

Conveyancing Instruction Form: Sale & Purchase

PLEASE COMPLETE ALL SECTIONS OF THE FORM WITH AS MUCH INFORMATION AS POSSIBLE

Personal details - Client 1

Title: <i>(please tick)</i>	Mr.		Miss.		Ms.		Mrs.		Dr	
First names:										
Surname:										
E-mail address:										
Home telephone number:										
Daytime telephone number:										
Mobile telephone number:										
Current Address										
Town:										
County:										
Postcode:										

Personal details - Client 2

Title: <i>(please tick)</i>	Mr.		Miss.		Ms.		Mrs.		Dr	
First names:										
Surname:										
E-mail address:										
Home telephone number:										
Daytime telephone number:										
Mobile telephone number:										
Current Address										
Town:										
County:										
Postcode:										

About your Sale

Address of property	
Address:	
Town:	
County:	
Postcode:	
Sale Price:	£

Wirral
 Ground Floor, Rosebrae Court
 Woodside Ferry Approach
 Birkenhead, Wirral, CH41 6DU

London
 49 Britton Street
 London
 EC1M 5UL

Warrington
 Ibis Court, Lakeside Drive
 Centre Park, Warrington
 Cheshire, WA1 1RL

Hemel Hempstead
 Unit 5, Finway Road
 Hemel Hempstead
 HJP2 7PT

Tel: 0151 647 3000
 Fax: 0151 647 7913

Tel: 0207 251 9900
 Fax: 0207 490 1275

Tel: 01925 428 360
 Fax: 01925 428 361

Tel: 0870 950 8305
 Fax: 0870 950 8306

www.specterpartnership.co.uk
enquiries@specterpartnership.co.uk

About your Sale, cont'd.../

Are there any agreed extra items? (e.g., Carpets - £250).	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please list the name and value of each item on a separate piece of paper		
Has either of you even been made bankrupt?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Desired completion date (for information purposes only and cannot be guaranteed at this time):		
If the property is being sold via an Estate Agency state the name and location of the agency dealing with the sale:		
Name & Town of Estate Agent:		
If there is no agent selling the property, state the name and address of the person(s) buying the property:		
Name(s) of Buyer(s):		
Address:		
Town:		
County:		
Postcode:		
Telephone number		
Name and address of the Building Society/Bank holding the title deeds:		
Name:		
Address:		
Town:		
County:		
Postcode:		
Account number with your Lender (without this we are unable to obtain your deeds):		
Do you have any other mortgages or loans secured against this property? If so please provide details including the account numbers:		
What is your future address (if known):		
Address:		
Town & County:		
Postcode:		

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About your purchase

Full address of property

Address:

Town:

County:

Postcode:

Purchase Price

£

If the property is being sold via an Estate Agent state the name and location of the agency dealing with the sale:

Name & Town of Estate Agent:

If there is no agent (Private Sale) state the name and address of the person(s) selling the property:

Name(s) of Seller(s):

Address:

Town & County:

Postcode:

Telephone number

Please state the name and address of their Solicitor/Legal Representative:

Name(s) of Solicitor/Legal Rep

Address:

Town & County:

Postcode:

Telephone number

Desired completion date:

NB: Date for information purposes only and cannot be guaranteed at this time

National Insurance Number (only required for buyers):

Are there any agreed extra items?
(e.g., Carpets - £250).

Yes

No

If 'Yes' please list the name and value of each item on a separate piece of paper if necessary

Financial Arrangements

If you require a mortgage, state the name and address of the proposed mortgage lender and loan amount applied for

Mortgage Lender

Address

Postcode:

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Financial Arrangements (Continued)

Loan Amount	£
Please advise us of how you intend to fund further amounts not covered by your mortgage (ie: Deposit, Stamp Duty, Legal Fees etc)	
a) From Savings?	<i>We will need to see a copy bank statement showing the amount</i>
b) From a Third Party i.e.: Family Member (please provide name and address details)	
c) Cash Payment?	
d) Further Loan?	
e) Equity - proceeds from the sale of another property	
f) Vendor Deposit?	
Has either of you even been bankrupt?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will anyone over 17 be living with you at the property?	Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If 'Yes', please supply their full names and ages on a separate piece of paper.</i>

Local Search

On average, Local Searches take a minimum of a week to complete and return. If you are keen to avoid a delay, do you:

- a) Wish us to effect a Local Search application immediately upon receipt of this form. If so, please remit a cheque payable to 'The Specter Partnership' for £100.00 on account of the fees, for which you will be credited on your completion statement.

We now offer the facility to pay this amount via debit or credit card. If you wish us to receive payment in this way, please call our office on 0800 019 3460 with details of your card. Please be aware that there will be a 2% charge for payment via CREDIT card.

OR

- b) Wish us to delay making the Local Search application until you notify us further.

Cheque sent / Card Payment Made? Yes No

We can sometimes arrange indemnity insurance or a personal search if either are acceptable to the lender.

Additional Information. Please advise us of any factors that you believe may have a bearing on your proposed move.

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Excess funds

On completion of your purchase, we may need to issue a cheque for any excess funds. If this is necessary, could you please advise of whom the cheque should be made payable to:

Name(s):

Additional Information

Please advise of any factors that you believe may have a bearing on your proposed move:

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Have You Made A Will?

MAKING A WILL GIVES YOU PEACE OF MIND THAT YOUR FAMILY'S FUTURE IS SECURE

A Will is an important legal document which allows you to decide how your estate is to be dealt with in the event of your death. If you should die without making a Will, strict rules govern how your estate is dealt with which may not be in accordance with your wishes. Married couples often assume that their spouse will automatically inherit but this may not be the case. A Will is essential for unmarried couples.

Reasons to make a Will

- Intestacy
- Civil partnership, Marriage, divorce: revoke will
- Guardianship: children under 18
- Certainty: Save arguments for family over who gets the valuable watch etc – you will have control over your assets and who receives them
- Inheritance tax savings such as nil rate band
- Property bought under shared ownership schemes: buyers require a Will as part of the contract
- Power of attorney: Lasting power of attorney in case of later incapacity and if spouses own property as tenants in common as spouse will not be able to sign contracts for them (both signatures required)
- Long term care planning: costs of going into a home and also keeping your home safe
- Choice of executors & trustees: people you know and trust
- Executorship service: we can be your executors - probate service
- Business property relief if clients own a business
- Deed of variation: within 2 years can insert the nbr trust and help in event of intestacy

Please tick one of the following statements, whichever applies, and return with the enclosed documentation:

1. I do not have a Will and would like further information on this subject.	<input type="checkbox"/>	<input type="checkbox"/>
2. I would like to review my current Will.	<input type="checkbox"/>	<input type="checkbox"/>
3. I have a current Will, which is appropriate to my circumstances (we recommend a review every 5 yrs).	<input type="checkbox"/>	<input type="checkbox"/>
4. I do not have a Will and do not wish to consider making one at this time.	<input type="checkbox"/>	<input type="checkbox"/>
5. I would like to instruct The Specter Partnership to draft / review my will / wills.	<input type="checkbox"/>	<input type="checkbox"/>

Please note that a 10% discount is given to all new and existing clients on our will drafting service

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Authority to Act: **Sale & Purchase**

PLEASE READ THIS DOCUMENT, SIGN AND RETURN TO THE RELEVANT OFFICE.

DECLARATION

I / we would like to authorise The Specter Partnership Solicitors to act on **my / our** behalf in relation to my conveyancing transaction .

CLIENT 1

Signed:

Print Name:

Dated:

CLIENT 2

Signed:

Print Name:

Dated:

Please sign your name (s) above and return this form to us as soon as possible by way of acceptance of the terms and conditions of our appointment as set out in these forms.

Please note that we are unable to process your transaction until we receive this form back from you.

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