

# Unsecured-Loan Application Form

## Introducer Information

Brokerage name: All Star Funding Solutions Limited

Sales Person name: Neil Lukins



## Loan Information:

Loan Amount Requested:

Term of Loan:

Details of any adverse credit.

Loan purpose:

## Company Information (If applicable)

Partnership       Limited Company       Sole Trader       LLP

Business Trading Name

Business Address:

City:

Post Code:

Phone number:

Registration Number:

Trading Since:

Number of Employees:

Please outline a summary of the business activity and its operations.

Director/Partner/Shareholder Information- Please provide details for each partner or director who owns more than 25% of the shareholding, please use additional appendix sheet if necessary

Title: Mr	Full Name (including middle name):		
Date of birth:	Home Number:	Mobile Phone:	
Current address:			
Time at this address:	Residential Status:		
Previous address (If you have been at your current address for less than 3 years, please enter your earlier address)			
Business Responsibilities (please select one option)			
<input type="checkbox"/> Chairman	<input type="checkbox"/> Owner	<input type="checkbox"/> Managing Director	<input type="checkbox"/> Sales Director
<input type="checkbox"/> Director	<input type="checkbox"/> Partner	<input type="checkbox"/> Operations Director	<input type="checkbox"/> Finance Director
<input type="checkbox"/> Shareholder			

## Appendix

Director/Partner/Shareholder Information- Please provide details for each partner or director who owns more than 25% of the shareholding, please use additional appendix sheet if necessary

Title:	Full Name (including middle name):		
Date of birth:	Home Number:	Mobile Phone:	
Current address:			
Time at this address:	Residential Status:		
Previous address (If you have been at your current address for less than 3 years, please enter your earlier address)			
Business Responsibilities (please select one option)			
<input type="checkbox"/> Chairman	<input type="checkbox"/> Owner	<input type="checkbox"/> Managing Director	<input type="checkbox"/> Sales Director
<input type="checkbox"/> Director	<input type="checkbox"/> Partner	<input type="checkbox"/> Operations Director	<input type="checkbox"/> Finance Director
<input type="checkbox"/> Shareholder			

Director/Partner/Shareholder Information- Please provide details for each partner or director who owns more than 25% of the shareholding, please use additional appendix sheet if necessary

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Business Responsibilities (please select one option)			
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<input type="checkbox"/> Director	<input type="checkbox"/> Partner	<input type="checkbox"/> Operations Director	<input type="checkbox"/> Finance Director
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Business Responsibilities (please select one option)			
<input type="checkbox"/> Chairman	<input type="checkbox"/> Owner	<input type="checkbox"/> Managing Director	<input type="checkbox"/> Sales Director
<input type="checkbox"/> Director	<input type="checkbox"/> Partner	<input type="checkbox"/> Operations Director	<input type="checkbox"/> Finance Director
			<input type="checkbox"/> Shareholder

#### Information Checklist

<input type="checkbox"/> 3 Months bank statements	<input type="checkbox"/> Up-to-date filed financials (min 2 yrs.)
<input type="checkbox"/> Personal net worth statements	<input type="checkbox"/> Permission to search directors (Inc. DPA)
<input type="checkbox"/> VAT Statements (for VAT loans only)	<input type="checkbox"/> Cash flow statement (if available)

**Please ensure ALL the relevant questions are filled out and information is attached to ensure the application is processed as soon as possible.**

<p><b>Post :</b>                  2 Mount Street,                  Manchester,                  M2 5WQ</p>	<p><b>Enquiries :</b>                  Telephone: 0161 8211478                  Mobile: 07771 430740  <b>E-mail:</b>  <a href="https://www.allstarfunding.co.uk">https://www.allstarfunding.co.uk</a></p>
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