

PROPERTY INFORMATION QUESTIONNAIRE (PIQ)

ABOUT THIS FORM

Part A: Disclosure of material facts

Getting the property 'market ready'

The information which you provide must be accurate. Whether you are the owner of the property or represent someone who has died or is unable or unavailable to complete the form, the form should be completed as though the questions are being answered by the owner.



This form is required to ensure that the Consumer Protection from Unfair Trading Regulations 2008 are complied with during the marketing of the property and must be completed as accurately as possible. Under the Consumer Protection from Unfair Trading Regulations 2008 it is important to disclose anything that would materially affect the transactional decision of the average consumer.

If you do not know an answer to a question then that is fine but please provide as much information as possible and do not omit information.

The information will be used by the conveyancers representing yourself and the buyer during the conveyancing process and will support the sale of the property. If any of the information changes before you complete the sale then you should let your conveyancer know as soon as you become aware of the new information.

Instructing your conveyancer now will mean that they can review the information which you have provided and help you resolve any title defects or replace missing documents. This will significantly speed up the sale and reduce the likelihood of the sale falling through.

Part B: Additional information required for the conveyancing process

Getting the property 'sale ready'

Whilst you only need complete the information in Section A to enable the property to be marketed, by completing Section B now you may save both time and money during the conveyancing process. Therefore we recommend that you complete all sections now.

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Part A: Disclosure of material facts

1. PROPERTY TO BE SOLD

Throughout this form this property may be referred to as 'the property', 'this property' or 'your property'.

1.1 Property address

Address line 1	41 Victoria road		
Address line 2			
Town	Brighouse		
County		Postcode	M06 4DX

1.2	Council Tax band	E
1.3	Unique property reference number (UPRN)	

i You can find your UPRN here: www.findmyaddress.co.uk/search
 You can check your Council Tax band here: www.gov.uk/council-tax-bands

1.4 What is the title to the property?

Freehold	<input checked="" type="checkbox"/>	Shared Ownership	<input type="checkbox"/>
Managed freehold	<input type="checkbox"/>	Other	<input type="checkbox"/>
Leasehold	<input type="checkbox"/>	Unknown	<input type="checkbox"/>
Commonhold	<input type="checkbox"/>		

1.5	Are there conditions on the property such as those imposed by the First Homes Scheme or Section 157 restriction?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

1.6 If leasehold, complete the following otherwise skip to 1.7.

1.6.1	Length of lease		1.6.3	Years remaining	
1.6.2	Start date		1.6.4	Ground rent	

Please give any relevant details of the lease including any renewal undertaken, additional liabilities, rights and obligations, ground rent increases or review period.

i Title documents and lease can be downloaded from the Land Registry for a small fee.

1.7 If leasehold or a managed freehold, complete the following otherwise skip to 1.8.

1.7.1	Is there a property management company?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
1.7.2	Is there a resident's management company?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
1.7.3	Is there a Right to Manage company?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

If yes, please provide contact details.

1.7.4	Annual service charge	N/A
1.7.5	Additional fees payable on sale or letting	N/A
1.7.6	Name of the Freeholder or Rentcharge owner	

1.7.7	Please provide details of sinking fund, any estates charges and/or any other fees or charges below.	
	N/A	

1.7.8	Are there restrictions imposed by a lease or otherwise? If yes, provide details below.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	N/A		

1.8 What are the parking arrangements at the property?

Garage	<input type="checkbox"/>	Metered parking	<input type="checkbox"/>
Driveway	<input checked="" type="checkbox"/>	Allocated parking space(s) <input type="checkbox"/>	How many? <input type="text"/>
On street parking	<input type="checkbox"/>	Access to an electric vehicle charge point	<input type="checkbox"/>
Resident permit	<input type="checkbox"/>	None	<input type="checkbox"/>
Shared parking	<input type="checkbox"/>	Other:	<input type="checkbox"/>

1.9 Listing and Conservation.

1.9.1	Is your property a listed building?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
	If yes, provide details of the listing and any relevant documents.			
1.9.2	Is your property in a designated conservation area?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
1.9.3	Are any trees on the property subject to a tree preservation order? If yes, please answer 1.9.4.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
1.9.4	Have the terms of the order been complied with? Attach a copy of any relevant documentation to this form.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

2. DISPUTES AND COMPLAINTS

2.1	Has there been any disputes or complaints regarding this property or a property nearby? If yes, provide details.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>

2.2	Is there anything which might lead to a dispute about the property or a property nearby? If yes, provide details.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>

2.3	Has there been any failed purchase transactions on the property within the last 12 months? If yes, provide details.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>

3. ALTERATIONS AND CHANGES TO THE PROPERTY

3.1	Have there been any structural alterations, extensions, significant repairs or renewals to the property? E.g. loft or garage conversion, removal of internal walls/chimneys or change of use. If yes, outline the nature of the work for each and confirm the year it was completed.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
<p>Orangerie built in 2013 Kitchen/Dining Room/Utility knocked in to one room in 2017. Garage made smaller and installed new utility in half of garage.</p>				

3.2	Has there been installation of replacement windows, roof windows, roof lights or glazed doors since 1 April 2002? If yes, outline the nature of the work for each and confirm the year it was completed.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input checked="" type="checkbox"/>
<p>House built in 2008.</p>				

3.3	Has a conservatory been added? If yes, confirm the year the installation was completed and whether any walls were removed.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
2013 - External wall removed for access				

3.4 For each of the changes and installation, please confirm:

3.4.1	Was a building regulation approval and completion certificate obtained or an equivalent Competent Person Scheme Certificate?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not required <input type="checkbox"/>
3.4.2	Was planning permission obtained? If no, please answer 3.4.3.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not required <input type="checkbox"/>
3.4.3	Was a lawful development certificate (LDC) obtained?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not required <input type="checkbox"/>
3.4.4	Was listed building consent obtained?	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Not required <input type="checkbox"/>
3.4.5	Was any consent under a restriction in the title obtained?	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Not required <input type="checkbox"/>

(Kitch)

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If you answered no to one or more of the 3.4 questions, outline the reason(s) why below.

i If you answered yes to one or more of the 3.4 questions, the relevant documents will be required by the buyers. Send copies of all documentation with this form.

3.5	Are any of the works listed above unfinished? If yes, provide details and explain why.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

3.6	Are you aware of any breaches of planning permission conditions or Building Regulations consent conditions or work not having the necessary consents? If yes, provide details.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

3.7	Are there any planning control issues to resolve? If yes, provide details.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

3.8	Is the property subject to a Green Deal loan, Green Homes Grant or another financed home improvement scheme? If yes, please include any outstanding payments for the renewable devices and any feed-in tariffs.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

4. FIRE SAFETY AND BUILDING SAFETY

4.1	Does the property have a potentially flammable external wall system (including cladding)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
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If you answered yes to question 4.1, please answer the following questions otherwise skip to 4.2.

4.1.1	Has an EWS1 form been completed? If yes, please include the ESW1 form with this questionnaire.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
4.1.2	What type of cladding is in place?	Don't know <input type="checkbox"/>		

4.1.3	Have any remedial works taken place, or are are any works planned relating to cladding? If yes, provide details below.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>

4.2	Is your property located within a building that is over 18m tall or at least seven storeys and contains a minimum of two residential units? If yes, provide contact details of the Principal Accountable Person.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>

If you answered yes to question 4.2, please answer the following questions otherwise skip to 4.3.

4.2.1	Is the key building information provided by the Principal Accountable Person up to date?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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4.2.2	Have any remedial works taken place to the property, or are any works planned (unrelated to cladding) due to the property being located within a high-risk building? If yes, provide details below.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

4.2.3	Have any remedial works taken place, or are any works planned within the rest of the building? If yes, provide details below.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

4.3	Does the property have a timber framed balcony?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
4.4	Has spray foam insulation been installed at the property?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
4.5	Does the property contain asbestos?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
4.6	Is there a smoke or carbon monoxide alarm in the property? If yes, please provide what type of alarm it is below.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
?				

5. NOTICES WHICH AFFECT THE PROPERTY

Are you aware of, or have you received any of the following notices?

5.1	The owner of a neighbouring property is proposing to develop property or land nearby or make alterations to nearby buildings?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
5.2	Any planning application that could affect the property, the enjoyment of it or the views from it?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
5.3	Notice informing you that maintenance, repairs or improvements are required to your property?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
5.4	Listed building application.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
5.5	Infrastructure project, proposed or in progress, i.e. wind turbine, railway or fracking etc.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
5.6	Any other relevant or legal notice.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
5.7	Other:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>

i You will need to provide details of any notices to your conveyancer and estate agent.

6. SPECIALIST ISSUES

6.1	Has there ever been any preventative work for dry rot, wet rot or damp carried out at your property? If yes, provide details below.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
6.2	Has there ever been any treatment of dry rot, wet rot or damp carried out at your property? If yes, provide details below.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
6.3	Has the property ever been subject to subsidence or structural fault? If yes, provide details below.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
6.4	Is the property of standard construction? If no, give details below.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
6.5	Is CCTV or a similar security system in operation at the property?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
6.6	Will CCTV or a similar security system be recording at the time of any property viewings?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
6.7	To your knowledge is the property affected by Japanese Knotweed or other invasive species? If yes, state whether there is a management plan in place below and supply a copy with this form.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	

Add any comments or explanations to question 6 here.

7. FIXTURES AND FITTINGS

7.1	List any items that you intend to take which would be considered a fixture or fitting, e.g. carpets, curtains, light fittings and fitted cupboards etc.
Curtains, Furniture, wardrobes (apart from Bed 2).	

7.2	What additional furniture or possessions are you likely to include in the sale, irrespective of price?
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i A final list will need to be completed after the sale is agreed with your legal representative.

8. ENERGY EFFICIENCY

8.1	Does your property have an EPC undertaken within the last ten years?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
8.2	What is the energy efficiency rating of the property according to the latest Energy Performance Certificate (EPC)?	?	

i Please provide a copy of your EPC with this form. If required, a link to your EPC can be found on the online register and shared via: gov.uk/find-energy-certificate

9. UTILITIES/SERVICES

9.1 Indicate which services are connected to the property.

Service	Connected (yes/no or date to be connected)	Supplier
Electricity	Y	EON
Gas	Y	EON
Liquid Petroleum Gas (LPG)	N	
Water main or private water supply	Y	YW
Drainage to public sewer	Y	
Cable TV or Satellite	SY	Sky
Telephone	Y	Sky
Broadband	Y	Sky
Other:		
Other:		

i Other services include renewable technologies.

9.1.1	Broadband speed	1000	Mbps
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9.2	Do you have any licences, maintenance agreements, contracts or service agreements in relation to a connected service? If yes, provide details.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

9.3	Are there connected smart systems at the property, e.g. heating/power or security systems such as CCTV, alarms or barriers. If yes, please give details of service and passcodes.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	<p style="font-size: 1.2em; font-family: cursive;">Honeywell Evohome</p>		

9.4	Has the property been rewired or had any electrical installation work carried out since 1 January 2005? If yes, provide details below and supply the Building Regulations Compliance and Completion Certificate (or equivalent) with this form.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

9.5	Has the whole or any part of the electrical installation been tested by a qualified and registered electrician?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	If yes, what year were they last tested?		

9.6	Is there central/partial central heating in your property?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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If you answered yes to question 9.6, please answer the following questions otherwise skip to question 9.7.

9.6.1	When was the heating system installed? If after 1 April 2005, provide a copy of the CORGI or Gas Safe installation completion certificate.	Month:	01
		Year:	2018
9.6.2	When was the heating system last serviced/maintained? Provide a copy of the last inspection report.	Month:	04
		Year:	2024

9.6.3	Is the heating system in good working order? If no, provide details.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

9.7	Have solar panels been installed?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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If you answered yes to question 9.7, please answer the following questions otherwise skip to question 9.8.

9.7.1	In what year were the solar panels installed?	
9.7.2	Are the solar panels owned outright?	Yes <input type="checkbox"/> No <input type="checkbox"/>
9.7.3	Has a long lease of the roof/air space been granted to a solar panel provider?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If yes, please supply copies of the relevant documents.	Enclosed <input type="checkbox"/> Lost <input type="checkbox"/>

9.8 Is there a septic tank, cesspool or sewerage treatment plant connected to the property? Tick those that apply and indicate date last emptied.

Septic tank	<input type="checkbox"/>	Date last emptied	
Cesspool	<input type="checkbox"/>	Date last emptied	
Sewerage treatment plant	<input type="checkbox"/>	Date last serviced	

If there is a septic tank, cesspool or sewerage treatment plant connected to the property, please answer the following questions otherwise skip to section 10 Insurance.

9.8.1	Is the septic tank, cesspool or sewerage treatment plant shared with other properties?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9.8.2	Is the septic tank, cesspool or sewerage treatment plant located on someone else's land? If yes, provide a plan showing the location of the system and how to access it.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9.8.3	Does the septic tank, cesspool or sewerage treatment plant comply with BSEN12566-3?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

10. INSURANCE

10.1	Has any buildings insurance ever been subject to an abnormal rise in premium?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
10.2	Has any buildings insurance ever been subject to high excesses?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
10.3	Has any buildings insurance ever been subject to unusual conditions?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
10.4	Has any buildings insurance ever been refused?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

If you answered yes to any of the questions above, please provide details below.

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10.5	Do you insure the property? If yes, provide details.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

14. ADDITIONAL INFORMATION

14.1	Are there any restrictions on use or alteration of the property which have not been complied with? If yes, provide details.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>

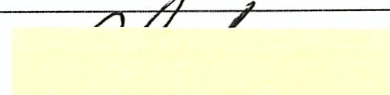
14.2	Are you aware of any other material issues or information which relates to the property or has anything occurred which may affect the average person's decision to proceed? If yes, describe this issue and any action that has been taken. Disclosure required under the Consumer Protection from Unfair Trading Regulations 2008.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>

CONSUMER PROTECTION REGULATIONS DECLARATION


By signing this form I confirm the answers to be truthful and accurate and to the best of my knowledge. The questions have been designed to assist with the smooth selling of the property. Any misleading or incorrect answers are likely to be exposed later in the conveyancing process and may hinder the sale.

I will provide additional documentation in support of the information supplied on this form. I understand that this does not replace any official or legal information required for the sale of the property.

If there are any changes which alter the information provided, I will update the form immediately and notify the party marketing the property as well as my conveyancer.

Signature	
Print name	

Date	8/5/24
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Signature	
Print name	

Date	8/5/24
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Need help signing this document electronically? Click the link below for step-by-step instructions:
propertymark.co.uk/asset/D6C043B9-2156-4304-91868A545C7C4526/

Part B: Additional information required for the conveyancing process

15. LEGAL OWNERSHIP

15.1 Full name and address of legal owner(s)

Full name		
Address line 1		
Address line 2		
Town		
County		MD6 4DX

Full name		
Address line 1		
Address line 2		
Town		
County		MD6 4DX

Full name		
Address line 1		
Address line 2		
Town		
County		Postcode

15.2 Seller's Conveyancer

Full name		
Address line 1		
Address line 2		
Town		
County		Postcode
Email		
Reference		

15.3 Capacity in which the Seller sells

Legal owner	<input type="checkbox"/>
Personal representative for a deceased owner	<input type="checkbox"/>
Under power of attorney	<input type="checkbox"/>
Mortgage in possession	<input type="checkbox"/>
Other:	<input type="checkbox"/>

16. BOUNDARIES

16.1 Looking towards the property from the road, who owns or accepts responsibility to maintain or repair the boundary feature?

16.1.1	On the left	Seller <input checked="" type="checkbox"/>	Shared <input type="checkbox"/>	Neighbour <input type="checkbox"/>	Not known <input type="checkbox"/>
16.1.2	On the right	Seller <input type="checkbox"/>	Shared <input type="checkbox"/>	Neighbour <input checked="" type="checkbox"/>	Not known <input type="checkbox"/>
16.1.3	At the rear	Seller <input checked="" type="checkbox"/>	Shared <input type="checkbox"/>	Neighbour <input type="checkbox"/>	Not known <input type="checkbox"/>
16.1.4	At the front	Seller <input checked="" type="checkbox"/>	Shared <input type="checkbox"/>	Neighbour <input type="checkbox"/>	Not known <input type="checkbox"/>

16.2	<p>If the boundaries are irregular, indicate ownership by written description or reference to a plan.</p>
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16.3	<p>Is the seller aware of any boundary feature having been moved in the last 20 years? If yes, provide details.</p>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

16.4	<p>During the seller's ownership, has any land or buildings previously forming part of the property been sold or any adjacent land or buildings purchased? If yes, provide details.</p>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

16.5	<p>Does any part of the property or any building on the property overhang, or project under, the boundary of the neighbouring property or road? If yes, provide details.</p>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

16.6	Has any notice been received under the Party Wall Act 1996 in respect of any shared/ party boundaries? If yes, supply a copy of the notice and give details of any work carried out or agreed.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

17. SERVICES CROSSING THE PROPERTY OR NEIGHBOURING PROPERTY

17.1	Do any drains, pipes or wires serving the property cross any neighbour's property?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
17.2	Do any drains, pipes or wires leading to any neighbour's property cross the property?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>
17.3	Is there any agreement or arrangement about drains, pipes or wires?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Don't know <input type="checkbox"/>

If you answered yes to any of the questions under section 16 16. Services crossing the property or neighbouring property, please supply a copy of the agreement or provide details below.

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18. GUARANTEES

18.1 Are there any guarantees or warranties relating to this property?

18.1.1	National House Building Council (NHBC) or similar warranty	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Lost <input type="checkbox"/>
18.1.2	Roofing work	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Lost <input type="checkbox"/>
18.1.3	Damp proofing	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Lost <input type="checkbox"/>
18.1.4	Timber treatment	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Lost <input type="checkbox"/>
18.1.5	Central heating and/or plumbing work	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Lost <input type="checkbox"/>
18.1.6	Double glazing (windows, doors, roof lights/windows/conservatory)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Lost <input type="checkbox"/>
18.1.7	Electrical work	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Lost <input type="checkbox"/>
18.1.8	Preventative work/remedial action relating to subsidence	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Lost <input type="checkbox"/>
18.1.9	Solar panels	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Lost <input type="checkbox"/>
18.1.10	Other:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Lost <input type="checkbox"/>

Please confirm that you will leave all paperwork relating to any guarantees at the property when you move out.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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18.2	Are there any outstanding claims or current applications relating to any of the above? If yes, provide details.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

19. OCCUPIERS

19.1	Does the seller live at the property?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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19.2	If the property is occupied with tenants does anyone aged over 17 (other than the owner(s)) live at the property? If yes, please provide their full name(s) and age.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

19.3	Have all occupiers, aged over 17, agreed to sign the contract to confirm that they will vacate the property prior to completion of the sale? If 'No', please provide details (e.g. the property is sold let to tenants) and supply a copy of the tenancy agreement together with a copy of any notice to quit which has been served upon them.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

20. TRANSACTIONAL INFORMATION

20.1	Is the sale dependent on the seller completing the purchase of another property on the same day?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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20.2	Does the seller have any special requirements about a Completion/moving date? If yes, provide details of dates on which the seller cannot Complete/move.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

20.3	Will all rubbish be removed from the property (including from the loft, shed, garden, outbuilding, garages and sheds) and the property left clean and tidy on completion?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
20.4	Will any light fittings that are removed be replaced with ceiling rose, flex, bulb holder and bulb?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
20.5	Will all keys for the windows and doors and details of alarm codes be left at the property or with the estate agent?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
20.6	Will reasonable care be taken when removing any fittings or contents and any damage made good?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

DECLARATION

We confirm that all information provided is accurate to the best of our knowledge and if we should become aware of any change to the information supplied prior to exchange of contracts for the sale of the property we will update our conve


Signature	
Print name	

All sellers should sign this form

Date	8/5/24
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Signature	
Print name	

Date	8/5/24
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