

Standard Financial Statement

| Section A: Account & Borrower Details | | | |
|---------------------------------------|--|--------------------------------------|------------|
| Borrower Information: | | | |
| | | Borrower 1 | Borrower 2 |
| A1 | Name | | |
| A2 | Mortgage Account Reference No (s) | | |
| A3 | Outstanding Mortgage Balance (€) | | |
| A4 | Estimated Current Value of Primary Residence (€) | | |
| A5 | Monthly Mortgage Repayments Due (€) | | |
| A6 | Correspondence Address | | |
| A7 | Property Address if different to correspondence Address | | |
| | <i>Please indicate preferred contact method</i> | | |
| A8 | Home Telephone | | |
| A9 | Mobile | | |
| A10 | Work Telephone | | |
| A11 | E-mail | | |
| A12 | Marital Status | | |
| A13 | Date of birth | DD/MM/YYYY | DD/MM/YYYY |
| A14 | No. and age of dependent children | Child1 Child2 Child3 Child4 | |
| A15 | Total number in household | | |
| A16 | Employed Y/N; if self-employed give details | | |
| A17 | Occupation (if unemployed give previous occupation) | | |
| A18 | In Permanent employment Y/N | | |
| A19 | Name of Employer & Length of Service | | |
| A20 | Reason(s) for Review/Arrears | | |

| Section B: Your Monthly Income | | Borrower 1 | Borrower 2 | TOTAL | |
|--------------------------------|--|------------|------------|-------|-----------|
| B1 | Gross Monthly Salary (before tax and any other deductions at | | | | |
| B2 | Net Monthly Salary (after tax and any other deductions at source) ¹ | | | | |
| B3 | Monthly Social Welfare Benefits <i>Please list</i> | | | | |
| B3 (a) | Benefit- | | | | |
| B3 (b) | Benefit- | | | | |
| B3 (c) | Benefit- | | | | |
| B4 | Child Benefit | | | | |
| B5 | Mortgage Interest Supplement | | | | |
| B6 | Family Income Support | | | | |
| B7 | Maintenance | | | | |
| B8 | Other, e.g. Pension, room rent, grants (Please Specify) | | | | |
| B9 | Monthly Income from Property assets (other than primary residence) (see E5) | | | | |
| B10 | Monthly income from non-property assets (see F8) | | | | |
| B11 | Total Monthly Income (sum of B2 to B10) | | | | G1 |

¹ Do not include any deductions made from your salary at source (e.g., pension contribution, health insurance etc.) anywhere else on this form.

| Section C: Monthly Household Expenditure | | Average Charge ² | Arrears (where applicable) |
|--|---|-----------------------------|----------------------------|
| | Utilities | | |
| C1 | Electricity | | |
| C2 | Gas /Oil | | |
| C3 | Phone (Landline & Internet) ³ | | |
| C4 | TV/Cable ³ | | |
| C5 | Mobile Phone | | |
| C6 | Refuse Charges | | |
| C7 | TV Licence | | |
| | Household | | |
| C8 | Childcare | | |
| C9 | Elderly care (e.g., carer, nursing home fees etc) | | |
| C10 | Food/Housekeeping/Personal Care | | |
| C11 | Clothing and Footwear | | |
| C12 | Household Repairs/Maintenance | | |
| | Transport Costs | | |
| C13 | Petrol | | |
| C14 | Motor Insurance /Tax/NCT | | |
| C15 | Rail/Bus/Taxi Costs (including school transport costs for children) | | |
| C16 | Car Maintenance/Repairs | | |
| C17 | Car Parking and Tolls | | |
| | Primary Residence Mortgage-related Costs | | |
| C18 | Mortgage Protection/Endowment Premium | | |
| C19 | Payment Protection | | |
| C20 | House Insurance | | |
| | Education | | |
| C21 | Books | | |
| C22 | School/ College Fees | | |
| C23 | Uniforms | | |
| C24 | Extra Curricular activities (e.g. school outings) | | |
| C25 | Other (e.g. voluntary contributions) | | |
| | Medical | | |
| C26 | Medical Expenses and Prescription Charges ⁴ | | |
| C27 | Health Insurance ⁵ | | |
| | Social | | |
| C28 | Lifestyle Expenses (e.g., family events, Christmas, Birthdays, eating out etc.) | | |
| C29 | Club membership | | |
| C30 | Other - <i>please specify</i> | | |

² Average charge calculated by totalling last three utility bills and dividing by the number of months to get the average monthly cost.

³ Please identify if these bills are bundled.

⁴ Medical expenses include dentist, optician and any other costs related to health.

⁵ Do not include if Health Insurance is deducted from your wages at source, (i.e., if it has already been deducted from B2)

| | | Average Charge | | Arrears (where applicable) |
|----------------|---|----------------|-----------|----------------------------|
| | Other | | | |
| C31 | Life Assurance | | | |
| C32 | Pension Contribution ⁶ | | | |
| C33 | Maintenance paid to spouse/child (if applicable) | | | |
| C34 | Rent | | | |
| C35 (a) | Property Service/Management Charges | | | |
| C35 (b) | Other - <i>please specify</i> | | | |
| C35 (c) | Other - <i>please specify</i> | | | |
| C36 | Monthly expenditure on property assets (see E5) | | | |
| C37 | Monthly Savings | | | |
| | | | | |
| C38 | Total Monthly Expenditure (sum of C1 to C37) | | G2 | |

Please provide details of any steps you have already taken to reduce your monthly expenditure and the savings you have achieved:

Please provide details of any steps you propose to take to reduce your monthly expenditure and the savings you expect to achieve:

⁶ Do not include if Pension Contribution is deducted from your wages at source, (i.e., if it has already been deducted from B2)

| | Debt Type | Monthly Repayments | | Remaining Term | Total Outstanding Balance € | Arrears Balance € | Lender | Purpose of Loan | Secured? Y/N | Currently Restructured? Y/N | Payment protection Insurance Y/N |
|-----|---------------------------------|--------------------|--------------|----------------|-----------------------------|-------------------|--------|-----------------|--------------|-----------------------------|----------------------------------|
| | | Due € | Being Paid € | | | | | | | | |
| D18 | Other Debt (please specify) | | | | | | | | | | |
| D19 | Other Debt | | | | | | | | | | |
| D20 | | | | | | | | | | | |
| D21 | | | | | | | | | | | |
| D22 | Total (sum of D2 to D21) | | | G5 | | | | | | | |

Section E: Property Assets (other than Primary Residence)

| | Property (give details below) | Property Type (e.g. Buy to let) | Ownership Type ⁸ | Current Value (est) ⁹ € | Loan Balance € | Arrears Balance € | Monthly Rental Income € | | Monthly Expenditure (e.g., upkeep, maintenance) | | Re-structured Y/N | Monthly Mortgage Payments | | Lender | For Sale Y/N |
|----|----------------------------------|---------------------------------|-----------------------------|------------------------------------|----------------|-------------------|-------------------------|--------|---|--------------|-------------------|---------------------------|--|---------|--------------|
| | | | | | | | | | Due € | Being Paid € | | | | | |
| E1 | 1 | | | | | | | | | | | | | | |
| E2 | 2 | | | | | | | | | | | | | | |
| E3 | 3 | | | | | | | | | | | | | | |
| E4 | 4 | | | | | | | | | | | | | | |
| E5 | Total | | | | | | | B 9 | | C 36 | | | | D 17 | |

| Property | Property Assets (other than Primary Residence) Address | Date of Purchase |
|----------|--|------------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |

- **MONTHLY INCOME AND EXPENDITURES RELATED TO PROPERTY ASSETS SHOULD ALSO BE INCLUDED IN SECTIONS B AND C RESPECTIVELY**
- **MONTHLY MORTGAGE REPAYMENTS RELATING TO PROPERTY ASSETS SHOULD BE INCLUDED IN SECTION D**

⁸ For example, sole or joint ownership. Where a property/premises is not 100% owned by customer(s), please state the % amount that is owned

⁹ Please provide a reasonable estimate of the current value of these assets.

Section F: Non-Property Assets

| | Asset Type | Original Cost/ Value(€) | Current Estimated Value € | Net Monthly Income | Please Give Any Relevant Details |
|-----------|---|----------------------------|------------------------------|-----------------------|----------------------------------|
| F1 | Savings/deposits/current account | | | | |
| F2 | Shares | | | | |
| F3 | Motor Vehicle (s) | | | | |
| F4 | Redundancy Payment(s) | | | | |
| F5 | Long-term investment (s) | | | | |
| F6 | Other investment(s) | | | | |
| F7 | Other Assets (e.g., stock, machinery etc) | | | | |
| F8 | Total (sum of F1 to F7) | | | | B 10 |

Please list all other liabilities, for example any guarantees given with respect to company borrowing or borrowing by a family member.

Please provide any other information which you believe to be relevant to above:

Protecting Your Information

“Your lender will keep your information confidential and will only use this information for the purpose of assisting you in accordance with its Mortgage Arrears Resolution Process in accordance with your lender’s obligations under the Data Protection Acts 2018 and the General Data Protection Regulations 2016. For more information on your rights under the Data Protection Acts and General Data Protection Regulations 2016, see the Data Protection Commissioner’s website at www.dataprotection.ie”

I declare that the information I have provided represents my/our financial situation, and commit to informing my lender if my situation changes.

I consent to St. Francis Credit Union Limited conducting a credit reference check.

Signed: _____ **Date:** _____

Signed: _____ **Date:** _____

[Note: Declarations confirming the accuracy of the information provided and consent to a credit reference check must be completed for every SFS. Any other declarations requiring the consumer’s signature (for example to give permission for the lender to contact other parties regarding the borrowers financial situation) must be optional (i.e., a lender cannot deem the SFS to be incomplete if such declarations are not signed by the consumer).]

Section G: Financial Statement Summary (for office use only)

| | | | |
|-----------|---|----------|----------|
| G1 | Total Monthly Income (B11) | | |
| G2 | Less Total Monthly Expenditure (C38) | (|) |
| G3 | Sub-Total (G1 minus G2) | | |
| G4 | Less Mortgage Repayments Due (D1) | (|) |
| G5 | Less Other Monthly Debt Due (D22) | (|) |
| G6 | Total Surplus/Deficit (subtract G4 and G5 from G3) | | |

