

Our Reference

STARTER FORM - PLEASE COMPLETE THIS NOW

We are unable to progress your transaction until this Form is returned. Please use BLOCK CAPITALS throughout. Telephone calls may be recorded for security purposes. During the transaction we will require evidence of your identity and residence to satisfy the Money Laundering Regulations.

SECTION 1 - YOUR DETAILS

First Client

(Please complete your full name here as these details will be used to draft legal documents)

Title (please tick) Mr Mrs Miss Ms Dr
All Forenames
Surname
Date of birth
National Insurance Number
Current Address
If addresses are different we will only send correspondence to the First Client's address on behalf of both clients.
Tel. No. Home
Tel. No. Work
Mobile
Text Message User? Internet Access?
Email:
Have we acted for you in a previous home move? YES NO If 'Yes' when did we last act for you? YEAR

Second Client (if applicable)

(Please complete your full name here as these details will be used to draft legal documents)

Title (please tick) Mr Mrs Miss Ms Dr
All Forenames
Surname
Date of birth
National Insurance Number
Current Address
Tick if same as first Client
Tel. No. Home
Tel. No. Work
Mobile
Text Message User? Internet Access?
Email:
If 'Yes' when did we last act for you? YEAR

SECTION 2 - YOUR SALE (Go to the next section if you are purchasing only)

Is the property: On the Market Sold subject to contract
What type of property is it? House Flat
Property Owned by: First Client Only Second Client Only First and Second Client
Address of the Property you are selling
Tick if same as first Client
Postcode
Asking or agreed price
Selling Agent
Contact Name at Estate Agents
Tel No.
Commission Rate Agreed

Your existing Mortgage lender is
Account Number
This is very important as we need this to retrieve your deeds
Approximate Amount outstanding
Do you have any other loans charged to your property? YES NO
If 'Yes' Lender is
Account Number is
If you do not have a mortgage at all then please advise us of the whereabouts of the title deeds to your property
Holder
Address
Postcode
If you hold your title deeds then please forward them to us preferably by Recorded Delivery.

SECTION 3 - SENDING YOU MONEY

For security reasons, we prefer to send monies due to you direct to your bank account. Please confirm your nominated account details for us to send funds to you. Our preference is for joint clients to receive funds to a joint account where possible. The account cannot be in the name of a third party and cannot be overseas.

Account held by: First Client only Second Client only In joint names
Bank
Branch
Account Number
Sort Code

SECTION 4 - YOUR PURCHASE (Ignore this section if you are selling only)

To be purchased by: First Client only: Second Client only: First and Second Client

I/We intend to buy but have not yet found a property to purchase

Address of the Property you are buying

Postcode

Agreed Purchase Price £

Will you be living at the property? Yes No

What type of property is it? House Flat

Selling Agent

Branch

Contact Name at Estate Agents

Tel No.

Are you having a Mortgage? Yes No, Cash Purchaser

if yes, amount you propose to borrow

Name of lender (if known)

SECTION 5 - PAYMENT ON ACCOUNT OF TITLE INFORMATION AND SEARCHES

A payment on account is needed from you for the title information and searches we will be ordering on your transaction in accordance with our initial letter to you. We are unable to accept payment from a third party. Please either attach your cheque made payable to "Shoosmiths" or complete the debit/credit card authority below. We will then telephone you on receipt of your form to collect your card details for payment. Receipt of your advance will be taken as your instruction to undertake the searches as soon as possible.

I/We attach a cheque made payable to "shoosmiths" for £ or the amount required in your initial letter.
or

Please telephone me/us to collect our card details to process payment of our advance.

A 1.19% surcharge will apply to credit card payments.

SECTION 6 - OCCUPIERS

Please give the names of any person over 17 years of age who will live with you in your new home not listed in Section 1.

Name Age Name Age

Name Age Name Age

SECTION 7 - SPECIAL CIRCUMSTANCES

Please use this space to highlight matters of which we ought to be aware. This may include a sensory disability, details of a second mortgage, or any other dependant mortgage, target completion dates, or issues specific to the property.

SECTION 8 - DECLARATION AND AGREEMENT

I/We confirm that the information given in this Starter Form is correct to the best of my / our knowledge.

I/We instruct Shoosmiths to carry out legal services on my/our behalf in accordance with their Terms and Conditions which I/we have received.

I/We understand that Shoosmiths receive payments from insurance service providers which I/we consent to their receiving and retaining.

I/We authorise Shoosmiths to obtain my/our property title deeds (sale only).

I/We certify that the balance of purchase monies will be provided from our own funds unless we specifically instruct otherwise (purchase only).

Where a property is to be held jointly, we the undersigned agree and authorise Shoosmiths to accept and act on the instructions from any joint owners of the property and we agree to be bound by those instructions.

By signing and returning this Starter Form I/We authorise you to start work on our behalf straight away thereby waiving the cancellation provisions of the Consumer Protection (Distance Selling) Regulations 2000.

(All Clients must sign)

First Client

Date

Second Client

Date



INVESTOR IN PEOPLE