

1 Introduction

This questionnaire should be completed for each property that is to be purchased/transferred.
 If more than one member is purchasing the property the additional members should complete Appendix 1.
 Please note that making a false declaration on this application can have serious consequences.
 Please refer to our SIPP Property Purchase Guide before completing this form. The guide can be downloaded from our website here:
<http://www.yorsipp.com/investments/>.
 Please also refer to our SIPP Fee Schedule for details of the fees that apply to property transactions. This can be downloaded from our website here:
<http://www.yorsipp.com/products-services/sipp/sipp-fees/>.
 Direct investment in property is only available under our Full SIPP. The fees for the Full SIPP can also be found on the SIPP Fee Schedule.

2 Member Information

| | | | |
|-------------|-------|-------------|---------|
| Member Name | Title | Forename(s) | Surname |
|-------------|-------|-------------|---------|

| |
|---------------|
| Member Number |
|---------------|

Please indicate here if this is to be a Group Purchase Yes No

Does the property form part of an in-specie transfer? Yes No

Does the property form part of an in-specie contribution? Yes No

3 Property Information

| | |
|------------------|----------|
| Property Address | |
| | |
| | Postcode |

| |
|------------------|
| Type of Property |
|------------------|

| |
|-----------------|
| Title Number(s) |
|-----------------|

Is the property being purchased from a connected party? Yes No

Does the property contain residential accommodation? Yes No

Has the property been registered at Land Registry? Yes No

Is the property Freehold or Leasehold? Freehold Leasehold

If Leasehold, please state the remaining term years

Annual ground rent (if applicable) £

Is the property to be jointly owned? Yes No

If yes please provide details of the joint owners:

| |
|--|
| |
| |

Is there any refurbishment or development work to be carried out?
 If yes please provide details at section 9 Yes No

Is the property adjacent to property owned by a connected party? Yes No

4 Purchase Information

Purchase Price

VAT

Development Costs

VAT

Is the property currently VAT elected?

Yes

No

Are the Trustees to Opt to Tax the property?

Yes

No

Is the purchase to be treated as a transfer of a going concern?

Yes

No

Please note the property must be VAT elected for a transfer of a going concern to take place.

5 Funding Information

Source of Funds

1

2

3

Amount

6 Borrowing Information

Lender Name

Lender Address

Postcode

Contact Name

Tel No

Email Address

Loan Amount

Term

years

Interest Rate

%

Repayment Frequency

Monthly

Quarterly

Is there to be an interest only period?

Yes

No

If yes, please confirm the term

months/years

Lender's Solicitor

Company Name

Address

Postcode

Contact Name

Tel No

Email Address

7 Lease Information

Is the tenant a connected party?

 Yes No

Existing Lease

Company Name

Address

Contact Name

Email Address

Lease Start Date

Term

years

Current Annual Rent

£

Payment Frequency

 Monthly Quarterly

Is this lease to remain after the purchase?

 Yes No

New Lease

Company Name

Address

Contact Name

Email Address

Lease Start Date

Term

years

Annual Rent

£

Payment Frequency

 Monthly Quarterly

Tenant's Solicitor

Company Name

Address

Contact Name

Email Address

Postcode

Tel No

8 Professional Appointments

Solicitor

| | | | |
|---------------|--|--------|----------|
| Company Name | | | |
| Address | | | |
| | | | Postcode |
| Contact Name | | Tel No | |
| Email Address | | | |

Surveyor

| | | | |
|---------------|--|--------|----------|
| Company Name | | | |
| Address | | | |
| | | | Postcode |
| Contact Name | | Tel No | |
| Email Address | | | |

Financial Adviser

| | | | |
|---------------|--|--------|----------|
| Company Name | | | |
| Address | | | |
| | | | Postcode |
| Contact Name | | Tel No | |
| Email Address | | | |

Do you wish your Financial Adviser to receive remuneration for this transaction? Yes No

Amount or Percentage of purchase price %

Vendor

| | | | |
|---------------|--|--------|----------|
| Company Name | | | |
| Address | | | |
| | | | Postcode |
| Contact Name | | Tel No | |
| Email Address | | | |

Vendor's Solicitor

| | | | |
|---------------|--|--------|----------|
| Company Name | | | |
| Address | | | |
| | | | Postcode |
| Contact Name | | Tel No | |
| Email Address | | | |

Sales Agent

| | | | |
|---------------|--|--------|----------|
| Company Name | | | |
| Address | | | |
| | | | Postcode |
| Contact Name | | Tel No | |
| Email Address | | | |

9 Development/Project Management

Development/Refurbishment Information

| | | | |
|---------------|--|--------|----------|
| Company Name | | | |
| Address | | | |
| | | | |
| | | | Postcode |
| Contact Name | | Tel No | |
| Email Address | | | |

10 Property Manager

| | | | |
|---------------|--|--------|----------|
| Company Name | | | |
| Address | | | |
| | | | |
| | | | Postcode |
| Contact Name | | Tel No | |
| Email Address | | | |

If you wish to act as the Property Manager please refer to Yorsipp Ltd for approval.

11 Additional Information

12 Member Declaration

I/We confirm that I/we have read and understood the Yorsipp SIPP Property Purchase Guide, and where relevant have discussed with my/our Financial Adviser, and understand the following:

I/We confirm that I/we wish to purchase the property as an investment in my pension scheme.

Yorsipp (Trustees) Ltd will instruct the aforementioned firms, individuals and companies in connection with the property purchase. I/we understand that Yorsipp do not have responsibility for the performance of the said companies.

All instructions to the aforementioned firms must be instructed by Yorsipp (Trustees) Ltd and that I/we cannot make a binding agreement or contract on behalf of Yorsipp.

I/We understand that incorrect, or failure to disclose, information may delay the purchase. Where it is contrary to current legislation this may lead to tax penalties.

Yorsipp shall have no personal liabilities under any covenants, obligations on its part contained in any documentation, whether express or implied, relating to the property. The liabilities of Yorsipp shall be limited to the extent of the assets for the time being held under the pension arrangements of the member signing this application under the scheme.

I/We undertake not to make any claim against Yorsipp in respect of any defect in title, state, or condition of the property and/or resulting from the management, repair, refurbishment, development, value marketability of the property, or otherwise.

I/We confirm where the property purchase is on behalf of more than one member that Yorsipp may disclose information relating to the property to all members and their agents.

Where the purchase is on behalf of more than one member the nominated member for contact is:

All correspondence will be sent by email, where appropriate, please provide a contact email address:

It is the responsibility of the nominated member to inform all group members of information provided.

The nominated member will also be the contact for all post purchase correspondence, unless notified to us in writing and agreed by all group members.

If a syndicate agreement or other multi-member agreement is entered into, it is the members' responsibility to ensure it is suitable for their needs.

I/We the member(s) give authority for you to provide copies of the property account and all relevant information to any of the participating members.

I/We confirm the nominated member may give instructions on behalf of the group regarding all matters including bank borrowing, lease agreements etc.

I/We understand that if the property purchase does not proceed for any reason, an Aborted Purchase fee will be charged. This may include where Yorsipp decides not to permit the investment, for any reason that becomes known once work has commenced on the assessment/administration of the purchase. Please see our SIPP Fee Schedule for the current Aborted Purchase fee:
<http://www.yorsipp.com/products-services/sipp/sipp-fees/>.

Signature

Date

Appendix 1

| | | | |
|------------------|-------|-------------|---------|
| Member Name | Title | Forename(s) | Surname |
| Member Reference | | | |
| Signature | | | |

| | | | |
|------------------|-------|-------------|---------|
| Member Name | Title | Forename(s) | Surname |
| Member Reference | | | |
| Signature | | | |

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|------------------|-------|-------------|---------|
| Member Name | Title | Forename(s) | Surname |
| Member Reference | | | |
| Signature | | | |

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| Member Name | Title | Forename(s) | Surname |
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| Signature | | | |

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| Signature | | | |

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| Member Name | Title | Forename(s) | Surname |
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| Member Reference | | | |
| Signature | | | |

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|------------------|-------|-------------|---------|
| Member Name | Title | Forename(s) | Surname |
| Member Reference | | | |
| Signature | | | |

| | | | |
|------------------|-------|-------------|---------|
| Member Name | Title | Forename(s) | Surname |
| Member Reference | | | |
| Signature | | | |

For use when selecting own insurer for purposes of insuring property held by Yorsipp (Trustees) Limited under the SIPP Member Number(s) noted below.

Please complete a separate declaration for each property held if applicable.

| | | | |
|----------------|-------|-------------|---------|
| Member Name(s) | Title | Forename(s) | Surname |
| | Title | Forename(s) | Surname |
| | Title | Forename(s) | Surname |

Member Number(s)

Property Address

Postcode

Name of Insurer Policy Number

I confirm that the information listed below can be found in the insurance policy as follows:

| | | Where is this confirmed in the policy? for example Page x, Section y, Clause z |
|---|---|---|
| 1 | Policy is in the name of Yorsipp (Trustees) Limited | |
| 2 | Reinstatement value is adequate and accordance with the latest property valuation (please provide a copy of the latest valuation if not already provided) | |
| 3 | Policy contains 36 months loss of rent cover | |
| 4 | Policy includes public liability insurance of at least £5 million | |

If any part of your insurance policy does not cover the above please contact us immediately.

Signature

Date

The information in the policy will be verified by Yorsipp (Trustees) Limited and where we feel the cover is not adequate or does not meet our requirements we will contact you. A charge will apply for the work involved in reviewing the policy. Please refer to our SIPP fee schedule for the current charge: <http://www.yorsipp.com/products-services/sipp/sipp-fees/>
All fees are subject to VAT.



PENSION ADMINISTRATORS

Eadie House, 74 Kirkintilloch Road, Bishopbriggs, Glasgow G64 2AH

Tel 0141 772 3365 Fax 0141 762 1862

Email: info@yorsipp.com

Web: www.yorsipp.com

Registered Office: c/o Calvert Dawson Ltd., 288 Oxford Road, Gomersal, Cleckheaton BD19 4PY Registration number 05743279

Yorsipp Limited is authorised and regulated by the Financial Conduct Authority