## **Product Transfer Selection Form**

Please complete and return this form to ProductTransfer@thetipton.co.uk

Once the form is fully completed and received by us, we will process your request within three working days.

Without this fully completed form, we will be unable to progress your request further.

If you have not submitted by Mortgage Intermediary Regi		ast 12 months, you will not be registere	d as a broker with the Society. Ple	ease also ensure you complete our		
Customer and Adv						
Account number Applicant(s) name			]			
Adviser name Company name						
FCA number						
<b>Product Transfer S</b>	election					
How was your advice given to the applicant(s)?		Face to face	Telephone	In Writing		
Product applied for	Product code					
	Product description					
=		nave the choice of adding to the mortga ortgage, and you will be charged intere		letion. If you choose to add the fees to the		
Arrangement fee	£	Add fee to the n	nortgage	Pay the fee upon completion		
Please state any other fees that will be charged to the applicant(s)						
Type of fee		Amount	£			
Fee paid	On application	On completion				
Refundable	Yes	No				
Procuration Fee Pa	ayment					
Please ensure the appropria	te payment route is selected	d to guarantee that the correct procura	ation fee is paid on completion of	the product transfer.		
Payment of procuration fee		Direct	Principal	Mortgage Club		
Please indicate if this applica	ation is being submitted via	one of the specific mortgage clubs liste	ed to ensure that the procuration	fee is paid on completion.		
Mortgage Club						
Please indicate the name of	your Mortgage Club:					

## **Additional Information**

## **Adviser Declaration**

- I confirm I have attained permission from the applicant(s) named above to submit a product transfer application on their behalf. I confirm that a Product Transfer Authority Form has been completed prior to submitting this Product Transfer Selection Form.
- I confirm that the personal data given for the applicant(s) named above is true to the best of my knowledge and belief. I undertake to advise the Society immediately of any changes to the personal data I have provided in this product transfer application.
- I confirm I am authorised to act on behalf of the applicant(s) named above relating to this particular product transfer application and I am acting within my authority.
- The personal data for the applicant(s) named above will only be used in conjunction with the needs of the applicant(s). I accept responsibility for the security of any personal data provided to me.
- I confirm that I/my company have/has the necessary permissions from the FCA to advise, complete and submit this product transfer application to the Society on behalf of my/our clients.
- Based on my knowledge of the applicant(s) the product transfer is suitable for the applicant(s).

Adviser signature		Date	
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& coseley building society