)

Assets	<input type="text"/>
Liabilities	<input type="text"/>

Other Assets

Investments	<input type="text"/>
Pensions	<input type="text"/>
Insurances	<input type="text"/>
Savings	<input type="text"/>

Other Liabilities

Credit Card	<input type="text"/>
Overdrafts	<input type="text"/>
Loans	<input type="text"/>
Others	<input type="text"/>

Further Properties (aggregate)

Assets	<input type="text"/>
Liabilities	<input type="text"/>

Total Assets and Liabilities

Assets	<input type="text"/>
Liabilities	<input type="text"/>
Net Worth	<input type="text"/>

SECTION 8. CREDIT HISTORY

Applicant One

Have you ever been bankrupt? Yes No

If yes, has it been discharged or cleared? Yes No

Date of discharge

Have you ever entered into an IVA or made arrangements with creditors? Yes No

Date of satisfaction

Any missed payments in the last 36 months? Yes No

If yes, date of most recent default

Total amount of defaults (last 36 months)

Number of defaults (last 36 months)

Have you ever been party to a loan when a lender has enforced? Yes No

If yes, date of repossession

Any CCJs registered in the last 36 months? Yes No

Date of the most recent CCJ

Total amount of CCJs (last 36 months)

Number of CCJs (last 36 months)

Total amount of CCJs currently registered

Number of CCJs currently registered

Have you ever been convicted of theft, fraud or dishonesty? Yes No

Have you ever been refused a mortgage? Yes No

Have you been a company officer when a receiver / liquidator was appointed? Yes No

Have you ever been disqualified from being a director? Yes No

Any further disclosures relevant to the application?

Applicant Two

Have you ever been bankrupt? Yes No

If yes, has it been discharged or cleared? Yes No

Date of discharge

Have you ever entered into an IVA or made arrangements with creditors? Yes No

Date of satisfaction

Any missed payments in the last 36 months? Yes No

If yes, date of most recent default

Total amount of defaults (last 36 months)

Number of defaults (last 36 months)

Have you ever been party to a loan when a lender has enforced? Yes No

If yes, date of repossession

Any CCJs registered in the last 36 months? Yes No

Date of the most recent CCJ

Total amount of CCJs (last 36 months)

Number of CCJs (last 36 months)

Total amount of CCJs currently registered

Number of CCJs currently registered

Have you ever been convicted of theft, fraud or dishonesty? Yes No

Have you ever been refused a mortgage? Yes No

Have you been a company officer when a receiver / liquidator was appointed? Yes No

Have you ever been disqualified from being a director? Yes No

Any further disclosures relevant to the application?

SECTION 9. SOLICITOR DETAILS

Please complete with details of the firm which you wish to use to represent you on this transaction. The law firm must have at least 2 SRA approved managers. To check, please refer to the Law Society website (www.lawsociety.org)

Firm Details

Name of Firm	<input type="text"/>	# Managers	<input type="text"/>
Street	<input type="text"/>	City	<input type="text"/>
County	<input type="text"/>	Postcode	<input type="text"/>
Has the Firm acted for you before?			<input type="checkbox"/> Yes <input type="checkbox"/> No

Contact Details

First Name	<input type="text"/>	Last Name	<input type="text"/>
Mobile	<input type="text"/>	Email	<input type="text"/>
DDI	<input type="text"/>		

SECTION 10. VALUATION PAYMENT AND ACCESS DETAILS

Contact details for payment of valuation fee

<input type="checkbox"/> Applicant 1?	<input type="text"/>		
First Name	<input type="text"/>	Last Name	<input type="text"/>
Mobile	<input type="text"/>	E-mail	<input type="text"/>
DDI	<input type="text"/>		

Access details for inspection

<input type="checkbox"/> Applicant 1?	<input type="text"/>		
First Name	<input type="text"/>	Last Name	<input type="text"/>
Mobile	<input type="text"/>	E-mail	<input type="text"/>
DDI	<input type="text"/>	Company	<input type="text"/>

Thank you for providing the data for your loan application.

Please send your form to
borrow@colenko.com

Your dedicated Underwriter will be in touch to take you
through the next steps.