

Taxable Income of the Household

Tax Year: _____

Gross Yearly Income of the First Applicant: , EUR

Net Yearly Income of the First Applicant : , EUR

Gross Annual Income of the Second Applicant: , EUR

Net Yearly Income of the Second Applicant : , EUR

Other Charges

	Mortgages	Others
Credit Institutions:	<input type="text"/> , <input type="text"/> EUR	<input type="text"/> , <input type="text"/> EUR
Remaining period:	<input type="text"/> , <input type="text"/> EUR	<input type="text"/> , <input type="text"/> EUR
Present amount of the loan:	<input type="text"/> , <input type="text"/> EUR	<input type="text"/> , <input type="text"/> EUR
Present amount of the installment (per month):	<input type="text"/> , <input type="text"/> EUR	<input type="text"/> , <input type="text"/> EUR

Signature

I (we) declare that I am (we are) aware that:

- the loan shall be guaranteed by a 1st mortgage on the property(s) that is the subject of the financing;
- at the date when the deed is drawn up, there must not be any burdens or charges on the property subject to the mortgage;
- the Bank's decision shall be conditional on the appraised value of the property, made by Banif, and on the absence of legal or technical conditions that prevent the deed from being drawn up;
- life insurance for a minimum amount equal to the amount of the loan and for the same period of time is required;
- the financing may be subject to reassessment by Banif where, within a maximum period of 90 days after receipt of the form setting out the list of documents necessary for the deed, all of the documentation referred to therein has not been delivered;
- all of the sections of this form must be filled, and omissions or inaccuracies shall be the liability of the client;

- I (we) authorize Banif to take such measures as it deems appropriate to verify the accuracy of the information supplied. Should Banif find any discrepancies or inaccuracies referring to this information, it shall be entitled to deem terminated all loans or other obligations arising from any transactions entered into by me (us) with Banif and to demand its immediate repayment;

- I (we) also authorize Banif to process automatically the information produced. I (we) have the right to know what information directly relates to me, and to request that it be corrected, supplemented or eliminated, by written or personal contact to this effect, at any Branch of the Bank;

- I (we) also authorize Banif to consult the liabilities that are registered in my (our) name at the with the Bank of Portugal;

- I (we) also authorize the debiting of all costs arising from the procedure.

Signature _____

Date _____

Área de Negócio
Conferência de preenchimento e assinatura(s)

(Assinatura e carimbo da Área de Negócio)



Mortgage Application

Confidential Information

Guarantors

Name of Applicants : _____

Branch no.

Proposal no. _____

Identification of guarantors

1st Guarantor

Tax Number:

Name: _____ Gender: (M/F)

Nationality: _____ Date of Birth:

Address: _____

Country: _____ Postal Code: -

ID Number: Passport: Other No.

Telephone (home): (work) (other)

Profession: _____ Profession Membership: _____ Training: _____

Employment status: _____ No. of years of present employment: _____ Marital Status: _____

Accommodation situation: _____ Years in present accommodation _____ Num. of dependents: _____

Banks used: _____ Person (company) to contact in Portugal: _____

2nd Guarantor

Tax Number:

Name: _____ Gender: (M/F)

Nationality: _____ Date of Birth:

Address: _____

Country: _____ Postal Code: -

ID Number: Passport: Other No.

Telephone (home): (work) (other)

Profession: _____ Profession Membership: _____ Training: _____

Employment status: _____ No. of years of present employment: _____ Marital Status: _____

Accommodation situation: _____ Years in present accommodation _____ Num. of dependents: _____

Banks used: _____ Relationship: _____

Taxable Income of the Household

Tax Year: _____

Gross Yearly Income

Net Yearly Income

First Applicant: , EUR

, EUR

Second Applicant: , EUR

, EUR

Signature

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Signature _____

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