



## Income and expenditure form

Net monthly income (Net of Income Tax, National Insurance payments and any tax liability associated with BtL ownership)

	Employment income	Rental income		Employment income	Rental income
Borrower 1	£ <input type="text"/>	£ <input type="text"/>	Borrower 2	£ <input type="text"/>	£ <input type="text"/>
Borrower 3	£ <input type="text"/>	£ <input type="text"/>	Borrower 4	£ <input type="text"/>	£ <input type="text"/>

Essential expenditure	Monthly expenditure
Mortgage / rent (if multiple properties owned please include all mortgage commitments)	£ <input type="text"/>
Mortgage related life premiums	£ <input type="text"/>
Building / contents insurance	£ <input type="text"/>
Additional mortgage payments	£ <input type="text"/>
Loans / motor finance / personal contract agreements	£ <input type="text"/>
Credit / store cards	£ <input type="text"/>
Maintenance payments	£ <input type="text"/>
Non-mortgage related insurance premiums (life, pet, appliance etc.)	£ <input type="text"/>
Personal pensions	£ <input type="text"/>
<b>TOTAL ESSENTIAL EXPENDITURE</b>	£ <input type="text"/>

Other expenditure	Monthly expenditure
Utilities (gas, water, electric & other fuels)	£ <input type="text"/>
Building insurance (if multiple properties are owned please include premiums for all properties)	£ <input type="text"/>
Ground rent and service charges for leasehold properties	£ <input type="text"/>
TV licence / satellite / broadband / landline telephone	£ <input type="text"/>
Mobile phone	£ <input type="text"/>
Council tax	£ <input type="text"/>
Childcare / school / university fees	£ <input type="text"/>
Food, laundry & other living expenses	£ <input type="text"/>
Essential travel (commuting, car servicing, MOT, insurance etc.)	£ <input type="text"/>
<b>TOTAL OTHER EXPENDITURE</b>	£ <input type="text"/>

Where rental properties are owned, please total for all properties:

Rental property expenditure	Monthly expenditure
Management & letting fees	£ <input type="text"/>
Council Tax & service charges	£ <input type="text"/>
Insurance	£ <input type="text"/>
Repairs	£ <input type="text"/>
Rental voids	£ <input type="text"/>
Utilities (gas, water, electric & other fuels)	£ <input type="text"/>
Gas & electric certificates	£ <input type="text"/>
Licence fees & ground rent charges	£ <input type="text"/>
<b>TOTAL RENTAL EXPENDITURE</b>	£ <input type="text"/>

Living expenditure	Monthly expenditure
Socialising	£ <input type="text"/>
Hobbies, club / gym fees	£ <input type="text"/>
Holidays	£ <input type="text"/>
Clothing, personal & household goods, hairdressing etc.	£ <input type="text"/>
Sundries (cigarettes, magazines etc.)	£ <input type="text"/>
Repairs, decoration, gardening etc.	£ <input type="text"/>
Additional savings / investments	£ <input type="text"/>
Other miscellaneous costs	£ <input type="text"/>
<b>TOTAL LIVING EXPENDITURE</b>	£ <input type="text"/>

Committed expenditure	Monthly expenditure
School fees	£
Child maintenance	£
Spousal maintenance	£
<b>TOTAL COMMITTED EXPENDITURE</b>	£

TOTAL EXPENDITURE (Carried forward from page 1)	
TOTAL ESSENTIAL EXPENDITURE*	£
TOTAL OTHER EXPENDITURE	£
TOTAL RENTAL EXPENDITURE	£
TOTAL LIVING EXPENDITURE	£
TOTAL COMMITTED EXPENDITURE	£
<b>SUB TOTAL EXPENDITURE</b>	£
TOTAL NET INCOME	£
<b>DISPOSABLE INCOME (net income minus total expenditure)</b>	£

### Required information

Number of dependent adults       Number of dependent children

Anticipated retirement age:

Borrower one       Borrower two

Borrower three       Borrower four

### Customer declaration

I/We confirm that the Income & Expenditure Form has been completed to the best of my/our knowledge and the information supplied is a reasonable representation of my/our current/future expenditure.

\*If more than one household please complete 2 separate forms.

Name	<input type="text"/>	Name	<input type="text"/>
Signature	<input type="text"/>	Signature	<input type="text"/>
Date	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Name	<input type="text"/>
Signature	<input type="text"/>	Signature	<input type="text"/>
Date	<input type="text"/>	Date	<input type="text"/>