



SELF CERTIFICATION VERIFICATION FORM

SELF EMPLOYED

Applicant details

Applicant's name

Occupation

Reference number

Company Details

Accountant's/Bookkeeper's Co. name

Name of the person spoken to

Their position within the company

Verification Questions

Is the applicant still trading and considered to be solvent?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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How long has the applicant been trading?

<input type="text"/>	Years	<input type="text"/>	Months
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How long have you acted for the applicant?

<input type="text"/>	Years	<input type="text"/>	Months
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Your Details

Verified by (BLOCK CAPITALS)

Signature

Date

Company name