

Email: info@jms-financial.co.uk
Visit: www.jms-financial.co.uk

Call: +44 (0) 20 8871 2266

Fax: +44 (0) 20 3397 9042

Quick Enquiry Form								
BROKER DETAILS								
First Name:				S	urname:			
Company:				N	letwork Na	me:		
Telephone Number:				N	Лobile Num	ıber:		
Email Address:								
CLIENT DETAILS	(please se	elect)	Individual / Partnership / Limted Co				o. / Other:	
Borrower Name:								
Correspondence Addres	s:							
			Postcode:				Country:	
Occupation:								
Telephone Number:			Mobile Number:					
Email Address:								
PROPERTY TO BE FINAN	ICED							
Security Address:	ICLD							
			Postcode				Country:	
Purpose of Loan:								
Property description:								
Tenure:	(please se	elect)	Freehold	l / Lea	isehold / F	euhold		
If leasehold please confi						years		
Date Purchased or Estimated Date for Comp			letion:		/	/		DD / MM / YYYY
Value:			GBP £					
Original or Proposed Purchase price:			GBP £					
Occupancy:	(please se	elect)	Owne	er / L	et / Part	& Part		
Rental Income:		GBP £						
Loan Amount:		GBP £						
Loan Term:				months / years				
Any other relevant inform	ation:							