

Small Self-Administered Scheme

Property Application Form

Before you start

This form should be used to provide us with sufficient information to consider whether a proposed property purchase would be acceptable into the SSAS. Until the application form is fully completed, signed and returned to us we cannot proceed with the purchase.

It is important that you read our Property Guidance Notes before completing the application form as this will provide you with the details of our various requirements.

Please ensure you complete all relevant sections. Your completed form should be returned to:

Pension Practitioner, 48 Chorley New Road, Bolton, BL1 4AP www.pensionpractitioner.com info@pensionpractitioner.com

| Contact Infor | mation |
|-------------------|----------------------------------------------------------------------|
| Scheme Name | ST JOHNS ABINGDON LIMITED PENSION SCHEME |
| Main Contact Name | PAUL BEAUCHAMP |
| Contact Address | GRINDLE COTTAGE, LOW SIDE, CALVER HOPE VALLEY, DERBYSHIRE,S32 3XQ |
| Daytime Telephone | |

| Property Details | | | | | | | | |
|----------------------------------------------------------------------------------------------------|-----------|-------------------|------|-----|--------|----------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--|
| Property Address (or land details if this is a land only purchase) | | R SYSTI ERFIEL | | | | S, FOXWOOL | CLOSE, SHEEPBRIDGE | |
| Type of Property | INDUS | TRIAL | | | | | | |
| Purchase Price | 372,50 | 0 | | | | | | |
| Proposed Completion Date | ASAP | | | | | | | |
| Is the title registered? | Y | es / | No | | Circle | as appropriate | | |
| Is the building listed? | Y | es / (| No | | Circle | as appropriate | | |
| Freehold or Leasehold? | F | reehold | 5 | Lea | eholo | d | Circle as appropriate | |
| Property Age | 11) Groui | nd Rent p | ayab | le | L | | | |
| Is the property subject to VA | T? [| Yes | / | No | | | iate. Please include VAT figure in Purchase | |
| s there any residential element? s the vendor connected with the member(s) or sponsoring employer | | Yes | / | No | | Price if applicable. Circle as appropriate - if yes, please provide details occupant on the Additional Details page | | |
| | | Yes / No | | No | | Circle as appropriate - if yes, please provide details o connection / relationship on the Additional Details | | |
| | | | | | | | | |

| section in relation to the individual dealing with the VAT on behalf of the pension scheme | |
|--------------------------------------------------------------------------------------------|-----------------------------------|
| PAUL BEAUCHAMP | |
| GRINDLE COTTAGE, LOW SIDE, CALVER HOPE VALLEY, DERBYSHIRE,S32 3XQ | |
| | |
| | |
| | GRINDLE COTTAGE, LOW SIDE, CALVER |

| Vendors Details | |
|--------------------------|-----------------------------------------------------|
| Contact Name | POWER SYSTEM SERVICES |
| Contact Address | FOXWOOD CLOSE, SHEEPBRIDGE CHESTERFIELD, S41 9RB |
| Daytime Telephone Number | 0124 626 8800 |
| Email Address | INFO@POWERSYSTEMSERVICES.CO.UK |

Schemes Solicitor Details

Pension Practitioner can arrange for an introduction to be made to a solicitor who is experienced in pension scheme law, to act on behalf of the trustees of the pension scheme. Alternatively you can supply details of your own Solicitor in the additional information section of page 6

| Vendors Solicitor | Anthrope Ant | 1 |
|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| Contact Name | ALASTAIR REID | |
| Practice Name | TAYLOR & EMMET | |
| Practice Address | 20 ARUNDEL GATE SHEFFIELD, S1 2PP | |
| Telephone Number | 0114 218 4479 | |
| Email Address | ALASTAIR.REID@TAYLOREMMET.CO.UK | |

| Purchase Price | £ |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| VAT (if applicable) | £ |
| Stamp Duty Land Tax | £ |
| Legal / professional costs (incl VAT | £ |
| Total Cost | £ |
| Loan Details (if applicable | |
| Appropriate to the company of the co | ation to the firm and individual dealing with the loan to the pension scheme |
| Lender Contact Name BAR | CLAYS / OLIVER WHITEHURST |
| Lender Address | |
| | |
| Lender Telephone | |
| Email Address OLIV | /ER.WHITEHURST@BARCLAYS.COM |
| Amount of Loan | |
| Term of Loan | |
| Repayments Expected | |
| We will require a copy of the | offer letter once this is available |
| we will require a copy of the | oner retter once this is available |
| Funding the Purchas | E park alexandr and make a more all some linear and a part of the common and a contract and a second and a se |
| Application of the contraction of the discourage of the contraction of | ow the property purchase is to be funded |
| Please use this section to detail he | 에 가는 아이들이 하는 것이 하는 것이 되었다. 이번 이번 이번 전쟁 |

| Property Ma | <u>nagement</u> |
|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | erty manager is in place and responsible for the day-to-day management of the property. It is ir more) of the member trustees to complete this function. Please confirm the property managers |
| Contact Name | PAUL BEAUCHAMP |
| Contact Address | GRINDLE COTTAGE, LOW SIDE, CALVER HOPE VALLEY, DERBYSHIRE, S32 3XQ |
| Daytime Telephone | |

| Existing Tenant Details | (ii applicable) | | L. L. | A CONTRACTOR OF THE PROPERTY O |
|--------------------------------------------------------------------|-------------------------|-----|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Business Name / Contact | POWER SYS | STE | M SERV | /ICES LTD / PAUL BEAUCHAMP |
| Company Number | 02962766 | | | |
| | FOXWOOD (CHESTERFII | | | |
| Telephone Number | 0124 626 886 | 00 | | |
| Is the tenant connected with the member(s), or sponsoring employer | Yes |) | No | Circle as appropriate - if yes, please provide details of the connection / relationship on the Additional Details page |
| Is the tenant VAT registered? | Yes | / | No | Circle as appropriate |
| Is the tenant exempt for VAT purpos | es Yes | / | No | Circle as appropriate |
| Rent payable and frequency | | | | |
| Are the rental payments up to date? | Yes | / | No | Circle as appropriate |

| Proposed Tenant Deta | ils (if applicable) | and the second second second | gypen en skriver i kommen skriver i server e skriver i skriver i skriver i skriver i skriver e skriver e skriv Men skriver i skrive |
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| Business Name / Contact | POWER SYSTEM | M SERVICES | S LTS / PAUL BEAUCHAMP |
| Company Number | 02962766 | | |
| | FOXWOOD CLOS CHESTERFIELD, | | RIDGE |
| Telephone Number | 0124 626 8800 | | |
| s the tenant connected with the member(s), or sponsoring employer | r? Yes / | | cle as appropriate - if yes, please provide details of the nection / relationship |
| s the tenant VAT registered? | Yes / | No Circ | cle as appropriate |
| s the tenant exempt for VAT purpos | ses? Yes / | No Circ | cle as appropriate |
| Rent payable and frequency | | | All the second of the second o |
| Are the rental payments up to date | ? Yes / | No Cir | cle as appropriate |
| English to the state of the separation of the se | | | TO STATE OF THE ST |
| Checklist | | 2746 (4.3 (4.3 | |
| Property Valuation | Enclosed / | To Follow | Circle as appropriate |
| Copy of existing lease | Enclosed / | To Follow | Circle as appropriate |
| Rental Valuation | Enclosed / | To Follow | Circle as appropriate |
| Energy Performance Certificate | Enclosed / | To Follow | Circle as appropriate |
| If you have not yet been provided wendors. We will require a copy for | [10] [11] [12] [13] [14] [15] [15] [15] [15] [15] [15] [15] [15 | | or the property please request this from the |
| | | property can con | ipiete. |
| Additional Information | | and the second of the second o | and the second s |
| residential details OR connections | | n such as the Soli | citor who is to represent the pension scheme, |
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Declaration

I/we confirm that I/we have read, understood and agree to abide by the terms and conditions set out in the Property Guidance Notes and that the information supplied in the questionnaire is correct to the best of my/our knowledge and belief.

| gnature Jali | Print Name PAUL BEAUCH | HAMP |
|--------------|------------------------|------|
| DIRECTOR | Date 18/04/20 | 18 |
| | | |
| gnature | Print Name | |
| osition | Date | |
| gnature | Print Name | |
| <u> </u> | Date | |
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