♦ LEEKBuilding Society

Income and Expenditure Form

Confidential Questionnaire

Financial Support 50 St. Edward Street, Leek, Staffordshire ST13 5DL Email: financialsupport@leekbs.co.uk

Tel: 0808 168 8570

To enable the Society to help you with your finances, it is important that we get a full understanding of your financial position so that we can make sure the support we provide is the most suitable for your circumstances.

Before you complete the form, please read the notes below as these will provide guidance on how to complete the form and avoid the need for additional questions.

Guidance Notes:

- Where the mortgage is joint, please ensure you provide details for both parties to the mortgage for all relevant sections.
- If the mortgage is in your sole name, but you have a partner who either contributes to the household income or incurs expenditure that impacts on the household income, please include all details for your partner as well.
- To help you complete the form, please have the following details to hand payslips/self-employed accounts, bank statements, benefits statements, other loan/credit card statements or any other information that will assist in completion of the form.
- Where your income is not the same each month, record the lowest amount and where your expenses vary each month, put in the highest amount.
- Include all income and expenditure as monthly income. Where this is an annual cost divide by 12, and where this is a weekly cost multiply by 52 and divide by 12.

Additional notes are provided with the relevant sections to help you complete the form. However, if you require support, please contact us on 0808 168 8570 and one of our advisers will be happy to work through completion of the document with you or answer any questions you have.

You may either return the form back to us by post or email using the contact details at the top of this page. Please mark for the attention of the Financial Support Team.

Mortgage Account Num	ber:				
SECTION 1: PERSONAL	DETAILS				
	Account Hol	lder 1	(Or po	Account Holder 2 rtner where they contribute to ne or expenditure within the h	o either the
Full Name:			IIICOI	ne or experioralie with lift trie in	ouser lold)
Age:					
Address:					
Tel No Home:					
Tel No Mobile:					
Email Address:					
Number of people in your hou	ısehold:	Account I	Holder 1	Account Holde (Or partner where they co either the income or exp within the househo	ontribute to penditure
Please state the number of chages who are financially depe	•				
Are you financially responsible/guarantor for any person?		Y /	N	Y / N	
Do you currently own any other houses or premises and are these subject to a mortgage? If YES, please provide details in the notes section on page 6)		Y /	N	Y / N	
Please describe your occupat average hours worked per we					
Full name and address of Empaddress:	ployer or your trading				
How long have you been with	your present Employer?	years	months	years	months
Have you ever been bankrupt, or had a Court Order against you in respect of a debt?		Υ /	N	Y / N	

Debt (£):

dd/mm/yyyy

If YES, please provide Company Name(s):

If YES to bankruptcy, please confirm the date it was filed:

Debt satisfied?

Y / N

Y / N

dd/mm/yyyy

SECTION 2: INCOME

	Monthly (£)	Guidance Notes
Basic Income (take home pay):		Employed income after tax and other deductions. Please include any guaranteed overtime and bonuses.
Partner's Income (take home pay):		Employed income after tax and other deductions (this is for a second mortgage holder or a partner who contributes to the household bills.
Other Earnings (self-employed income):		Income taken from self-employed business for either mortgage holder or partner that contributes to the household income.
Pension Income:		Any income received in the household from pensions including, state pensions, private or work pensions, pension credits or other pensions.
Benefits and Tax Credits:		Please include all payments received in the household from government and local authorities within the household – please include the following, where applicable:
		Universal Credit; Job-seekers allowance, income support, working tax credit, child tax credit, child benefit, Disability Benefits, Statutory Sick Pay, Carers Allowance, Housing Benefit; Council Tax Support, any other benefits.
Maintenance or Child Support Income:		Please include any payments received from ex-partners in relation to your children.
Other Income (state source):		Please include any other income, this could include rental income, income protection payments, student loan/bursary payments or other adult occupant contributions.
A. Total Income of combined		

A. Total Income of combined Account Holder 1 and 2:

Where known, please advise of any anticipated changes to any of the above income that you are aware of in the next 6 months, i.e. benefits stopping or pay increases:

Anticipated Financial Changes:

SECTION 3: ASSETS OR EQUITY

	Value (£)	Guidance Notes
Value of any other properties owned:		Provide the value of any other properties owned.
Loans outstanding against other properties:		Advise details of any mortgages or secured loans against other properties owned.
Total Equity:		Balance of value of properties owned less any secured loans.
Value of any vehicles owned (less any HP outstanding):		Details of any vehicles owned by the mortgage holders.
Savings:		Detail any savings held by the household that are easily accessible.
Other Assets:		Provide details of any other savings balances held, e.g. bonds or stocks and shares.

SECTION 4: EXPENDITURE

	Monthly (£)	Guidance Notes
Mortgage (LBS):		Your contracted monthly mortgage payment.
Other Loans/Commitments: (please give details in Section 5)		Please include any other loans secured against the property or unsecured including personal loans and credit card debts.
Rent/Mortgage on Other Properties:		Please detail any rent payable or mortgage payments on any other property.
Ground Rent/Service Charge:		Where the property is leasehold, please provide details of any payments to the freeholder for ground rent or service charges.
Mortgage Repayment Policy:		Where your mortgage is interest only, any amounts you pay each month towards a repayment vehicle for the mortgage, i.e. endowment.
Council Tax:		If this is paid over 10 months, please input the amount you pay in the month.
Electric:		Please advise the amount you pay each month. Where this is not fixed, calculate the monthly amount using the Guidance Notes on page 1.
Gas/Alternative Fuel:		Please advise the amount you pay each month. Where this is not fixed, calculate the monthly amount using the Guidance Notes on page 1.
Water Rates:		Please advise the amount you pay each month. Where this is not fixed, calculate the monthly amount using the Guidance Notes on page 1.
Child/Adult Care Fees:		Please detail any regular costs for provision of either child or adult care within the household.
Maintenance:		Please provide details where you are required to pay maintenance to another party not resident in the household.
Travelling Expenses/ Car Tax/ Insurance:		Please include any regular travel expenses paid from the household, including public transport, car insurance, car fuel, road tax, breakdown cover, MOT and ongoing maintenance/service or other costs.
Appliance/Furniture Rental or Hire Purchase:		Detail any monthly costs payable for any appliances or furniture in the house, e.g. settees.
School Costs:		Please include any regular after-school clubs, uniform costs, school trips or school dinners.

Health Costs:	Please detail any costs attributable for life or medical insurance as well as any regular health expenditure for prescriptions, dentistry and opticians.
Pension Payments:	Any separate regular pension contributions where it's not deducted from regular take home pay at source.
Insurance Policies:	Any regular insurance policies including buildings and/or contents, mortgage payment protection, pet insurance, appliance cover, personal item insurance e.g. phone.
TV Licence/Media Subscriptions:	Please detail any TV licence subscriptions, including TV licence and streaming services.
Telephone/Mobile Costs:	Please include any landline costs and mobile costs that are paid from the household finances. Where included within a wider subscription with a TV or broadband subscription, only include once on the form.
Broadband/Internet:	Please include any costs for broadband/internet where not included with a TV or other subscription – only include once on the form.
Food & Housekeeping:	Please detail the amount spent on all food and groceries in a month, please make sure you consider not only supermarket costs, but any other spend in convenience stores and specialist retailers, e.g. butcher/pet shop. Items to be included should be food, toiletries, cleaning products, baby items, pet food, and any meals at work.
Alcohol & Smoking Products:	Please detail where applicable, the amount spent each month on alcohol or smoking products including vapes or cigarettes.
Leisure:	Consider including any amounts spent on hobbies, leisure, holiday savings or sport, e.g. socialising, eating out. Also consider items such as gifts, newspapers, magazines and pocket money.
Personal Costs:	Please detail amount spent on clothing and footwear for the household as well as any specific grooming costs, e.g. hairdressing, manicures.
Other Regular Expenditure:	Any other regular expenditure not referenced above - suggest you review credit card and bank statements to see if there is anything that you have not already included.
B. Total Living Costs:	
A less B = C. Disposable Income:	

SECTION 5: MORE INFORMATION CONCERNING YOUR COMMITMENTS Monthly Commitment Type Company Amount Owing (£) Purpose Repayment (£) 2nd Mortgage: 3rd Mortgage: 4th Mortgage: Bank Loan 1: Bank Loan 2: Bank Loan 3: Credit Cards 1: Credit Cards 2: Credit Cards 3: Credit Cards 4: HP: Catalogue: County Court Judgements: Other Credit 1: Other Credit 2: Other Credit 3: Please use this space to make any notes regarding your commitments:

SECTION 6: UNDER	STANDING YOUR CIRCUMS	TANCES (Please provide	e as much detail as possible.)
What are your present di	fficulties or why are you requesting c	change to your account?	
Why have these arisen or	what has changed?		
How long do you expect t	:o be in this position?		
Please provide any other	information that you think is relevan	ht:	
DATA PROTECTION LE	GISLATION		
The Data Controller is Leek Leek, Staffordshire, ST13 5D	k United Building Society trading as Leek DL.	k Building Society, whose prin	ncipal office is 50 St. Edward Street,
	upplying will be held by the Society and a alysis, customer servicing, and administr		
the Leek United group for t	the purposes stated above. eld during the life of the account and for		
corrected, restrict the purp	slation you are entitled to receive a cop poses for which your personal data is us	ed and in certain circumstan	ices the right to your data being erased
	ling how we manage your data can be f an be requested from any of our branch		
If you would like to obtain i	information held about you, please write	e to the address above.	
DECLARATION			
	where a concession or arrangeme I any information provided will be cries.		
Signature:		Signature:	
(Account Holder 1)		(Account Holder 2)	
Date:			

YOUR HOME MAY BE REPOSSESSED IF YOU DO NOT KEEP UP REPAYMENTS ON YOUR MORTGAGE

Leek Building Society is a trading name of Leek United Building Society, which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority with firm reference number 100014. Our details can be found on the Financial Services Register at https://register.fca.org.uk/s/. Leek United Building Society's address for service is 50 St. Edward Street, Leek, Staffordshire ST13 5DL.