

Bridgewater Equity Release

Home Reversion Plan Application Form

Intermediary Checklist

An incomplete form may delay the processing of this application. To help assist us, please check:

1. The Intermediary declaration has been completed fully and signed
2. Your client(s) have signed and dated the Declaration section (page 7)
3. The Key Facts Illustration is enclosed
4. The valuation fee cheque is enclosed



Please complete in BLOCK CAPITALS in black/blue ink

Bridgewater will only accept applications from intermediaries who are authorised and regulated by the Financial Services Authority (FSA).

Intermediary Details

Company Name	<input type="text"/>				
FSA Registration Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>				
Telephone Number (incl STD code)	<input type="text"/>				
Are you submitting this application via a Network?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Are you submitting this application via a Mortgage Club?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
If yes, name of Network or Mortgage Club	<input type="text"/>				

Verification of Identity

I confirm that the information in this application form was obtained by me/us in relation to the customer and the evidence I/we have obtained to verify the identity of the customer: (Tick one only)

Meets the standard evidence set out within the guidance for the UK Financial sector issued by the JMLSG; or

Exceeds the standard evidence (written details of the further verification evidence taken are attached to this confirmation).

Intermediary Declaration

I certify that I have given advice on this home reversion plan in accordance with the SHIP rules, and covered the items under the Declaration and Consent Section of this application form.

I confirm that I have passed an appropriate examination in Home Reversion Plans as approved by the Financial Services Skills Council

I have **provided/supervised*** this equity release advice and recommendation (***delete as appropriate**)

Print Full Name	<input type="text"/>	Date	<input type="text"/>
Adviser Signature	<input type="text"/>	Position	<input type="text"/>

To enable the efficient processing of applications, we may contact customers directly for some administration requirements. We will of course copy you in on any correspondence to your client.

Please answer all questions fully in BLOCK CAPITALS in black/blue ink. If the property is owned jointly, for example with your Spouse or Partner, the application must be in joint names. If you are unsure about anything please speak to your Financial Adviser. Please add a separate sheet if you need more space, or to tell us if there are any other facts which you think may be relevant to your application.

ALL SECTIONS MUST BE FULLY COMPLETED

About You

Applicant 1

Applicant 2

Title	<input type="text"/>	<input type="text"/>
Forenames	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth	<input type="text" value="DD/MM/YYYY"/>	<input type="text" value="DD/MM/YYYY"/>
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Co-habiting <input type="checkbox"/> Civil Partnership <input type="checkbox"/> Widowed	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Co-habiting <input type="checkbox"/> Civil Partnership <input type="checkbox"/> Widowed
Nationality	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
Residential status	<input type="text"/>	<input type="text"/>
Time at current address	<input type="text"/>	<input type="text"/>
Telephone	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>	<input type="text"/>

Please give details of any additional occupiers aged 17 and over:

Name	Date of Birth	Relationship to Applicant(s)
<input type="text"/>	<input type="text" value="DD/MM/YYYY"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="DD/MM/YYYY"/>	<input type="text"/>

Please note each additional occupant must sign an Occupant's Deed prior to completion

The Property

The property on which you take out your Home Reversion Plan must be your main residence.

Do you wish to take out a Home Reversion Plan on your current property? Yes No

If Yes, what is the estimated current value?
(Please note, this figure is only a guide and will not influence the valuation provided by the independent RICS surveyor)

£

Do you have a mortgage or secured loan against your current property? Yes No

If yes, how much is outstanding?

£

If you intend to take a Home Reversion Plan out on a new property, please provide the address and postcode of the property you wish to purchase

Please give details of the Vendor's Estate Agent

Purchase price of new property

£

Property Description

Type of property House Bungalow
 Flat Maisonette

Walls Brick Stone Other

If other please give details

Roof Tile Slate Other

If other please give details

Approximate year built

Is the property in good repair? Yes No

Is the property part of a retirement development? Yes No

Is the property an ex-local authority property? Yes No

Tenure Freehold Leasehold Ownership of Land (Scotland)

If leasehold, number of years remaining on lease*

*The unexpired term of the lease plus the age of the youngest applicant must be at least 145 years

Is any part of the property used for business purposes? Yes No

Does the property form part of a larger building used for business purposes? Yes No

About Your Plan

The maximum amount we will release on any of our plans is £250,000

Maximum Release Plan

Include High House Price Inflation Protection Yes No
Include Early Vacancy Guarantee Yes No

Flexible Release Plan

Raise a cash sum of

OR

Sell a percentage of

Secured Escalating Release Plan
(not available in Scotland)

Initial release	<input type="text" value=""/> %	=	<input type="text" value="£"/> <input type="text"/>
Releasing further	<input type="text" value=""/> %	each year for	<input type="text" value=""/> years
Total release	<input type="text" value=""/> %	=	<input type="text" value="£"/> <input type="text"/>

Please select the main reason for releasing equity in your home

<input type="checkbox"/> Home improvements	<input type="checkbox"/> Debt consolidation	<input type="checkbox"/> Long term care funding
<input type="checkbox"/> Holiday home	<input type="checkbox"/> Repay mortgage	<input type="checkbox"/> IHT planning
<input type="checkbox"/> Travel	<input type="checkbox"/> Car	<input type="checkbox"/> Gift
<input type="checkbox"/> Other (please specify)	<input type="text"/>	

Additional Information

Please give details of your solicitors or legal advisers

We strongly recommend that you use a solicitor with expertise in equity release, for example, Solicitors for the Elderly (SFE) www.solicitorsfortheelderly.com and Equity Release Solicitors Alliance (ERSA) www.ersalaw.co.uk

Solicitor or Legal Representative's Name	<input type="text"/>
Name and Address of Firm	<input type="text"/>
Telephone Number (incl STD code)	<input type="text"/>
E mail	<input type="text"/>

Please give details of your buildings insurance

Buildings insurance will remain your responsibility. On completion, the policy schedule must note our interest in the property.

Name and Address of Insurance Company	<input type="text"/>
Policy Number	<input type="text"/>

Your Personal Data

The information you provide to us will be processed and used to administer your application; to process any request for advice or information supplied by us; to notify you of our bulletins, information packs and services, should you consent to this; and to comply with our statutory and regulatory obligations; for the prevention of fraud; underwriting or claims handling; identification verification; and debt tracing and recovery.

Any information that we collect about you is stored electronically on our database. It may also be printed and stored in our filing system. We will keep your personal information confidential except to the extent that we are compelled to disclose it by law (for example where fraud or other crime is involved) or to comply with an instruction of a regulatory body of competent jurisdiction.

For the purposes of processing your application or managing your Home Reversion Plan it will be necessary to disclose your personal data to third parties including other subsidiaries of Grainger plc (of which we are a subsidiary) and to solicitors and surveyors involved in the transaction. Such disclosure will only take place once assurances have been obtained to ensure that the third party will hold and process any data in accordance with the Data Protection Act 1998.

If you believe that the information we hold about you is inaccurate or if you wish us to cease processing your data for any particular purpose or purposes, write to us at the address given on the back of this application form. To comply with the Data Protection Act 1998 we adhere to appropriate security procedures. The personal information which we hold will be held securely to ensure no unauthorised disclosure or access.

We, or other members of the Grainger group of companies, would like to contact you in the future for marketing purposes by post, telephone and email but we need your consent to do this.

If you are happy for us to contact you (by post, telephone or email) concerning our services that may be of interest to you then please tick this box

You may refuse any marketing communication from us in the future at any time by contacting us at the address given on the back of this application form.

Declaration and Consent

Please read the following carefully before signing and dating the application.

As a member of Safe Home Income Plans (SHIP) Bridgewater Equity Release Limited abides by the SHIP rules which state that we are responsible for ensuring that financial advice has been provided in relation to home reversion plans. We are not responsible for information given nor any advice provided by any intermediary. Please check the statements below and only sign the declaration if you feel each statement fully reflects the advice you received.

1. I/We declare that the information given in this application is true and accurate to the best of my/our knowledge and belief.
2. I/We confirm that I am/we are permanently resident in England, Wales or Scotland.
3. I/We understand that the information provided in this application will form the basis of the contract.
4. I/We undertake to be responsible for the valuation fee and my/our own legal fees in connection with this Home Reversion Plan whether or not it proceeds.
5. I/We agree that the payment of any valuation fee shall not in any way bind Bridgewater Equity Release Limited to grant a Home Reversion Plan and understand that the valuer's report is not a structural survey. If a structural survey is required it must be obtained independently at my/our expense.
6. I/We understand that the making of any offer and/or granting of this Home Reversion Plan implies no warranty as to the construction or condition of my/our property
7. I/We authorise the lender for my/our current mortgage, if applicable, to disclose to any solicitor acting for the reversion provider, full details of my/our existing mortgage.
8. I/We agree that the reversion provider can sell its interest in the property to any other company. I/we understand that this would not affect any of my/our rights or responsibilities under this Home Reversion Plan.
9. I/We consent to the use of my/our personal information as set out in section 6 "Your Personal Data".
10. I/We authorise Bridgewater Equity Release Limited, and their solicitor, to contact our insurance company to arrange for their interest to be noted on our insurance schedule.
11. My/Our financial adviser discussed and fully documented:-
 - a. The financial implications of the plan reducing my/our estate and the effect on my/our personal tax and any entitlement to means tested state benefits.
 - b. The risk and benefits of this plan with particular consideration to my/our health.
 - c. Alternative options such as trading down, selling and moving to rented accommodation, a lifetime mortgage and postponing any action.
 - d. The benefit and requirement to take independent legal advice.
 - e. A recommendation that I/we consult fully with family, or material beneficiaries of my/our estate.
 - f. That I/we will continue to be responsible for the maintenance and outgoings relating to the property.
 - g. That I/we have the right to continue to live in my/our home for as long as I/we wish and are also able to move to a suitable alternative property in the future.
 - h. That I/we should not rely on any proceeds from this plan until it has completed and I/we have received the funds.
 - i. In recommending this plan the adviser presented a personalised illustration, product literature and a letter explaining why this plan is suitable.

	Applicant 1	Applicant 2
Signed	<input type="text"/>	<input type="text"/>
Date	<input type="text"/>	<input type="text"/>

Please send this application form and all other documentation to:-

Bridgewater Equity Release Limited
Citygate
St James' Boulevard
Newcastle upon Tyne
NE1 4JE

Tel: 0845 1 40 50 60

Fax: 0191 269 5974

Email: enquiries@bridgewaterequityrelease.co.uk

This is a home reversion plan. To understand the features and risks, please ask your Financial Adviser for a personalised illustration.

Bridgewater Equity Release Limited is authorised and regulated by the Financial Services Authority and is a member of Safe Home Income Plans (SHIP). Bridgewater Equity Release Limited Company Registration Number - 05064154 Registered in England. Registered Office - Citygate, St.James Boulevard, Newcastle upon Tyne, NE1 4JE. Bridgewater Equity Release Limited is a wholly owned subsidiary of Grainger plc.

