

WEEKEND DEALER
SUPPORT UNIT
TEL: 0870 6070717
FAX: 0870 6020233



Close Motor Finance Ltd.

Finance Proposal

No Insurance

Date:
Dealer:
Contact:
Tel:
Fax:
Email:

Branch:

APPLICANT DETAILS

Mr / Mrs / Ms. Surname _____
First Names: _____ Previous Surname: _____
Home Address: _____
Post Code: _____ Years At Address: _____
Home Tel. No. _____ Mobile No. _____
Work Tel _____ E-mail _____
Previous Address (if less than 5 years) _____
Post Code: _____ Years At Address: _____
Date of Birth ____ / ____ / 19 ____
Single Married Separated Divorced
Living with Partner Widow Other
Owner Tenant Furnished Living with Parents
Mortgaged Tenant Unfurnished Co-Habiting
Council Private Tenant
Driving Licence

JOINT APPLICANT DETAILS

Relationship to Customer _____
Mr / Mrs / Ms. Surname _____ Previous Surname: _____
First Names: _____
Home Address: _____
Post Code: _____ Years At Address: _____
Home Tel. No. _____ Mobile No. _____
E-mail _____
Previous Address (if less than 5 years) _____
Post Code: _____ Years At Address: _____
Date of Birth ____ / ____ / 19 ____
Owner Tenant Other _____

EMPLOYMENT DETAILS

Occupation _____ How Long _____
Employers Name _____
Address _____ Post Code: _____
Tel No. _____

EMPLOYMENT DETAILS

Occupation _____ How Long _____
Full Time Part Time Self Employed
Employers Name _____
Address _____
Post Code: _____
Annual Salary _____
Previous Employer (if less than 3 years)
Occupation _____ How Long _____
Employers Name _____
Address _____
Post Code: _____
Tel. No. _____ Annual Salary _____

GOODS & FINANCIAL DETAILS

Make: _____ Model: _____
Doors: ____ Date of 1st Reg. ____ / ____ / ____ Eng. cc _____
Mileage: _____ Reg No.: _____
Import: YES / NO Extras: _____
Cash Price: £ _____
Less Cash Deposit: £ _____
Less Part Exchange: £ _____
Advance Required: £ _____
Rate: _____ Period _____ Instalment _____
Balloon (if applicable) £ _____ Annual Mileage _____ Payable Month _____

BANK DETAILS

Bank Name: _____
Address: _____
Post Code: _____
Sort Code: _____ Account Name: _____
Account Number: _____ Years Held: _____

ADDITIONAL INFORMATION

USE OF YOUR INFORMATION

In considering this application we may disclose details about you and your conduct to any credit reference or fraud prevention agency, and keep a record of our enquiries. Any information we provide to a credit reference or fraud prevention agency will be recorded and retained by them. We will check your details with any fraud prevention agency and, if you give us false or inaccurate information and we suspect fraud we will record this.

We and other organisations may use and search these records for the following purposes:

- Performance by us of any contract you and we may be a party to
- Help make decisions about credit and credit related services, for you and members of your household.
- Help make decisions on motor, household, credit, life and other insurance proposals and insurance claims, for you and members of your household.
- Trace debtors, recover debt, prevent fraud, and to manage your accounts.
- Check your identity to prevent money laundering, unless you furnish us with other satisfactory proof of identity.
- Statistical information.

We may use credit scoring or other automated decision making systems when assessing your application. If we are unable to proceed with your application, we may pass such details to other selected businesses that may also conduct searches at credit reference and fraud prevention agencies. If you make a joint application, the credit reference and fraud prevention agencies will link together your records, details and information. Such links will remain on your credit reference files until such time as you or your joint applicant successfully applies for a disassociation. We may also pass your details to other associated companies within the European Union where reasonably necessary for the above purposes. By agreeing to proceed with this application you hereby consent to our processing such details for these purposes. You have a right, on payment of a fee, to receive a copy of the information we hold about you. You also have a right to receive the details of those parties to whom we have disclosed your information, or from whom we have obtained information about you. Please contact us on 01302 646464 for details. We may contact you from time to time with information about our products that may be of interest to you, by post or by telephone.

If you do not wish to receive such information, please tick the box

We may pass your details to other associated companies within the European Union who may contact you from time to time with information about their products that may be of interest to you, by post or by telephone. If you do not wish to receive such information, please tick the box

Signed _____ Date _____
Applicant (Data Subject)
Signed _____ Date _____
Joint Applicant/Guarantor (Data Subject)
Signed _____ Date _____

Dealer, I confirm that the above Applicant/s fully understand the contents of this notice.

Close Motor Finance Limited is an appointed representative of Close Brothers Limited, which is authorised and regulated by the Financial Services Authority in respect of general insurance activities only.