



Introducer Application Form

Please print, complete and fax on 0700 6091859 with your consumer credit licence

Company Name			
Status of Business	Sole Trader Y/N	Partnership Y/N	Limited Company Y/N
Registered Office Address			
Place of Business Address (if different from above)			
Tel Number		Fax Number	
Email Address		Website Address	
Contact Name		Contact Telephone Number	
Contact Mobile Number		Contact Email address	
Consumer Credit Licence Number		Consumer Credit Licence Expiry Date	
Company Registration Number (if applicable)		VAT Number (if applicable)	
Data Protection Registration Number			
Bank Account Details for BACS payment Name and Address of Account	Sort Code	Account Number	
Commission Cheques Payable to (if not using BACS)			

Please attach the following documents with your application:

Document	Enclosed Yes/No
Consumer Credit License Standard	
Copy of current Application form covering Data Protection Act	

Business Forecast

Number of Proposals able to provide a day	
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