

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 Information

Scheme Name	TELEVIDEO SSAS
Main Contact Name	PAUL SCIVILL
Contact Address	
Daytime Telephone	

Property Details

Property Address (or land details if this is a land only purchase)	LAND TO WEST OF OLD HAY LANE DORE SNEFFIELD		
Type of Property	LAND		
Purchase Price	122000		
Proposed Completion Date	5/4/18		
Is the title registered?	<input checked="" type="radio"/> Yes / <input checked="" type="radio"/> No	Circle as appropriate	
Is the building listed?	<input checked="" type="radio"/> Yes / <input checked="" type="radio"/> No	Circle as appropriate	
Freehold or Leasehold?	<input checked="" type="radio"/> Freehold / <input checked="" type="radio"/> Leasehold	Circle as appropriate	
Leasehold Only	i) Outstanding term of lease		
	ii) Ground Rent payable		
Property Age	N/A		
Is the property subject to VAT?	<input checked="" type="radio"/> Yes / <input checked="" type="radio"/> No	Circle as appropriate. Please include VAT figure in Purchase Price if applicable.	
Is there any residential element?	Yes / <input checked="" type="radio"/> No	Circle as appropriate - if yes, please provide details on the occupant on the Additional Details page	
Is the vendor connected with the member(s) or sponsoring employer?	<input checked="" type="radio"/> Yes / <input checked="" type="radio"/> No	Circle as appropriate - if yes, please provide details of the connection / relationship on the Additional Details page	

Contact Details for VAT (if applicable)

Please complete this section in relation to the individual dealing with the VAT on behalf of the pension scheme

Main Contact Name	PAUL SCIVILL
Contact Address	
Daytime Telephone	
Email Address	

Vendors Details

Contact Name	PAUL & VIVIEN SCIVILL
Contact Address	
Daytime Telephone Number	
Email Address	

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 Details

Contact Name	ALASTAIR REID
Practice Name	TAYLOR & EMMET
Practice Address	20 ARUNDEL GATE SHEFFIELD
Telephone Number	0114 218 4479
Email Address	ALASTAIR.REID@TAYLOREMMET.CO.UK

Costs

Purchase Price	£ 122000
VAT (if applicable)	£
Stamp Duty Land Tax	£
Legal / professional costs (incl VAT)	£ 995
Total Cost	£ 122995

Loan Details (if applicable)

Please complete this section in relation to the firm and individual dealing with the loan to the pension scheme

Lender Contact Name	NIA
Lender Address	
Lender Telephone	
Email Address	
Amount of Loan	£
Term of Loan	
Repayments Expected	

We will require a copy of the offer letter once this is available

Funding the Purchase

Please use this section to detail how the property purchase is to be funded

For example: Scheme value is £150,000. A gross contribution of £25,000 from member A and an additional transfer-in of £82,000 from member B

CONTRIBUTION + TRANSFER FROM HM.

Property Management

We insist that a property manager is in place and responsible for the day-to-day management of the property. It is acceptable for one (or more) of the member trustees to complete this function. Please confirm the property managers details.

Contact Name

PAUL SCIVILL

Contact Address

Daytime Telephone

Existing Tenant Details (if applicable)

Business Name / Contact

NIA

Company Number

Registered Address

Telephone Number

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 purposes

Yes / No

Circle as appropriate

Rent payable and frequency

Are the rental payments up to date?

Yes / No

Circle as appropriate

Proposed Tenant Details (if applicable)

Business Name / Contact

N/A

Company Number

Registered Address

Telephone Number

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

Is the tenant VAT registered?

☒ Yes / ☐ No

Circle as appropriate

Is the tenant exempt for VAT purposes?

☒ Yes / ☐ No

Circle as appropriate

Rent payable and frequency

Are the rental payments up to date?

☒ Yes / ☐ No

Circle as appropriate

Checklist

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 with an Energy Performance Certificate for the property please request this from the vendors. We will require a copy for our records before the property can complete.

Additional Information

Please use this section to provide any additional information such as the Solicitor who is to represent the pension scheme, residential details OR connections / relationships.

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.

Signature

Print Name

Position

Date

Signature

Print Name

Position

Date

Signature

Print Name

Position

Date

Signature

Print Name

Position

Date