

# APPLICATION FORM Micro loans £1,000-£50,000

CONFIDENTIAL



Please complete all sections in full using BLOCK CAPITALS and the relevant boxes.

Please tell us about your business.		
Name of business, (including trading name and/or registered corporate name, if these are different):	Date of formation:	
	Registered number:	
	VAT reg no. (if applicable):	
	Business type:	
	Limited company	<input checked="" type="checkbox"/>
	Sole trader	<input checked="" type="checkbox"/>
Partnership	<input checked="" type="checkbox"/>	
Registered office address:	Business address (if different to registered address):	
Postcode:	Postcode:	
Telephone:	E-mail:	
Fax:	Website:	
Please provide details of any group and/or related undertakings:		
Please provide a brief description of the business:		
Who do you provide services to, or do business with (e.g. general public, UK companies, overseas companies etc)?		

Please tell us about your funding requirement.			
How much funding are you applying for from Finance Wales?	£		
Your preferred investment term (1-5 years):			
Purpose of investment:			
Available security and approximate value:			
Please detail the total funding from other sources for this project			
Source:	Amount £:	Source:	Amount £:

Total project cost £



**Please tell us about your professional advisers.**

Bank		Other funders (e.g. asset lenders, invoice financiers etc)	
Name:		Name:	
Address:		Address:	
	Postcode:		Postcode:
Telephone:		Telephone:	
Solicitor		Accountant	
Name:		Name:	
Address:		Address:	
	Postcode:		Postcode:
Telephone:		Telephone:	

**Please answer the following questions.**

Have you approached any other lender(s) for this finance?	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
Have you ever been refused finance for this project?	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
If yes, please provide details:				
Has the business ever had any County Court Judgements, whether satisfied or not? If yes, please provide court details and reference number:	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
Does the business have any legal or arbitration proceedings pending or threatened?	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
Does the business have any outstanding or overdue creditors?	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are your VAT, tax and PAYE paid to date?	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
Is this a start-up company?	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
Is the business a social enterprise?	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
Does your business have a beneficial owner*? If yes please provide details.	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
*A beneficial owner is an individual who ultimately owns or controls directly or indirectly more than 25% of the shares in a business.				
What is your preferred language?	English	<input checked="" type="checkbox"/>	Welsh	<input checked="" type="checkbox"/>
In which Unitary Authority is the business located?				
The number of full-time and part-time employees:	Full-time	<input checked="" type="checkbox"/>	Part-time	<input checked="" type="checkbox"/>
Number of jobs to be created:	Full-time	<input checked="" type="checkbox"/>	Part-time	<input checked="" type="checkbox"/>
Number of jobs to be safeguarded:*	Full-time	<input checked="" type="checkbox"/>	Part-time	<input checked="" type="checkbox"/>
*A job safeguarded is an existing permanent, paid job at risk of being lost within one year if the requested funding is not obtained.				
Your business's annual turnover at the last year end:	£			
Your business's balance sheet total at the last year end:	£			
Your business's annual profit/loss at the last year end:	£			

Finance Wales can only support businesses that are small and medium-sized enterprises (SMEs) as defined by the European Commission. A business which exceeds the current thresholds of 250 employees, turnover of €50m or balance sheet of €43m is unlikely to be eligible for our funding.

**How did you hear about Finance Wales?**

Press	<input checked="" type="checkbox"/>	Event	<input checked="" type="checkbox"/>	If you ticked business adviser, please provide their details below:	
Finance Wales representative	<input checked="" type="checkbox"/>	Name of adviser:			
Business adviser	<input checked="" type="checkbox"/>	Address:			
E-mail communication	<input checked="" type="checkbox"/>				
Finance Wales website	<input checked="" type="checkbox"/>	Other website	<input checked="" type="checkbox"/>	Telephone:	Postcode:



**Each director, shareholder of 25%+\* and authorised signatory should complete the following parts of this application to help us to comply with our customer due diligence requirements.**  
**\*If two or more connected persons are shareholders who together hold 25%+ of the shares they should also provide their details.**  
**For these purposes connected persons are spouse, civil partner, sibling, parent or grandparent.**

<b>First applicant:</b> Please fill in the appropriate boxes.				<b>Second applicant:</b> Please fill in the appropriate boxes.			
Director	<input checked="" type="checkbox"/>	25%+ shareholder	<input checked="" type="checkbox"/>	Director	<input checked="" type="checkbox"/>	25%+ shareholder	<input checked="" type="checkbox"/>
Authorised signatory	<input checked="" type="checkbox"/>			Authorised signatory	<input checked="" type="checkbox"/>		
If you are 25%+ shareholder, please tell us the percentage you hold:		XX%		If you are 25%+ shareholder, please tell us the percentage you hold:		XX%	
Title:	Forename(s):			Title:	Forename(s):		
Middle name(s):				Middle name(s):			
Surname:				Surname:			
Date of birth	d	d	m	m	y	y	y
Any other name you have been, or are, known by:				Any other name you have been, or are, known by:			
Current residential address:				Current residential address:			
			Postcode:				Postcode:
Preferred contact number:				Preferred contact number:			
Mobile number:				Mobile number:			
Period at this address	Years	Months		Period at this address	Years	Months	
Home owner	<input checked="" type="checkbox"/>	Tenant	<input checked="" type="checkbox"/>	Home owner	<input checked="" type="checkbox"/>	Tenant	<input checked="" type="checkbox"/>
Previous residential address (if at current address for less than three years):				Previous residential address (if at current address for less than three years):			
Period at this address	Years	Months		Period at this address	Years	Months	
Have you ever approached Finance Wales for funding before?				Have you ever approached Finance Wales for funding before?			
			Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>				Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Have you ever been involved in a failed business?				Have you ever been involved in a failed business?			
			Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>				Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Have you ever been disqualified as a director?				Have you ever been disqualified as a director?			
			Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>				Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Have you ever been bankrupt?				Have you ever been bankrupt?			
			Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>				Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, please provide court details and reference numbers:				If yes, please provide court details and reference numbers:			
Do you have any County Court Judgements? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>				Do you have any County Court Judgements? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>			
If yes, please provide court details and reference numbers:				If yes, please provide court details and reference numbers:			

**I have read and understood the disclosures and agreements on page 6.**  
**In signing here I confirm that the details in this application are accurate and the information provided is correct.**

Signed:	Signed:
Print name:	Print name:
Position:	Position:
Date:	Date:



**Third applicant:**

Please fill in the appropriate boxes.

Director  25%+ shareholder Authorised signatory If you are 25%+ shareholder, please tell us the percentage you hold: Title:  Forename(s): Middle name(s): Surname: Date of birth        Any other name you have been, or are, known by: Current residential address: Postcode: Preferred contact number: Mobile number: Period at this address  Years  Months Home owner  Tenant Previous residential address (if at current address for less than three years): Period at this address  Years  Months Have you ever approached Finance Wales for funding before? Yes  No Have you ever been involved in a failed business? Yes  No Have you ever been disqualified as a director? Yes  No Have you ever been bankrupt? Yes  No If yes, please provide court details and reference numbers: Do you have any County Court Judgements? Yes  No If yes, please provide court details and reference numbers: **Fourth applicant:**

Please fill in the appropriate boxes.

Director  25%+ shareholder Authorised signatory If you are 25%+ shareholder, please tell us the percentage you hold: Title:  Forename(s): Middle name(s): Surname: Date of birth        Any other name you have been, or are, known by: Current residential address: Postcode: Preferred contact number: Mobile number: Period at this address  Years  Months Home owner  Tenant Previous residential address (if at current address for less than three years): Period at this address  Years  Months Have you ever approached Finance Wales for funding before? Yes  No Have you ever been involved in a failed business? Yes  No Have you ever been disqualified as a director? Yes  No Have you ever been bankrupt? Yes  No If yes, please provide court details and reference numbers: Do you have any County Court Judgements? Yes  No If yes, please provide court details and reference numbers: **I have read and understood the disclosures and agreements on page 6.****In signing here I confirm that the details in this application are accurate and the information provided is correct.**Signed: Print name: Position: Date: Signed: Print name: Position: Date: 

Please continue on a separate sheet, if necessary.



## Applicants' identity.

As part of the application process we require two pieces of identification, **one piece from List 1 to verify identity and a second piece from List 2 to verify address.** Certified copies of all identification documents should accompany the application form. A certified copy means a photocopy of the original which is signed by someone who is not a direct relative. The person certifying the documents should be a professional person (e.g. lawyer, accountant, post master/sub-master, banker, teacher, doctor). They must have seen the original and must write above their signature that the copy is a true replica of the original and (if applicable) that the photograph bears a true likeness. They must state their capacity, contact details and the date of signature.

## PLEASE DO NOT SEND FINANCE WALES ORIGINAL PIECES OF IDENTIFICATION.

Professional advisers who are FCA regulated may supply a CVIC (Confirmation of Verification of Identity Certificate) for each named person on the application form provided it is fully completed and of sufficient quality.

List 1: Photographic ID/Proof of Name	Applicant 1	Applicant 2	Applicant 3	Applicant 4
Current signed passport	X	X	X	X
Current UK or EEA Photocard Driving Licence (inc. provisional)	X	X	X	X
EEA or Swiss National Identity Card	X	X	X	X
Firearms Certificate or Shotgun Licence	X	X	X	X
Northern Ireland Voters' Card	X	X	X	X
ID Card issued by Home Office/UK Border Agency	X	X	X	X
List 2: Address Verification	Applicant 1	Applicant 2	Applicant 3	Applicant 4
Notification of entitlement to state or local authority benefit /Pension/Tax Credit/Grant*	X	X	X	X
HMRC Coding/Assessment/Statement/Tax Credit /Correspondence*	X	X	X	X
Bank statement (not internet printed)**	X	X	X	X
Mortgage statement from a recognised lender*	X	X	X	X
Utility bill or statement (not mobile phone, satellite/cable TV or internet printed bills)**	X	X	X	X
Local Authority council tax bill*	X	X	X	X
Local council rent card or tenancy agreement*	X	X	X	X
DWP correspondence confirming benefits or pension*	X	X	X	X

\*Must be the most recently issued document and less than 12 months old.

\*\*Must be the most recently issued document and less than 3 months old (except water bills – less than 12 months old).

## Please provide the following additional information to enable us to process your application quickly.

A business plan	X
2 years' cash flow, profit and loss and balance sheet forecasts by month for loans over £25,000 up to £50,000	X
1 years' cash flow, profit and loss and balance sheet forecasts by month for loans from £1,000 to £25,000	X
Copy bank statements for the previous 3 months	X
2 years' annual accounts (where available)	X
Most recent management accounts	X
Aged debtors and creditors in line with your management accounts	X
Detailed CVs for all directors and other key employees	X
Applicants' identification (as set out above)	X



## Disclosures and agreements

Please read the following important information carefully. This sets out how Finance Wales Investments (10) Limited and its associates collectively described as 'FW' will use the information provided in this application as well as necessary authorisations which respective applicants referred to as 'I', 'We', 'me', 'us', 'you' are providing to FW. False or misleading information will result in the application being declined without further explanation.

- 1 I/We certify the information provided is true and accurate.
- 2 I/We authorise FW to request searches from credit reference agencies to look at publicly available information about the business and the applicants associated with the business.
- 3 I/We authorise FW to conduct other investigations required in the assessment of this application including statistical analysis to test the repayment of any funding provided.
- 4 I/We acknowledge that FW may share information about me/us with third parties such as credit reference agencies, financial crime prevention organisations, the Welsh Government and associated agents both for the assessment of this application, the prevention of financial crime and on-going management of any funding provided.
- 5 I/We agree that the information and supporting documentation provided will be used by FW to assess this application and FW's decision is final.
- 6 We can also provide you with information about other services available to help your business.  
 Please tick this box if you would like to receive this information.
- 7 Where appropriate we will make searches about you at credit reference agencies, who will supply us with credit information as well as information from the Electoral Register. These agencies will record details of any searches whether or not this application proceeds.
- 8 Credit searches and other information provided to us about you and those with whom you are linked financially may be used by FW and other companies if credit decisions are made about you or other members of your household. This information may also be used for debt tracing as well as the on-going management of any funding we provide.
- 9 We may use credit-scoring methods to assess this application.
- 10 Any information provided by you may be held by FW in its computer records to manage any funding provided and may be shared within FW and with third parties to protect both ourselves and our customers against fraud.
- 11 In order to prevent or detect fraud the information provided in this application form will be shared with fraud prevention agencies. It is therefore vital that you provide accurate information at all times. If false or inaccurate information is provided and fraud is identified details will be passed to fraud prevention agencies.
- 12 You are entitled to copies of any personal data held about you by FW and ask for any inaccuracies to be corrected.

Please submit your completed application form to your Finance Wales regional office below:

Cardiff	X	Llanelli	X	Newtown	X	St. Asaph	X
1 Capital Quarter Tyndall Street Cardiff CF10 4BZ ☎ 029 2033 8100 ☎ 029 2033 8101		Unit 12, The Beacon Centre for Enterprise Dafen Llanelli SA14 8LQ ☎ 0800 587 4140 ☎ 01554 740 591		St David's House New Road Newtown SY16 1RB ☎ 01686 616 800 ☎ 01686 616 801		OpTIC Ffordd William Morgan St Asaph Business Park St Asaph LL17 0JD ☎ 0800 587 4140 ☎ 01745 535 102	

[info@financewales.co.uk](mailto:info@financewales.co.uk) [www.financewales.co.uk](http://www.financewales.co.uk)

Textphone users can contact us on 18001 029 2033 8156.

This form is available in other formats and in Welsh on request.  
Please contact us to discuss your needs.

Finance Wales Investments (10) Limited is registered in England and Wales under number 07986242.

Finance Wales Investments (10) Limited is a member of the Finance Wales Group.

**Finance Wales Investments (10) Limited is authorised and regulated by the Financial Conduct Authority for credit-related regulated activities.**



Llywodraeth Cymru  
Welsh Government

