

Finance

Proposal Form

4th Floor The Featherstone Building,
66 City Road, London, EC1Y 2AL
www.fundingoptions.com
support@fundingoptions.com

Please complete the form with as much information as requested.

Organisation (i)

Need help with your form? Contact us on **0333 344 1015**

Name of organisation

Total Cladding and Roofing Ltd

Registration Number (if applicable)

13436132

Limited Company



Partnership



Sole Trader



Charity/Nonprofit



Registered Address

Unit 7 Axis Business Centre Swindon

Incorporated/Start Date

November 2022

E-mail

tom@tcandr.co.uk

Postcode

SN5 7YS

Contact Number

07939088466

Organisation (ii)

Please outline a summary of the business/organisation activity and its daily operations:

Commercial cladding and steelwork installer. Business to business.

What are the main sources of revenue? Specify any major clients & contracts

Gaiger (developer local to Swindon)

Annual Turnover (£)

1100000

Purpose of finance

Amount needed (£)

50000

How soon do you need it?

2 weeks

Please outline what you are looking to achieve:

How long do you want it for?

Fund a project and use for cashflow

3 years

Personal Details

Please list details of all directors/owners/stakeholders involved

<p>Name (1) <input type="text" value="Thomas Swainson"/></p> <p>Date of Birth <input type="text" value="15/01/1990"/></p> <p>Home Number <input type="text"/></p> <p>Mobile Number <input type="text" value="07939088466"/></p> <p>Home Address <input type="text" value="19 Park Avenue"/></p> <p>Postcode <input type="text" value="SN67AW"/></p> <p>Previous address (if changed in last 3 years) <input type="text" value="No"/></p>	<p>Name (2) <input type="text" value="Lily Swainson"/></p> <p>Date of Birth <input type="text" value="19/06/1990"/></p> <p>Home Number <input type="text"/></p> <p>Mobile Number <input type="text"/></p> <p>Home Address <input type="text" value="19 Park Avenue"/></p> <p>Postcode <input type="text" value="SN6 7AW"/></p> <p>Previous address (if changed in last 3 years) <input type="text" value="No"/></p>
<p>Do you own this property?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If you ticked yes, what is the current value and the outstanding mortgage(s) on the property?</p> <p>Value <input type="text" value="330000"/></p> <p>Mortgage <input type="text" value="174500"/></p>	<p>Do you own this property?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If you ticked yes, what is the current value and the outstanding mortgage(s) on the property?</p> <p>Value <input type="text" value="330000"/></p> <p>Mortgage <input type="text" value="174500"/></p>
<p>Does the organisation/director(s) own other asset(s) or property? If so, please state them & the approximate value:</p> <p><input type="text" value="No"/></p>	

Information about you, directors, partners and other members of your organisation: The information provided will be used in order to further your finance proposal. This personal information will also be used for the purpose of conducting credit reference checks by Funding Options Ltd and its lenders to further evaluate the principal(s), member(s), partner(s) and/or guarantor(s); in respect of those individuals whose details are included on the proposal form. Personal data is processed as per our Privacy Policy. Terms of Service apply. You can find these documents at www.fundingoptions.com/terms/

Declaration: YOU ARE RESPONSIBLE FOR COMPLETION OF THE INFORMATION ON THIS PROPOSAL FORM AND IN PARTICULAR FOR THE SUPPLY OF ALL PERSONAL DATA TO US WHICH IS INCLUDED ON THE FORM. PLEASE ENSURE THAT YOU BRING THIS NOTICE TO THE ATTENTION OF THOSE PERSONS ABOUT WHOM YOU SUPPLY PERSONAL DATA. BY SIGNING THIS FORM YOU CONFIRM THAT YOU HAVE OBTAINED THE AGREEMENT OF ALL PERSONS TO THE SUBMISSION OF THAT DATA OR THAT YOU ARE AUTHORISED TO PROVIDE IT TO US.

I/we attest that the information submitted in the proposal is correct to the best of my knowledge and has been submitted voluntarily. A photocopy, scanned copy, facsimile or electronic signature of this authorisation shall be deemed to be the equivalent of an original.

Principal(s) Signature: _____



Print Name(s) (block capitals): T Swainson

Date completed: 25/06/2024 / /

SIGNATURE CERTIFICATE



REFERENCE NUMBER

85286929-6E39-401C-A443-6D97C03DB14A

TRANSACTION DETAILS

Reference Number
85286929-6E39-401C-A443-6D97C03DB14A

Transaction Type
Template Signer Link

Sent At
25/06/2024 09:52 +01

Executed At
25/06/2024 09:57 +01

Identity Method
email

Distribution Method
manual

Signed Checksum
f36e55f3916e8949513aa90d57d2388ecd3a691cdb484103cfaf9674ac548f25

Signer Sequencing
Disabled

Document Passcode
Disabled

DOCUMENT DETAILS

Document Name
Proposal for Funding 2024

Filename
Page_1_1_.pdf


Pages
2 pages

Content Type
application/pdf

File Size
1.01 MB

Original Checksum
44f64e2dc8b9a9cee4fa2d13e68f7d870ed1d1e26efbc3fa4c8b7bedc92fc68b

SIGNERS

SIGNER	E-SIGNATURE	EVENTS
<p>Name Tom Swainson</p> <p>Email tom@tcandr.co.uk</p> <p>Components 44</p>	<p>Status signed</p> <p>Multi-factor Digital Fingerprint Checksum c78597782b6bfceae988769841941b5c2b6626e2d0101c50c61f26d7edcace2</p> <p>IP Address 86.15.82.90</p> <p>Device Safari via Mac</p> <p>Drawn Signature </p> <p>Signature Reference ID 04317964</p> <p>Signature Biometric Count 6</p>	<p>Viewed At 25/06/2024 09:52 +01</p> <p>Identity Authenticated At 25/06/2024 09:57 +01</p> <p>Signed At 25/06/2024 09:57 +01</p>

AUDITS

TIMESTAMP	AUDIT
25/06/2024 09:52 +01	Signer viewed the document on Safari via Mac from 86.15.82.90.
25/06/2024 09:55 +01	Tom Swainson (tom@tcandr.co.uk) signed the document on Safari via Mac from 86.15.82.90.
25/06/2024 09:55 +01	Tom Swainson (tom@tcandr.co.uk) was requested to verify their identity.
25/06/2024 09:57 +01	Tom Swainson (tom@tcandr.co.uk) authenticated via email on Safari via Mac from 86.15.82.90.