

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:

Cranfords, 1 The Pavilions, Cranford Drive, Knutsford, Cheshire, WA16 8ZR www.cranfords.biz admin@cranfords.biz







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Contact Detail	s for VA	T (if applicable)		
Please complete this s	ection in rela	ation to the individual dealing with the VAT on behalf of the pension scheme		
Main Contact Name	CLAIRE BARRET			
Contact Address		ocks Lane The Common Purton		
	1	WILTS SN5 4HD		
Daytime Telephone	07	712 669090		
Email Address	MAIlto: GAS - reception & gmail- Com			
Costs				
Purchase Price		£ 200,000		
VAT (if applicable)		£		
Stamp Duty Land Tax				
	ts (incl VAT)			
Legal / professional cos	ts (IIICI VAI)	£ 1000 bugget Cost		
Total Cost		£ 204,000		
Loan Details (if	applicable)			
Please complete this se	ction in relat	tion to the individual dealing with the VAT on behalf of the pension scheme		
Lender Contact Name				
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

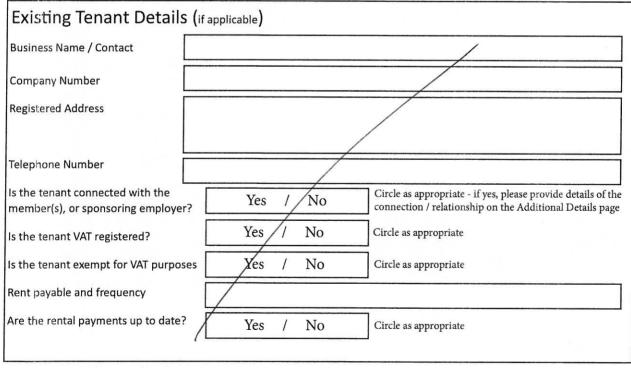






Cranfords is the trading style of the company registered under the number of 3110950 at 1 The Pavilions, Cranford Drive, Knutsford Business Park, Knutsford, Cheshire WA16 8ZR and name of 3110950 Limited. $^{3 \text{ of } 7}$ CPAF201408-1

Property Man	nagement
	ty manager is in place and responsible for the day-to-day management of the property. It is more) of the member trustees to complete this function. Please confirm the property managers
Contact Name	GLENN BROOKS
Contact Address	Chelworth and Est BRAYDON CANE CRICKCADE SWINDON WILTS SNG 6HQ
Daytime Telephone	0[793 759357









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Proposed Tenant Details (if applicable)			
Business Name / Contact			
Company Number			
Registered Address			
cin e			
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	s? Yes / No	Circle as appropriate	
Rent payable and frequency			
Are the rental payments up to date?	Yes / No	Circle as appropriate	

Solicitor Details	
Contact Name	SIMON SMITH
Practice Name	BOWER BAILEY
Practice Address	CAMBridge House 4 College Court Regent Circus Swindon Wilts SNI IPB
Telephone Number	01793 610 466
Email Address	ssmith q Gover and Gadey . co. UK

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 residential details OR connections / relationships.

had Planning concent for Ind Unit Gut its now Capsed. All My Plans have Geen Submitted ready to start Construction ASAP.







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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.

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Boot	Print Name	GLENN BROOKS
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