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Limited Company Application Form

COMPANY DETAILS			
Trading Name:			
Address:			
			Post Code:
Telephone No.:	How long Co trading:		Fax:
		years	months
Email:	Company Reg. No.:		VAT Reg. No.:
		Date Est:	
Nature of Business:			
Amount of finance required:		Purpose of Finance:	

DIRECTOR / PARTNER / SOLE TRADER DETAILS			
Director / Partner 1			
Surname:		All Forenames:	
Address:			
			Post Code:
Time at Present Address:	years	months	Property Type:
Previous Address (if less than 5 years):			
			Post Code:
Previous Address (if less than 5 years):			
Mobile Tel. No.:		Post Code:	
Marital Status:		Date of Birth:	
Director / Partner 2			
Surname:		All Forenames:	
Address:			
			Post Code:
Time at Present Address:	years	months	Property Type:
Previous Address (if less than 5 years):			
			Post Code:
Previous Address (if less than 5 years):			
Mobile Tel. No.:		Post Code:	
Marital Status:		Date of Birth:	

BANK DETAILS	
Name of Bank:	Branch:
Address:	
Post Code:	
Account Name:	Time with Bank:
Account Number:	Sort Code:

DATA PROTECTION ACT DECLARATION		
Please be advised that this is an application for credit and as such the finance house to which an application will be submitted, may carry out a search with a credit reference agency.		
Please sign below indicating your acknowledgement and agreement.		
Signature:	Print Name:	Date:

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