



Backed by  
HM Government  
**North West**

# PROPERTY INFORMATION FORM SCHEME: HELP TO BUY

To: **Help to Buy North West, Rialto Building, 90-94 Upper Parliament Street, Liverpool, L8 7SY (the Local Help to Buy Agent)** as agent for Homes and Communities Agency (the **Agency**)

Please note **all information** clearly – unclear details will cause delays and result in forms being returned

## Part One

Named Applicant 1: (Title & Full Name) [ ]

Contact Telephone Number: [ ]

Email address: [ ]

Named Applicant 2: (Title & Full Name) [ ]

Contact Telephone Number: [ ]

Email address: [ ]

Lead applicant current property address: [ ]

*(together the **Applicant**)*

Site Name: [ ]

Selected Property Address: [ ] (the Property)

Local Authority [ ]

Plot No. [ ]

Provider (Developer): [ ]

Expected build completion date: [ ]

Expected purchase completion date: [ ]

House Type – Detached – Semi – Terrace – Flat

Tenure - Freehold – Leasehold

Number of Beds 1 2 3 4 5 6 6+

**Provider's (Developer's) Conveyancer's Details** (including name, address, email, tel no and reference);

[ ]

**Applicant's Conveyancer's Details** (including name, address, email, tel no and reference);

[ ]

**Independent Financial Advisor Details:** (including name, company, email, tel no and reference);

[ ]

Full Purchase Price [ ]

Buyer's mortgage amount: [i.e. Maximum amount to be obtained by applicant] [ ]

Requested Mortgage Term (Maximum term 40 years) (Up to age of 70) [ ]

Applicant's Cash Contribution [ ]

The Applicant confirms to the Help to Buy Agent and the Agency that the above details are accurate and are agreed between the Applicant and the Provider - the buyer's mortgage amount and cash contribution must reach a minimum of 80% of the full purchase price.

## PART 2

### Financial Details

**Help to Buy Equity Loan requested amount (max 20%):** [ ]

#### **Income – Applicant 1**

Basic Employment Income (annual, gross): [ ]

Overtime, Bonuses and Commissions: [ ]

Student Loan Monthly Payment: [ ]

Other gross salary MONTHLY deductions (childcare vouchers, pension etc): [ ]

#### **Income – Applicant 2**

Basic Employment Income (annual, gross): [ ]

Overtime, Bonuses and Commissions:] [ ]

Student Loan Monthly Payment: [ ]

Other gross salary MONTHLY deductions (childcare vouchers, pension etc): [ ]

#### **Debt (to cover all Applicants if more than one)**

Monthly loan/HP payments: [ ]

Outstanding credit card balances: [ ]

**Additional household income** (monthly) (to cover all Applicants if more than one): [ ]

Working tax credits: [ ]

Child tax credits: [ ]

Child benefit: [ ]

Disability allowance: [ ]

Guaranteed maintenance income: [ ]

Other income: [ ]

**Monthly Service Charge:** [ ]

**Do any of the applicants own a residential property?** Y/N

If yes, please confirm the address: [ ]

## Personal Details

Applicant 1 date of birth: [ ]

Applicant 2 date of birth: [ ]

Number of adults to live in the Property [ ]

Number of children to live in the Property [ ]

NB Those of [18] years of age at the date of [ ] are adults and those below [18] years old at the date of [ ] are children.

The Applicant confirms to the Help to Buy Agent and the Agency that the above details are accurate and acknowledges that this information shall be used to determine the Applicant's eligibility for Help to Buy funding.

### **PART 3 – Applicants must read carefully**

The Applicant (subject to acceptance for the Help to Buy Initiative and proceeding to completion of the purchase of the Property) agrees to and directs that the equity loan funding that the Agency will provide (comprising a contribution of up to 20% of the Full Purchase Price) is paid direct to the Provider to enable it to reduce the Full Purchase Price of the Property.

The Applicant acknowledges that the term of the Help to Buy equity loan is 25 years (subject to earlier redemption in accordance with the equity loan provisions).

The Applicant acknowledges that if they own a residential property that they will sell their interest in that property (or properties) in advance of completing their purchase of the Property with the assistance of a Help to Buy equity loan and that it is a condition of the equity loan that the Property which is the subject of the Help to Buy equity loan will be the only residential property they have any interest in for the duration of the Help to Buy equity loan.

The Applicant further acknowledges that the Agency has nominated an agent to administer Help to Buy equity loans (currently Metropolitan acting through its Housing Options Plus service (the Post Sales Agent)) and that all correspondence and payments required under Help to Buy equity loans will be addressed to the Post Sales Agent.

The Applicant declares for data capture purposes only (or if there is more than one applicant in relation to each applicant) that it is (they are) a:

- UK National App 1 [ ] App 2 [ ]

- EEA Citizen App 1 [ ] App 2 [ ]

- Person with indefinite leave to remain App 1 [ ] App 2 [ ]

- Other (please state) App 1 [ ] App 2 [ ]



The Applicant understands that if it is found that false information has been given to obtain assistance under the Help to Buy Initiative either knowingly or recklessly, appropriate legal action may be taken and the Agency may take action under its Equity Mortgage.

The Applicant authorises the Help to Buy Agent to pass information submitted as part of its application to:

other Help to Buy agents,

the Post Sales Agent,

the Agency,

Local Authorities,

partner housing providers (registered providers/the Provider/Private Developers),

Credit Reference Agencies,

the Department of Communities and Local Governance,

the Council of Mortgage Lenders (and their members); and

other organisations working with the Help to Buy Agent and/or the Agency's in the delivery of the Help to Buy product

for the purposes of processing this application and statistical surveys and analysis of the Help to Buy Initiative.

**DIRECT DEBIT FORM: Please complete, sign and return the attached Direct Debit Form. This is to authorise your bank to debit the monthly fees which will fall due under the Equity Mortgage (which will be £1 per month for the first 5 years of the Equity Mortgage). We confirm that the Direct Debit form will only be used in the event that you purchase the Property and enter into an Equity Mortgage with the Agency.**

I [ ] agree to the above terms and conditions and declare that all information provided in this form is true and accurate (1st applicant)

Signed

Dated

I [ ] agree to the above terms and conditions and declare that all information provided in this form is true and accurate (2nd applicant)

Signed

Dated

**PROVIDER; PLEASE ATTACH A COPY OF YOUR RESERVATION FORM AND THE ORIGINAL SIGNED DIRECT DEBIT FORM AND SEND IT TO HELP TO BUY NORTH WEST WITH THIS PROPERTY INFORMATION FORM.**

Help to Buy North West  
Rialto Building  
90-94 Upper Parliament Street  
Liverpool  
L8 7SY

Telephone: 0300 790 0570

Email: [info@helptobuynw.org.uk](mailto:info@helptobuynw.org.uk)



Please fill in the form using a ball point pen and send to:

Allpay Limited  
Metropolitan Housing Partnership  
The Grange  
100 High Street, Southgate  
LONDON  
N14 6PW

Name(s) of Account Holder(s).

Bank/Building Society Account Number.

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Branch Sort Code.

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Name & full postal Address of your Bank or Building Society.

To: The Manager	Bank/Building Society
Address	
Postcode	

**Instruction to your Bank or Building Society to pay by Direct Debit.**

Service User Number

4	1	8	3	8	5
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For allpay Limited official use only. This is not part of the instruction to your Bank or Building Society. Please complete your address and telephone number.	
Address:	
Postcode:	
Telephone:	Ref:

**Instruction to your Bank or Building Society**

Please pay allpay Limited Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee.  
I understand that this instruction may remain with allpay Limited and, if so, details will be passed electronically to my Bank or Building Society.

Signature(s)
Date

Reference

M	G	R	T																
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Banks and Building Societies may not accept Direct Debit Instructions on some types of Account.

This Guarantee should be detached and retained by the Payer.

**The Direct Debit Guarantee**



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit, allpay Limited will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request allpay Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by allpay Limited or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.  
-If you receive a refund you are not entitled to, you must pay it back when allpay Limited asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

[OFFICE USE ONLY]

**Direct Debit Payment Details**

<b>Reference Number</b>			
<b>First Payment Amount</b>		<b>Date of First Payment</b>	
<b>Subsequent Payments</b>		<b>Next Due Date</b>	
<b>Frequency of Payment</b>			
<b>Area Office (if applicable)</b>			
<b>Date of entry onto Webconnect</b>			
<b>Please enter the details of the customer, if different from those of the bill payer overleaf:</b>			
<b>Name</b>			
<b>Address</b>			
<b>Post Code</b>			

<b>Contact details</b>	
<b>Scheme</b>	Help to Buy
<b>Payment Reference</b>	(See Reference on letter)
<b>Telephone</b>	
<b>Mobile</b>	
<b>Email</b>	

<b>Payments will be collected on behalf of:</b> Metropolitan Housing Partnership The Grange 100 High Street Southgate LONDON N14 6PW
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## Equal Opportunities

The Help to Buy Agent operates a policy of equal opportunities in all aspects of its work. No person or group of people applying for housing will be treated less favourably than any other person or group of people because of their sex, age, race, colour, ethnic or national origin. To help the Help to Buy Agent maintain a record, it asks the Applicant(s) to tick the group(s) to which they consider they belong.

How would you, the Applicant, describe your ethnic origin?

<b>WHITE</b>	First App	Joint App	<b>ASIAN OR ASIAN BRITISH</b>	First App	Joint App		First App	Joint App
A1 British	<input type="checkbox"/>	<input type="checkbox"/>	C80 Indian	<input type="checkbox"/>	<input type="checkbox"/>	<b>E15 CHINESE</b>	<input type="checkbox"/>	<input type="checkbox"/>
A2 Irish	<input type="checkbox"/>	<input type="checkbox"/>	C90 Pakistani	<input type="checkbox"/>	<input type="checkbox"/>			
A3 Other	<input type="checkbox"/>	<input type="checkbox"/>	C10 Bangladeshi	<input type="checkbox"/>	<input type="checkbox"/>	<b>E16 OTHER ETHNIC GROUP</b>	<input type="checkbox"/>	<input type="checkbox"/>
			C11 Other	<input type="checkbox"/>	<input type="checkbox"/>			
						<b>F17 QUESTION REFUSED</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>MIXED</b>			<b>BLACK OR BLACK BRITISH</b>					
B4 White & Black Caribbean	<input type="checkbox"/>	<input type="checkbox"/>						
B5 White & Black African	<input type="checkbox"/>	<input type="checkbox"/>	D12 Caribbean	<input type="checkbox"/>	<input type="checkbox"/>			
B6 White & Asian	<input type="checkbox"/>	<input type="checkbox"/>	D13 African	<input type="checkbox"/>	<input type="checkbox"/>			
B7 Other	<input type="checkbox"/>	<input type="checkbox"/>	D14 Other	<input type="checkbox"/>	<input type="checkbox"/>			

Do you or any member of your household consider yourself to be disabled?

Yes  No

If yes, please give details \_\_\_\_\_

Do you or any member of your family use a wheelchair?

Yes  No

Are you related to a current or former Committee/Board member or officer of a Registered Social Landlord (Housing Association)?

Yes  No

If so, please give details \_\_\_\_\_

Name of member or officer \_\_\_\_\_ Name of Housing Association \_\_\_\_\_