



TRANSFER OF EQUITY QUESTIONNAIRE

If you would like us to act for you please complete the form to provide the information we will need to get started and open your file. Where boxes appear simply tick the relevant option.

1) PRICE - Please complete the agreed price for the transfer if any

Price £..... Nil Consideration

2) ADDRESS & TENURE - Please give the address of the property concerned and whether it is Freehold or Leasehold

Property Address: Freehold Leasehold

3) CONTACT DETAILS - Please give your address (and postcode) for all correspondence

Full Name
Address

NAME(S) to be removed from the title

.....
Daytime Tel:..... Home Tel:
Mobile No:..... E-mail:
Address.....

NAME(S) to be inserted in the title

.....
Daytime Tel:..... Home Tel:
Mobile No..... E-mail:

4) NATIONAL INSURANCE NUMBER (required by Inland Revenue)

Will you need a mortgage to buy? Yes No
If yes, which lender will you use?
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5) ESTATE AGENTS - If there are estate agents acting on your sale or purchase please give their name, address and telephone number.

Agents on Sale: Agents on Purchase:

Tel: Tel:

6) EXISTING MORTGAGES

Is there a mortgage on the property to be sold? Yes No

If you have a mortgage on the property to be transferred please give below details of the mortgage account.

(See details on your mortgage statement if you do not have a record of this information)

- 1) Name of Lender:
- 2) Address of Lender:
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- 3) Mortgage Account Number(s):

Is there a second or further mortgage on the property? Yes No

If so, please give the lender's name, address and account number(s)

7) TITLE DEEDS - If you are holding your title deeds, please let us have them.

Are you holding your title deeds? Yes No

8) CLIENTS' INSTRUCTIONS - I/We wish you to act for me/us in connection with the transaction(s) outlined above, subject to your Society's terms, and on the basis of the fee estimate you have provided with this form.

9) CONTACT

How did you hear about Khaliq Kingsley

(All those named in Section 5 above should please give their FULL names and sign and date below.)

FULL NAME(S)	SIGNATURE(S)	DATE
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Please now return this form to us to enable your conveyancing to begin. Thank you.