



REF:LQ/

# FLEXIBLE HOME IMPROVEMENT LOAN

## INITIAL ENQUIRY FORM

### ADDRESS OF PROPERTY

1. PLEASE ENTER THE FULL ADDRESS AND POSTCODE OF THE PROPERTY

.....

POSTCODE..... TELEPHONE.....

### OWNER'S DETAILS

2. PLEASE ENTER THE NAME AND DATE OF BIRTH OF EACH OWNER OF THE PROPERTY (IF THERE ARE MORE THAN TWO OWNERS, PLEASE USE SPACE OVERLEAF)

NAME ..... DOB .....

NAME ..... DOB .....

### THE WORKS

3. BRIEFLY DESCRIBE THE PROPOSED WORKS FOR WHICH THE LOAN IS REQUIRED.

.....

.....

.....

4. WHAT IS THE ESTIMATED COST OF THE WORK?

£

(IF NO ESTIMATES HAVE BEEN OBTAINED, PLEASE GIVE A 'BEST GUESS')

5. HAVE THE WORKS STARTED?  YES  NO

6. ARE THE WORKS SUBJECT TO AN INSURANCE CLAIM?  YES  NO

### EQUITY IN PROPERTY

6. WHAT IS THE ESTIMATED VALUE OF THE PROPERTY?

£

7. WHAT IS THE OUTSTANDING MORTGAGE ON THE PROPERTY?

£

8. WHAT TYPE OF MORTGAGE DO YOU HAVE?

- REPAYMENT OR ENDOWMENT  INTEREST ONLY MORTGAGE  
 EQUITY RELEASE MORTGAGE \*  SHARED APPRECIATION MORTGAGE \*  
 SHARED EQUITY MORTGAGE \*

\* IF YOU HAVE AN EQUITY RELEASE, SHARED EQUITY OR SHARED APPRECIATION MORTGAGE, PLEASE PROVIDE A COPY OF THE TERMS OF THE LOAN INCLUDING THE INTEREST RATE.

**YOUR CIRCUMSTANCES**

9. ARE YOU RECEIVING ANY OF THE FOLLOWING BENEFITS?       YES       NO

- COUNCIL TAX BENEFIT (ANSWER 'NO' IF YOU ONLY RECEIVE THE 25% SINGLE PERSON DISCOUNT)
- GUARANTEE PENSION CREDIT
- INCOME BASED JOB SEEKERS ALLOWANCE

**NB** YOU DO NOT HAVE TO BE CLAIMING A BENEFIT TO QUALIFY FOR THE LOAN. THIS INFORMATION IS REQUESTED TO ASSESS WHETHER OTHER TYPES OF ASSISTANCE MAY BE MORE APPROPRIATE.

**GENERAL**

10. WHERE DID YOU HEAR ABOUT THE FLEXIBLE HOME IMPROVEMENT LOAN?

- COUNCIL OFFICER
- COUNCIL WEBSITE
- LEAFLET (PLEASE STATE WHERE LEAFLET OBTAINED)  
.....
- ADVERT (PLEASE STATE WHICH PUBLICATION)  
.....
- OTHER (PLEASE STATE)  
.....

PLEASE USE THIS SPACE FOR ANY OTHER RELEVANT INFORMATION

**DECLARATION**

- I declare that to the best of my knowledge, information and belief, the information I have given above is correct.
- I authorise the Council Tax Benefits section to confirm, on request by the Housing Section, whether I have been served with a liability order in respect of Council Tax arrears.

Signed: .....      Date: .....

PLEASE RETURN COMPLETED FORM TO:      HOUSING TEAM  
BUCKINGHAMSHIRE COUNCIL  
KING GEORGE V HOUSE  
KING GEORGE V ROAD  
AMERSHAM  
HP6 5AW

***Buckinghamshire Council is a Data Controller under the Data Protection Act. We hold information for the purposes specified in our notification to the Information Commissioner and may use this information for any of them. We may get information about you from others or we may give information to them. If we do, it will only be as the law permits, to check the accuracy of information, prevent fraud or detect crime or to protect public funds.***