Client Questionnaire - Sale of Property

CIP of No.	Ref:	
Client Name Address of Property to be sold		
Your Telephone No. Home	Work	
Email address:	Mobile	
1. Please state the FULL forenames and Surnames and addresses of all the owners of the property.		
2. We shall require the Deeds of the Proper	ty:	
a) If they are in mortgage please let us have the name and address of the Lender and account number.		
b) If you hold the Deeds would you please arrange for them to be delivered to our offices as soon as possible? c) If they are with your Bank, please arrange for the Bank to forward them to us. Would you let us have the name and	YES/ NO ENCLOSED/ TO FOLLOW	
address of the Bank? 3. Do you have any other loan secured on the property? If so, please let us have full details.	YES (GIVE DETAILS)/ NO	
4. What is the agreed sale price?	£	
5. Will you give vacant possession of the whole of the Property? If subject to existing tenancy please provide copies of Agreements and Notices	YES/ NO (GIVE DETAILS)	
6. Please complete and return the attached Fixtures, Fittings and Contents List.	ENCLOSED/ TO FOLLOW	
7. Please let us have the name and address and telephone number of your selling agents		

of another property? If so, please complete and return the Purchase Questionnaire provided.	YES/ NO
9. Is the proposed sale due to divorce or separation?	YES/NO
10. Please complete and return the Sellers Property Information Form enclosed.	ENCLOSED/ TO FOLLOW
11. If the property is Leasehold, please complete the Sellers Leasehold Property Information Form enclosed.	ENCLOSED/ TO FOLLOW
12. If you have married or changed your name since purchasing please provide your original Marriage Certificate or Change of Name Deed.	ENCLOSED/ TO FOLLOW
I/We hereby acknowledge that I/we have received and read the client care letter which was enclosed with this questionnaire	
Dated	Signed
	Signed
	All joint owners to sign