



Further Advance Declaration



Roll Number

1st Customer

2nd Customer

Title Mr/Mrs/Miss/Ms/Dr/Other

Forename(s)

Surname

Your Declaration

I declare that:-

1. I apply for a further advance and agree to pay the monthly payment appropriate to the total advance, as calculated by you when the money is released, and to pay any charges due in respect of initial interest and/or outstanding fees;

I authorise you to:-

2. I am over 18 years of age and believe the information given in this application is correct.

3. make any enquiries of any third parties for reference purposes and for the third party to disclose any information to you;

4. change my payment authority to reflect any change in monthly payment I have to pay where I make payments by Halifax Payment Plan/Direct Debit.

I agree that:-

5. you and any subsidiary or associated company of yours, will retain commission paid or allowed on any insurance you arrange;

6. you may be provided, by the policy or plan provider, with any information relating to any life policy or investment plan being taken into consideration by you in connection with this mortgage;

7. I will notify you of any changes in circumstances relating to my application before it is entered into and if a conveyancer is required for my loan, I authorise my conveyancer to disclose such information to you;

8. relevant data may be passed to any guarantor of my loan or to their legal adviser;

9. if I become unemployed or am unable to work due to accident or sickness, or if I become a carer, Halifax Insurance Ireland Limited can refer my name, address and telephone number to Mentor Professional Services Limited where unemployment cover is in force under a Total Mortgage Protection Plan;

10. where applicable, I also apply to refinance the amount I owe on my existing mortgage under the roll number stated above and for the additional borrowing shown in my application. I agree that you will lend me the amount required to repay my existing mortgage and to cover the additional borrowing I have applied for under a new mortgage contract with the same roll number. I acknowledge that my new mortgage will be regulated by the Financial Services Authority;

11. I have received an Initial Disclosure Document and a Key Facts Illustration relating to this application;

12. if I borrow and do not repay in full and on time, you may tell credit reference agencies who will record the outstanding debt and my details may be submitted to the Council of Mortgage Lenders possessions register.

I understand that:-

13. where a cheque is issued on my behalf, payment will not be stopped at my request except on proof of loss or theft;

14. the payment of any fees is non-refundable and shall not mean that you have to make an advance;

15. by applying in joint names I will create a financial association with that person. I declare that I am entitled to provide information about my joint applicant;

16. you will pass the information on this form and about any incident I may give details of, to Insurance Database Services Limited (IDS Ltd) so that they can make it available to other insurers. I also understand that, in response to any searches you may make in connection with this application or any incident I have given details of, IDS Ltd may pass you information it has received from other insurers about other incidents involving anyone insured under the policy;

17. when considering an application for credit, you may use the information supplied to you to offer additional products;

18. if I were to die leaving a debt under the Home Cash Reserve, this would form part of the liabilities of my estate.

Total Mortgage Protection Plan

The Home Cash Reserve product does not include life cover.

Please note: the following declaration will apply to any application that you make for a Total Mortgage Protection Plan.

I understand that my application is subject to underwriting by you and that I will be notified in writing if I have been accepted.

I declare to the best of my knowledge and belief that the statements and information I provide for my Total Mortgage Protection Plan application are true and complete. I understand that:

- you will use my answers in my application to work out the risk under the plan;
- I must tell you all material facts that may affect the risk;
- material facts are those that an insurer would regard as likely to influence the assessment and acceptance of an application;
- if I am in any doubt as to whether a fact is material or not, I must tell you about it; and
- if I do not tell you all material facts, my plan could be made void.

I undertake to advise you immediately in writing if there is any change in my occupation or health before the start of the plan.

I understand that you regard my answers to the specific occupation and health questions to be material to the risks covered by the plan. I warrant that my answers are correct and understand that, if this is not the case, you may end my plan without any premium refund and without payment of any benefit. You may also require repayment of any benefit already paid. I understand that these questions and answers will be included in the acceptance terms (in the document, "Information Provided") which you will send to me. I agree to check that these terms are accurate and keep them in a safe place. I understand that I should keep a record of all information you give me about this application, that the application forms part of the plan and that a copy of the plan conditions is available on request.

Halifax Insurance Ireland Limited is responsible for the advice they give and for arranging your plan. They can only advise you about the cover provided under their Mortgage Repayments Cover.

Mortgage Repayments Cover is underwritten by Halifax Insurance Ireland Limited, Dromore House, East Park, Shannon, Co Clare. Registered in Ireland Number 323923.

Life Cover and Critical Illness Cover are underwritten by St Andrew's Life Assurance plc, St Andrew's House, Portsmouth Road, Esher, Surrey KT10 9SA. Registered in England Number 3104670, for whom Bank of Scotland plc is acting as agent.

Claims and Underwriting Exchange

Insurers and their agents pass information to the Claims and Underwriting Exchange register, run by IDS Ltd. The aim is to help us check information provided and also to prevent fraudulent claims. When we deal with your request for insurance, we may search the register. When you tell us about an incident (such as fire, water damage or theft) which may or may not give rise to a claim, we will pass information relating to it to the register. You can ask us for more information about this. You should show this notice to anyone who has an interest in the property insured under the policy.

Home Insurance

Please note that when applying for insurance you must declare all material information known to you that could influence the acceptance or assessment of your application. Material information includes any special features of the property or member of your household which make losses more likely to happen or more serious if they do. If you are unsure whether a piece of information is material, you should disclose it. Failure to disclose all material information may result in you being quoted the wrong terms, a claim being rejected or reduced, or the policy being invalid. The application form forms part of the insurance contract. **Insurance will not commence until your application has been accepted. We reserve the right to decline any application.**

Home Insurance is underwritten by St Andrew's Insurance plc. St Andrew's House, Portsmouth Road, Esher, Surrey KT10 9SA. Registered in England and Wales Number 3104671.

Data Protection Notice

To see how we use your information, please read the privacy statement on our website www.halifax.co.uk/privacy or ask for a printed copy of this.

We will use your information to contact you by mail, telephone, e-mail, SMS or otherwise about other products and services that may be of interest to you. If you do not wish to receive this information please advise your local branch or visit www.halifax.co.uk/privacy for details on how to opt out of this service.

We will search credit reference and fraud prevention agencies to check your identity, credit status and help us make decisions. For this application, we will assess you on your own (except for another party to this application). By signing the application, you declare that your financial associate's finances will not affect our decision. We check your declaration and may decline the application if it is inaccurate.

If false or inaccurate information is provided and fraud is identified, details will be passed to fraud prevention agencies to prevent fraud and money laundering. Further details explaining how information held by the fraud prevention agencies may be used can be obtained by reading the privacy statement at www.halifax.co.uk/privacy or contacting your local branch.

By signing this form, you agree that we can use your information in the ways described.

Signed

Date

Signed

Date

Guarantor's Declaration

As guarantor you may be required to complete a separate application form.

I make the declarations set out in paragraphs 2, 3 and the Data Protection Notice above in respect of myself. I agree that I will notify you of any changes in circumstances relating to the guarantee before I enter into it and I authorise my conveyancer to disclose such information to you.

By giving the guarantee you might become liable instead of or as well as the applicant(s). The guarantee will be limited. You should get independent legal advice before you give the guarantee.

Signed

Date