



# Application Form

Your Name Position  
 Contact Number Email  
 Business Name  
 Trading Style Sole Trader Partnership LTD Company LLP  
 Company Reg No: Established Owned Since  
 Business Address

Purpose of Finance  
 Amount to Finance +VAT Incl VAT Repayment Term  
 Any Additional Information

Applicant 1 - Full Name & Title	Applicant 2 - Full Name & Title	Applicant 3 - Full Name & Title
Professional Body Reg No:	Professional Body Reg No:	Professional Body Reg No:
Date of Birth	Date of Birth	Date of Birth
Home Address (incl Post Code)	Home Address (incl Post Code)	Home Address (incl Post Code)
Move in Date	Move in Date	Move in Date
Owned/Rented	Owned/Rented	Owned/Rented

If less than 3 years please provide previous address details below

*I confirm that all parties both Business and Individuals authorise Abacus Professions Finance Ltd to pass information to third parties to seek finance approvals and undertake credit checks using credit reference agencies.*

Signed

Dated