HOUSING FINANCE COMPANY LTD (HFCL)

MORTGAGE APPLICATION FORM

HOUSING FINANCE COMPANY

Housing Loan (Construction of House)		**Vertical Extension Scheme**	
Housing Loan (Purchase of Property)		**House Extension Scheme**	
Second Housing Loan		**Land Loan**	
Additional Loan *(If applicable, tick this box and the loan product being applied)*			

PART A *To be completed by the Main Applicant. Kindly complete all the fields of this form in BLOCK CAPITALS.*

1. PERSONAL AND FAMILY DETAILS

Applicant Full Name(s) | **Family Name:** _____

N.I.N. | **Date of Birth** | **Age**

Marital Status: **Single** | **Married** | **Divorced** | **Widowed** | **Partner**

Dependant (s) | **Age**

Contact Number (s): **Office:** | **Mobile:**

District: | **Email Address:**

Residential Address: _____

_____

_____

Next of Kin - Name(s)

Contact Number (s): **Mobile:** | **Email:**

HFCL Customer Number *(To be inserted by HFCL Loans Officer)*

2. CURRENT RESIDENTIAL STATUS

At the address stated above, you are the:

- ☐ **Owner**
- ☐ **Tenant** **Rent/Month** **SR** _____
- ☐ **Co-habitating**
- ☐ **Living With Parents**

If you are the owner, is there any insurance cover on the property? ☐ **Yes** ☐ **No**

If yes, provide details below:

Name of Insurer	
Type of Policy Held	
Amount of Cover	
Policy No.	
Expiry Date	

Applicant Signature: _____

Date of Application: _____

To be completed by the ***Co-Applicant(s)*** *in BLOCK CAPITALS (Where Applicable)*

3. CO-APPLICANT(S) DETAILS

Co-Applicant (1) Full Name(s)

Relationship to Main Applicant

N.I.N.

Date of Birth:

Age

District:

Marital Status: **Single** **Married** **Divorced** **Widowed** **Partner**

Dependant (s)

Age (1)

Age (2)

Age (3)

Contact Number (s):

Office:

Mobile:

Email:

Residential Address:

Co-Applicant (2) Full Name(s)

Relationship to Main Applicant

N.I.N.

Date of Birth:

Age

District:

Marital Status: **Single** **Married** **Divorced** **Widowed** **Partner**

Dependant (s)

Age (1)

Age (2)

Age (3)

Contact Number (s):

Office:

Mobile:

Email:

Residential Address:

4. CURRENT RESIDENTIAL STATUS

At the address stated, you are the:

Co-Applicant (1)	**Co-Applicant (2)**
☐ **Owner**	☐ **Owner**
☐ **Tenant**	☐ **Tenant**
☐ **Co-habitating**	☐ **Co-habitating**
☐ **Living With Parents**	☐ **Living With Parents**
SR _____ **Rent/Month**	**SR** _____ **Rent/Month**

Co-Applicant (1) Signature: _____

Co-Applicant (2) Signature: _____

Received by HFCL Officer (Name/Signature): _____

Date / Stamped Received by HFCL Officer: _____

HFCL Customer Number ***(To be inserted by HFCL Loans Officer)***

Co-Applicant (1) ☐

Co-Applicant (2) ☐

PART B ***To be completed by Applicant and Co-Applicant(s) in the presence of a HFCL officer.***

CONSENT OF DATA SUBJECT

Purpose

I/ We, _____ **of *NIN** _____
Applicant's Name

_____ **of *NIN** _____
Co-Applicant (1) Name

_____ **of *NIN** _____
Co-Applicant (2) Name *'*NIN or Passport Number can be used*

provide consent to the **Housing Finance Company Limited**, hereby referred to as **HFCL**, for the retrieval of my / our information contained within the Credit Information System (CIS), as established by the Credit Reporting Act, for the following purpose(s):

☐ to be used as part of an application for a.....….....and its management;

☐ for personal use.

Submission, access and use of data

1/We consent to information relating to the facility being procured from the above-mentioned entity to be submitted to the CIS and consent that this information may be accessed, processed and used by persons authorised in accordance with the Credit Reporting Act.

Signature:

_____	_____	_____
Applicant	*Co-Applicant (1)*	*Co-Applicant (2)*

In the absence of a signature, insert fingerprint in the box below or produce valid photo identification.

_____

Witnessed by:

Name: _____

Signature: _____

Date: _____

This Consent form is to be stamped with HFCL CIS Stamp and signed by HFCL Officer, confirming that the information on the form is correct.

PART C ***To be completed at Housing Finance Company Ltd. (HFCL)***

5. EMPLOYMENT DETAILS ***(WHERE APPLICABLE)***

	Main Applicant	Co-Applicant (1)	Co-Applicant (2)
Employed (Salaried)	☐	☐	☐
Self Employed	☐	☐	☐
Contract	☐	☐	☐
Other	☐	☐	☐

Employer's / Business Name and Address

(1)	(2)	(3)

	Job Title (Salaried /Contract Applicants)	Number of Years with Current Employer
(1)		
(2)		
(3)		

If less than one year with current employer, provide details of previous employment below

	Previous Employer	Job Title	Number of Years
(1)			
(2)			
(3)			

Self Employed Applicants ***(Provide full details of business and attach latest financial statements/audited accounts)***

	Business Name	Job Title	Duration in Business
(1)			
(2)			
(3)			

PART D *To be completed at Housing Finance Company Ltd. (HFCL) at the time of loan interview*

6. INCOME AND EXPENDITURE

(a) MONTHLY INCOME *(Attach copies of latest payslips)*
MONTHLY NET INCOME SHOULD NOT EXCEED SCR30,000.00
(Same applies where co-applicants are applicable; i.e. not exceeding SCR30,000.00 net combined income)

	(1)	(2)	(3)		TOTAL
Monthly Income *(Gross)*	SR	SR	SR		SR
Other Income	SR	SR	SR		SR
Net Income *After Tax/Pension*	SR	SR	SR	**(A)**	SR

(b) MONTHLY EXPENDITURES

	(1)	(2)	(3)		TOTAL
Loan Repayments	SR	SR	SR	**(B)**	SR

TOTAL COMBINED NET INCOME **(A - B)**	SR	**(C)**

Credit Card *(if applicable)*	SR	SR	SR		
Insurance	SR	SR	SR		
Utilities *(Water/Elect/Tel)*	SR	SR	SR		
School Fees (*Incl. Daycare)*	SR	SR	SR		
Alimony	SR	SR	SR		
Others *(specify)*	SR	SR	SR		
					TOTAL COMBINED
Total Expenditure (D)	SR	+ SR	+ SR	=	SR
Net Surplus (C - D)	SR	+ SR	+ SR	=	SR

7. BANK DETAILS *(specify if for applicant or co-applicant/s)*

Applicant *(Ex. Main, 1, 2)*	Name of Bank(s)	Account Type / Number(s)	Latest Balance (SR)

8. PROJECT DETAILS

Details of Property:

Land Parcel Number	
Location of Land	
Size of Land	

For Property Purchase (House plus land), provide the details below

Name of Owner _____

Address of Owner _____

_____

Contact Details of Owner _____

Estimated value of property (Attach Property Valuation Certificate)	**SR**

9. PROJECT FINANCING

INVESTMENT COSTS:

Cost of Property (Land / House)		**SR**	
Cost of Land		**SR**	
Architect / Other Fees		**SR**	
Preliminary Works		**SR**	
Construction Cost	**(A)**	**SR**	***(Contractor's Quotation or Cost Estimate by HFCL Building Inspector)***
TOTAL COST		**SR**	

FINANCING:

HFCL Loan		**SR**	**5% Personal Contribution**	**SR**
TOTAL LOAN *(inclusive of contribution)*	**(B)**	**SR**		
Deficit from Quotation		**SR**	**(A - B)**	
Subsidy (if applicable)		**SR**		
Deficit after Subsidy		**SR**	***To be injected by client from personal savings***	

10. LOAN DETAILS

Loan Amount Qualified	**SR**
Contingency Fund	**SR**
Visit Fee	**SR**
TOTAL LOAN	**SR**
Interest Rate	**%**
Repayment Term	
Monthly Loan Repayment	**SR**

4% ☐ **5%** ☐

Repayment at Minimum DSR (30%)	**SR**
Repayment at Maximum DSR (45%)	**SR**

Applicable DSR **%**

Note: Applicable DSR = $\frac{\textit{Monthly Loan Repayment}}{\textit{Total Combined Net Income}}$

Repayment to be made by:	**Salary Deduction**	**Standing Order**	**Repayment Amount**
Applicant			**SR**
Co-Applicant (1)			**SR**
Co-Applicant (2)			**SR**

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11. SECURITY DETAILS

Is the security offered charged to other Financial Institutions? **Yes** ☐ **No** ☐

If Yes, provide the following details:

Name of Financial Institution(s)	**Security Offered**

Security Being Offered for HFCL Loan

1st Line Charge ☐ **2nd Line Charge** ☐ **3rd Line Charge** ☐

4th Line Charge ☐ **5th Line Charge** ☐ **6th Line Charge** ☐

I/We hereby certify that the information contained in this application is correct and it provides a full and complete picture of my/our financial position. You are hereby authorized to obtain any confirmation you may require about the information disclosed in this application from my/our employer(s), banker(s) or other, in order to consider this application.

I/We understand that the Housing Finance Company Ltd (HFCL) will charge me/us another 4% or 5% of my/our loan amount as Contingency Fee, which in the event of the natural death of me/us, the borrower(s), HFCL shall pay off the balance outstanding on the date of death. We also take note that a Visit Fee is applicable, which together with the Contingency Fee, is payable to HFCL at the time of disbursement of the loan.

I/We also understand that the HFCL will charge me/us a Processing Fee, which is payable prior to the approval of the loan and that same is non-refundable should we decide to cancel the loan at any time during the processing.

I/We understand that the approval of the loan will be subject to other terms and conditions, some of which may have a cost, which will be borne by me/us by debit to the loan account.

Applicant Signature: _____ **Co-Applicant (1) Signature:** _____

Date: _____ **Co-Applicant (2) Signature:** _____

PART E *To be completed at Housing Finance Company Ltd. (HFCL)*

POLITICALLY EXPOSED PERSON (PEP) SELF-DECLARATION FORM

1 Are you currently holding or have held one of the positions listed below in the previous 3 years either in Seychelles, or any other country, or for an international body or organisation?

POSITIONS	Applicant		Co-Applicant 1		Co-Applicant 2	
(a) Heads of State / Government	Yes	No	Yes	No	Yes	No
(b) Minister	Yes	No	Yes	No	Yes	No
(c) Senior Politician	Yes	No	Yes	No	Yes	No
(d) Ambassador / Chargés D'affaires;	Yes	No	Yes	No	Yes	No
(e) Honorary Consul	Yes	No	Yes	No	Yes	No
(f) Senior Government Official	Yes	No	Yes	No	Yes	No
(g) Judiciary Official	Yes	No	Yes	No	Yes	No
(h) Member of the Board of Central Bank of Seychelles	Yes	No	Yes	No	Yes	No
(i) Member of the Board of State-Owned Corporations	Yes	No	Yes	No	Yes	No
(j) Influential Political Party Official	Yes	No	Yes	No	Yes	No
(k) High Ranking Officer in the Armed Forces	Yes	No	Yes	No	Yes	No

If you have responded "Yes" to the above, please complete the below information.

Details of the position and the period held in the position.

Applicant: _____

Co-Applicant 1: _____

Co-Applicant 2: _____

2 Is your spouse / partner (i.e. equivalent to a spouse under your national law), children and their spouses / partners, parents or siblings) holding or have held one of the positions listed above in the previous 3 years?

If you have responded "Yes" to the above, please complete the below information.

Details of the position and member of your family holding the position.

Applicant: _____

Co-Applicant 1 _____

Co-Applicant 2: _____

3 Are you in a business partnership with a person or holding a business entity on behalf of a person who is holding or have held one of the positions listed above in the previous 3 years?

If you have responded "Yes" to the above, please complete the below information.

Please list the name(s) of the business and the person(s) involved.

Applicant: _____

Co-Applicant 1 _____

Co-Applicant 2: _____

I hereby certify that the information contained in this self-declaration form is correct and I undertake to promptly. notify the Housing Finance Company Ltd (HFC) of any changes in the information provided.

Name of Applicant _____ **Signature** _____

Name of Co-Applicant 1 _____ **Signature** _____

Name of Co-Applicant 2 _____ **Signature** _____

PART F ***To be completed by the Loans Officer at Housing Finance Company Ltd. (HFC)***

Remarks / Recommendations

HFC OFFICER:

Name	
Designation	
Signature	
Date	