

INCOME AND EXPENDITURE FORM

Your Reference: _____ Home Tel No: _____
 Name(s): _____ Daytime Tel No: _____
 Address: _____
 Number of people in household and ages: _____

INCOME DETAILS**Work**

Borrower 1
 Name of Employer: _____
 Address: _____

Borrower 2
 Name of Employer: _____
 Address: _____

National Insurance No: _____

National Insurance No: _____

Monthly Net Salary: £ _____

Monthly Net Salary: £ _____

Other Income

Unemployment Benefit: £ _____
 Supplementary Benefit: £ _____
 Family Income Supplement: £ _____
 State Pension: £ _____
 Private/Work Pension: £ _____
 Child Benefit: £ _____
 Invalidity /Sickness Benefit: £ _____
 Payments from previous partner: £ _____
 Non-dependents' contribution: £ _____
 Part-time Income: £ _____
 Other Income, i.e. Rental: £ _____

Unemployment Benefit: £ _____
 Supplementary Benefit: £ _____
 Family Income Supplement: £ _____
 State Pension: £ _____
 Private/Work Pension: £ _____
 Child Benefit: £ _____
 Invalidity /Sickness Benefit: £ _____
 Payments from previous partner: £ _____
 Non-dependents' contribution: £ _____
 Part-time Income: £ _____
 Other Income, i.e. Rental: £ _____

Total Income: £ _____

Total Income: £ _____

MONTHLY EXPENSES**Household Expenses**

Rent: £ _____
 First Mortgage: £ _____
 Second Mortgage: £ _____
 Ground Rent: £ _____
 House Insurance: £ _____
 Housekeeping: £ _____
 Prescriptions: £ _____
 Life Insurance: £ _____
 Catalogues: £ _____
 Water Rates: £ _____
 Gas: £ _____
 Telephone: £ _____
 School Meals: £ _____
 Essential Travelling: £ _____
 Fines: £ _____

Payments to ex-spouse: £ _____
 Magazines/Papers: £ _____
 Childminder/Nursery Fees: £ _____
 Other Fuel: £ _____
 Entertainment/Socialising: £ _____
 Cigarettes & Alcohol: £ _____
 Endowments: £ _____
 Council Tax: £ _____
 Car Expenses: £ _____
 Clothes: £ _____
 Electricity: £ _____
 TV & Video Rental: £ _____
 Other 1: _____ £ _____
 Other 2: _____ £ _____
 Other 3: _____ £ _____

Total Household Expenditure (A) £ _____

Your home may be repossessed if you do not keep up repayments on your mortgage.

DEBTS

Priority Arrears

	Arrears:	Additional Payment Only:
Rent:	£ _____	£ _____
First Mortgage:	£ _____	£ _____
Second Mortgage Arrears:	£ _____	£ _____
Ground Rent Arrears:	£ _____	£ _____
Insurance Arrears:	£ _____	£ _____
Council Tax Arrears:	£ _____	£ _____
Electricity Bill Arrears:	£ _____	£ _____
Water Rate Arrears:	£ _____	£ _____
Gas Bill Arrears:	£ _____	£ _____
Court Fines:	£ _____	£ _____
Maintenance Arrears:	£ _____	£ _____

Others

	Company Name:	Balance:	Payment:
Bank Overdraft:	_____	£ _____	£ _____
Credit Card:	_____	£ _____	£ _____
Credit Card:	_____	£ _____	£ _____
Store Card:	_____	£ _____	£ _____
Store Card:	_____	£ _____	£ _____
Catalogue Payments:	_____	£ _____	£ _____
Creditor:	_____	£ _____	£ _____
Creditor:	_____	£ _____	£ _____
Other:	_____	£ _____	£ _____
Other:	_____	£ _____	£ _____
Other:	_____	£ _____	£ _____

Total Debt (B) [Priority Arrears + Others] £ _____ £ _____

Total Expenditure A + B: £ _____

Proposed Monthly Payments in addition to the monthly instalment: £ _____

The above is an accurate record of my financial position.

Signed: _____

Date: _____

N.B PLEASE ENCLOSE COPIES OF YOUR MOST RECENT PAYSLIPS OR BENEFITS RECEIVED

Personal data collected from you will be used in accordance with our Privacy policy, you can find it on <http://www.chlmortgages.co.uk/> or you can request a copy to be sent to you by post.

Your home may be repossessed if you do not keep up repayments on your mortgage.