



Product Conversion Application Form

This form is only to be used by mortgage intermediaries who advised the customer/s when arranging their current rate/package.

How to complete the form

1 Customer/s details (KYC required)

2 Product Transfer details completed by Intermediary

3 Current Mortgage Information completed by AIB

4 Internal Use Only

Intermediary Details

Advisor Name

FCA Number

Intermediary Firm

Principal Name

Are you charging a broker fee for this mortgage? Yes No

Amount

Section 1: Customer/s Details (Updated KYC Requirements)

Customer Name: Applicant 1

Salutation

Forename

Surname

D.O.B.

Number of dependants
(and ages if applicable)

Moblie No.

Email

Customer Name: Applicant 2

Salutation

Forename

Surname

D.O.B.

Number of dependants
(and ages if applicable)

Moblie No.

Email

Current AIB (NI) Mortgage Account No.

Section 3: Current Mortgage Information (to be completed by AIB (NI))

Current AIB (NI) Mortgage Details

Current AIB (NI) Mortgage Account Number	<input type="text"/>
Mortgage Type (Fixed/Variable)	<input type="text"/>
Current Product Expiry	<input type="text"/>
Mortgage Term	<input type="text"/>
Indexed Valuation	<input type="text"/>

Confirmed By

Staff Name	<input type="text"/>	DCA Level	<input type="text"/>
------------	----------------------	-----------	----------------------

Lending criteria, terms and conditions apply.

Section 4: Internal Use Only (to be completed by AIB (NI))

Conversion Details

Part A

Balance Outstanding	<input type="text"/>	
Arrangement/Booking Fee	<input type="text"/>	Add fee to loan? Yes <input type="checkbox"/> No <input type="checkbox"/>
Initial Rate Type	<input type="text"/>	
Initial Rate Pay	<input type="text"/>	For (Months) <input type="text"/>
Revert to Pay Rate	<input type="text"/>	For (Months) <input type="text"/>

Part B

Balance Outstanding	<input type="text"/>	
Arrangement/Booking Fee	<input type="text"/>	Add fee to loan? Yes <input type="checkbox"/> No <input type="checkbox"/>
Initial Rate Type	<input type="text"/>	
Initial Rate Pay	<input type="text"/>	For (Months) <input type="text"/>
Revert to Pay Rate	<input type="text"/>	For (Months) <input type="text"/>

Additional Security

Please indicate any additional security to be included in the Letter of Offer, together with solicitor's details if applicable

<input type="text"/>
<input type="text"/>
<input type="text"/>
Date to be converted <input type="text"/>

Additional Information

Sector Code	<input type="text"/>
Credit Grade	<input type="text"/>

Information correct as at November 2023

The AIB logo and AIB (NI) are trade marks used under licence by AIB Group (UK) p.l.c. incorporated in Northern Ireland. Registered Office 92 Ann Street, Belfast BT1 3HH. Registered Number NI018800. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.