

Section 1: Personal Details

| | FIRST APPLICANT | SECOND APPLICANT |
|--|----------------------|----------------------|
| Title: | <input type="text"/> | <input type="text"/> |
| Surname: | <input type="text"/> | <input type="text"/> |
| Forename(s): | <input type="text"/> | <input type="text"/> |
| Date of Birth: | <input type="text"/> | <input type="text"/> |
| Sex: | <input type="text"/> | <input type="text"/> |
| Current address: <i>(inc. postcode)</i> | <input type="text"/> | |
| Daytime telephone number: | <input type="text"/> | |
| Email Address: | <input type="text"/> | |
| Time at current address: | <input type="text"/> | |

Section 2: The Property

Is the property ex-Local Authority?

Yes No

Is the property subject to shared ownership, eg owned with a housing association?

Yes No If yes give details:

Please tick whichever of the following describes the property to be used for equity release:

House Flat Bungalow Maisonette

If you have ticked Flat or Maisonette above, please choose one of the options below:

Purpose built Conversion

Please tick below to show the type of construction of the property:

Brick Stone Other (give details)

Please describe the roof construction by ticking a box below:

Tile Slate Other (give details)

Age of property: Estimated Value:

Tenure of Property: Is the property leasehold or freehold?

Freehold Leasehold If leasehold please indicate the number of years remaining on the lease:

Will any part of the property be used for business purposes?

Yes No

If you are joint applicants, will you both own the property?

Yes No

Where are your property deeds?

Existing lender Bank Legal Adviser Other (give details)

Section 3: Occupation of the Property

Will anyone else be living at the property apart from the applicants named in section 1? (if yes please give full details)

Yes No

| | | |
|----------------|----------------------|----------------------|
| Title: | <input type="text"/> | <input type="text"/> |
| Surname: | <input type="text"/> | <input type="text"/> |
| Forename(s): | <input type="text"/> | <input type="text"/> |
| Date of Birth: | <input type="text"/> | <input type="text"/> |

Does the occupant have the mental capacity to sign a Waiver of Entitlement?

Yes No Yes No

Is the occupant willing to sign a Waiver of Entitlement?

Yes No Yes No

Section 4: Financial & Other Considerations

Please provide your reasons for choosing a Home Reversion Plan

Have you informed your family that you are considering selling all or part of your home for less than its present market value to raise some capital?

Yes No

Have you discussed with your family how this will affect their inheritance of your home on your death?

Yes No

If No, do you intend to discuss this with your family in future if you decide to proceed?

Yes No

Please tick to confirm that you are aware that, by taking out a Home Reversion Plan, your entitlement to certain state benefits might be reduced.

Section 5: Legal Adviser, Independent Surveyor and IFA Details

Please provide details of your legal adviser below. If you do not have a solicitor we have a panel of solicitors from which you can nominate a solicitor or choose one of your own.

| | | | |
|-------------------|----------------------|--------------|----------------------|
| Name of solicitor | <input type="text"/> | Name of firm | <input type="text"/> |
| Address | <input type="text"/> | | |
| Tel number | <input type="text"/> | Fax number | <input type="text"/> |

Please provide details of your independent surveyor below. We would normally use a network of RICS (Royal Institute of Chartered Surveyors) to value the property. If you prefer to nominate a surveyor independently, which RICS surveyor would you prefer to value your home?

| | | | |
|------------------|----------------------|--------------|----------------------|
| Name of surveyor | <input type="text"/> | Name of firm | <input type="text"/> |
| Address | <input type="text"/> | | |
| Tel number | <input type="text"/> | Fax number | <input type="text"/> |

Please provide details of the Independent Financial Adviser who advised you on the purchase of this product:

| | | | |
|-----------------|----------------------|--------------|----------------------|
| Name of advisor | <input type="text"/> | Name of firm | <input type="text"/> |
| Address | <input type="text"/> | | |
| Tel number | <input type="text"/> | Fax number | <input type="text"/> |

Section 6: Any other relevant information

Please provide details of any other information you feel may be relevant to your application in the box below:

Section 7: Declaration

Data Protection

Information you supply or which we obtain in the course of your contract may be used by Crown Equity Release Limited to arrange your plan or by, any company within the Neville James Group or by the purchaser of your property. It may be transferred to any country, including those outside the European Economic Area for these purposes. Information may be used for the prevention of fraud, debt tracing/recovery, underwriting or claims handling and may be disclosed in confidence to regulatory bodies and your financial adviser (including third parties providing services to them).

In addition, Neville James Group may use some of your information to advise you by post, telephone or email of other products and services offered by its companies.

Please tick the box if you **do not** wish to receive such information.

- I declare that the information provided in this application is true and accurate to the best of my knowledge and belief, and understand that it forms the basis of the contract.
- I understand the Valuer's report is not a structural survey. If one is required, it will be obtained independently and at my expense.
- I agree that the payment of any valuation fee shall not in any way be binding on Neville James Limited or Crown Equity Release Limited to arrange a Home Reversion Plan.
- I understand that a Home Reversion Plan is a long-term commitment and is not a method for raising cash in the short term.
- I confirm that I have received advice regarding the purchase of a Home Reversion Plan from the financial adviser named in section 5 of this application and am satisfied that the plan is suitable for me.
- I consent to the use of my personal data as outlined in the section headed 'Data Protection'.

Signature(s) of applicants:

FIRST APPLICANT

SECOND APPLICANT

Signed:

Full name:

Date:

Intermediary Adviser's Declaration:

Neville James Limited requires all sales of Home Reversion Plans arranged through it to be advised and would ask that the following declaration be completed:

Name of Adviser:

Name of Firm:

FSA Number:

Address:

Telephone number:

Fax number:

Email address:

If part of a network, please provide name of network

I confirm that I have provided advice to the applicant(s) regarding the purchase of a Home Reversion Plan which included the following:

- A full assessment of the applicant's financial situation was taken and documented in accordance with FSA's requirements
- The client was advised that any state benefits entitlement might reduce as a result of taking out a home reversion plan and, if appropriate, that their tax position might be adversely affected
- That moving house was an alternative to equity release
- Other equity release products other than Home Reversion Plans are available
- That if the client were to die earlier than their life expectancy the home reversion plan might be an expensive way of releasing cash from the home
- That the client will not benefit from any growth in the value of the share of the house sold under this plan
- That the client was advised to consult with family or material beneficiaries of their estate before committing to the Home Reversion Plan
- That the client was informed:
 - That they should take independent legal advice
 - That any existing charges including any outstanding mortgages must be repaid on completion
 - That the applicant(s) will continue to be responsible for any outgoings related to the property
 - That the applicant(s) should not rely on any proceeds from this Home Reversion Plan until it has completed and funds have been received
- The applicant(s) was/were supplied with a personalised illustration, product literature and a letter explaining why this Home Reversion Plan was suitable.

Signed:

Full name:

Date:

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