

# Mortgage

Registration form – New Firm/Returning Firm



Please fill in the form using BLOCK CAPITALS and black ink. Tick any boxes which apply.

Santander is able to provide literature in alternative formats. The formats available are: large print, Braille and audio CD. If you would like to register to receive correspondence in an alternative format please visit [www.santander.co.uk/alternativeformats](http://www.santander.co.uk/alternativeformats) for more information, ask us in branch or give us a call.

## Important information

Our aim is to build a business relationship with you, providing the service you need to make your life as easy as possible.

By spending a few minutes completing this form we will be able to set up your company details on our database so we know how and where to contact you with product details and for payment of fees.

Thank you for your interest in registering as an Intermediary with us. We look forward to developing a strong business relationship.

## 1 Firm details

Full legal name of business

Business/trading name to be used on documentation (if different from above)

Country of incorporation (i.e. in which country was the company established?)

Companies House number

Country of operation (if different from country of incorporation)

Firm FCA number

## 2 Firm contact details

Full business address (Registered office)

  
  


Postcode

Full trading address/address for fee statements (if different from above)

  
  


Postcode

Telephone number

Fax number

Email address

## 3A Owners/Partners/Directors/major shareholders (holding shares of 25% or more in the firm, regardless of whether or not they process business)

First owner/partner/director

Title

Mr  Mrs  Ms  Miss

Other

First name

Middle names(s)

Surname

Alias used, if applicable:

Alias title

Mr  Mrs  Ms  Miss

Other

Alias first name

Alias middle name(s)

Alias surname



**3B Owners/Partners/Directors/major shareholders (holding shares of 25% or more in the firm, regardless of whether or not they process business) (continued)**

Employment / Self-employment history (please provide details covering the last 5 years, noting any time in education or unemployment. Continue on a separate sheet if necessary)

Name of business		
Address		
	Postcode	
Dates of employment	From	To

Name of business		
Address		
	Postcode	
Dates of employment	From	To

Name of business		
Address		
	Postcode	
Dates of employment	From	To

**3C Owners/Partners/Directors/major shareholders (holding shares of 25% or more in the firm, regardless of whether or not they process business)**

**Third owner/partner/director**

**Title**  
 Mr  Mrs  Ms  Miss   
 Other

First name

Middle names(s)

Surname

**Alias used, if applicable:**

**Alias title**  
 Mr  Mrs  Ms  Miss   
 Other

Alias first name

Alias middle name(s)

Alias surname

Date of birth

Place of birth (town and country)

Nationality (including dual nationality, if applicable)

Home address  
  
  
  
 Postcode

Position in firm (owner/partner/director etc.)

Date position acquired

National Insurance number

Country of residence

Employment / Self-employment history (please provide details covering the last 5 years, noting any time in education or unemployment. Continue on a separate sheet if necessary)

Name of business		
Address		
	Postcode	
Dates of employment	From	To

Name of business		
Address		
	Postcode	
Dates of employment	From	To

Name of business		
Address		
	Postcode	
Dates of employment	From	To

**3D Owners/Partners/Directors/major shareholders (holding shares of 25% or more in the firm, regardless of whether or not they process business) (continued)**

**Fourth owner/partner/director**

**Title**  
 Mr  Mrs  Ms  Miss

Other

First name

Middle names(s)

Surname

**Alias used, if applicable:**

**Alias title**  
 Mr  Mrs  Ms  Miss

Other

Alias first name

Alias middle name(s)

Alias surname

Date of birth

Place of birth (town and country)

Nationality (including dual nationality, if applicable)

Home address  
  
  
  
 Postcode

Position in firm (owner/partner/director etc.)

Date position acquired

National Insurance number

Country of residence

Employment / Self-employment history (please provide details covering the last 5 years, noting any time in education or unemployment. Continue on a separate sheet if necessary)

Name of business	<input type="text"/>	
Address	<input type="text"/>	
	<input type="text"/> Postcode	
Dates of employment	From <input type="text"/>	To <input type="text"/>

Name of business	<input type="text"/>	
Address	<input type="text"/>	
	<input type="text"/> Postcode	
Dates of employment	From <input type="text"/>	To <input type="text"/>

Name of business	<input type="text"/>	
Address	<input type="text"/>	
	<input type="text"/> Postcode	
Dates of employment	From <input type="text"/>	To <input type="text"/>

**If there are more than 4 owners/partners/directors/major shareholders, please print and complete any additional pages required**

#### 4 Owners/Partners/Directors/major shareholders - Financial and personal history

Have any of the owners, partners or directors of the firm at any time:

A. Been the subject of any investigation, inquiry, or regulatory/enforcement action or proceedings involving actual or alleged financial crime?

Yes  No

B. Been disqualified from acting as a company director?

Yes  No

C. Been the subject of a receiving order?

Yes  No

D. Defaulted on a credit agreement?

Yes  No

E. Entered into an arrangement with creditors?

Yes  No

F. Been declared bankrupt?

Yes  No

G. Been a director of a company which has wound up and declared bankrupt?

Yes  No

H. Been the subject of a court judgement for any outstanding debts?

Yes  No

I. Been convicted of a criminal offence?

Yes  No

If you have answered 'yes' to any of the preceding questions, please provide further information below, continuing on a separate sheet if necessary

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#### 5 Professional standing

A. Does your firm trade entirely from the UK?

Yes  No

B. Does your firm have policies and procedures in place designed to prevent and detect all forms of financial crime (fraud, bribery, corruption and money laundering)?

Yes  No

C. Do your firm's staff receive financial crime prevention, fraud, bribery, corruption and money laundering training?

Yes  No

#### 6 Introducing Business

Do you as a business currently accept any business referrals from introducers – i.e. unregulated individuals or companies?

Yes  No

If you have answered 'No', please ignore the remainder of this section.

What percentage of your overall business is referred from introducers?

%

What percentage of the above is conducted on a non face-to-face basis?

%

How was contact with introducer established?

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What due diligence was performed?

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Please provide the full name(s), business name(s) and addresses for each introducer with whom you deal, continuing on a separate sheet if necessary.

Name of business	
Address	
	Postcode

Name of business	
Address	
	Postcode

**7 Declaration for and on behalf of the intermediary firm**

I/we have read and agree to the Mortgage Terms of Business and Data Protection Agreement with Santander UK plc. You will search at credit reference and fraud prevention agencies who will provide you with publicly held data, including the electoral roll. If I/we give you false or inaccurate information, details may be passed to the credit reference and fraud prevention agencies. You will use the information provided to you by credit reference and fraud prevention agencies to help decide my/our identity and for the prevention and detection of fraud and/or money laundering.

place a search footprint on my/our credit report. This search will not affect my/our ability to gain credit.

The information which you provide to the credit reference and fraud prevention agencies may be supplied by the credit reference agencies to other organisations and used by them to do similar checks, debtor tracing and debt collection and account management.

When credit reference agencies receive a search from you they will

**First owner/partner/director**

Signed

Date

**Second owner/partner/director**

Signed

Date

**Third owner/partner/director**

Signed

Date

**Fourth owner/partner/director**

Signed

Date

**If there are more than 4 owners/partners/directors/major shareholders, please print and sign any additional copies of this page required.**

**ONCE COMPLETE PLEASE FAX TO 0845 602 3293 .  
PLEASE CHECK YOU'VE INPUT THE CORRECT NUMBER BEFORE SENDING.**