



PROPERTY INFORMATION QUESTIONNAIRE
(LEASEHOLD)

ABOUT THIS FORM

To be completed by the seller

The seller may be the owner or owners, a representative with the necessary authority to sell the property for an owner who has died, a representative with the necessary authority to sell the property for a living owner (e.g. a Power of Attorney with appropriate powers) or be selling in some other capacity. The form should be completed as though the questions are being answered by the owner.

This form runs in line with the Consumer Protection from Unfair Trading Regulations 2008 and must be completed as accurately as possible. Under the Consumer Protection from Unfair Trading Regulations 2008 both the seller and agent must disclose anything, within their knowledge, that would affect the transactional decision of the average consumer.

The purpose of this form is to help sellers and agents understand the types of details that should be disclosed if known. However it should not be considered exhaustive and as such anything material not included on the form that you feel would affect the decision of the average buyer should also be disclosed to potential purchasers.

If you are found to be in breach of the Consumer Protection from Unfair Trading Regulations 2008 then you could face both an unlimited fine and/or imprisonment of up to two years.

The information provided within this form should only relate to the period during which you owned the property. If there is any material information prior to your ownership that you are aware of there is an 'additional information' section at the end of the form.

PROPERTY TO BE SOLD

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

Address 1			
Address 2			
Town			
County		Postcode	

What tenure is the property?

Leasehold	<input type="checkbox"/>	Freehold	<input type="checkbox"/>	Unknown	<input type="checkbox"/>
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If the property being sold is a freehold property, the seller must complete the freehold property information questionnaire.

1. LENGTH OF OWNERSHIP

When did you become the legal owner of this property?	month:	year:
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2. TAX

Which Council Tax band does this property fall within?	
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3. PARKING

What parking arrangements are there?

Garage	<input type="checkbox"/>	Allocated parking space	<input type="checkbox"/>	Driveway	<input type="checkbox"/>
On street	<input type="checkbox"/>	Resident permit	<input type="checkbox"/>	Metered parking	<input type="checkbox"/>
Shared parking	<input type="checkbox"/>	None	<input type="checkbox"/>	Other:	<input type="checkbox"/>

4. BUILDING RESTRICTIONS/CONDITIONS

A	Is your property a listed building?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	If 'Yes' please state the grade of the property			
B	Is your property in a designated conservation area?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
C	Is the planned HS2 rail link or construction of any other major infrastructure to pass within one mile of this property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

5. CHANGES TO THE PROPERTY

A	Have there been any structural alterations; additions or extensions to the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	If 'Yes' please outline the nature of the work.			

If you answered 'No' to question 5A please continue to 5G.

B	Was Building Control approval obtained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
C	Was planning permission obtained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
D	Was a completion certificate obtained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
E	Was listed building consent obtained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

F	If you answered 'No' to one or more of questions B to E please outline the reason(s) why.			

If you answered 'Yes' the relevant documents will be required by the purchasers. You should give these to your solicitor as soon as possible.

G	Has the property had replacement windows, doors, patio doors or double glazing installed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If 'No' or 'Don't know' continue to J.

H	Are they the same shape and type as the ones they replaced?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
I	Outline what changes were made and give an approximate date of when each alteration was completed.			

Change		Date	
Change		Date	
Change		Date	
Change		Date	

J	Has there been a major repair or replacement to any part of the roof since you purchased the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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6. UTILITIES/SERVICES

A	Is there central/partial central heating in your property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	If 'Yes' please give details of the type of central heating.			

If you answered 'No' to 6A please continue to 6E.

B	When was the central/partial central heating system installed?	Month:	Year:	
C	Is there a maintenance contract in place for the central/partial central heating system?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

If 'Yes' please provide the month and year the contract was renewed and the expiry date, if known.

Renewed	<input type="text"/>	Expires	<input type="text"/>	Don't know <input type="checkbox"/>
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D	Has the primary heating system in your property been serviced?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	If 'Yes' when was the heating system serviced?			
E	Has the electrical wiring in your property been checked?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	If 'Yes' when was the electrical wiring checked?			

Please indicate which services are connected to the property.

F	Service	Connected (yes, no or date to be connected)	Supplier
	Electricity		
	Gas		
	Liquid Petroleum Gas (LPG)		
	Water main or private water supply		
	Drainage to public sewer		
	Septic tank		
	Cesspool		
	Telephone		
	Cable TV or Satellite		
	Broadband		
	Other:		
	Other:		

Other services includes renewable technologies.

G	If you have a septic tank or cesspool, do you have a maintenance contract in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	If 'Yes' the company that the contract is with is:			

7. BOUNDARIES/ACCESS

A	Have you had a dispute with your neighbour at this property which has been resolved or is ongoing? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

B	Have any of the boundaries of your property been altered within your ownership or (if longer) the last 10 years? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

C	Is there a current application to alter the boundaries of your property? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

D	Do you have right of access through any neighbouring homes, buildings or land? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

E	Do any neighbours have right of access through any part of your house, buildings or land? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

F	Is there a public right of way through and/or across your house, buildings or land? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

8. ENERGY PERFORMANCE CERTIFICATE (EPC)

A	Does your property have an EPC, which has been undertaken within the last 10 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If you have an EPC you will need to give a copy to your estate agent. If you do not have an EPC you will need to get one for your property.

9. SPECIALIST ISSUES

A	Has there ever been any preventative work for dry rot, wet rot or damp carried out at your property? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

B	Has there ever been any treatment of dry rot, wet rot or damp carried out at your property? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

C	Does any part of your property contain Asbestos? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

D	Has Japanese Knotweed ever grown within the property boundary or close vicinity? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

E	Has the property ever been subject to subsidence? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

10. GUARANTEES

Are there any guarantees or warranties relating to this property?

A	Guarantee			
	National House Building Council (NHBC)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	Roofing work	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	Damp/rot prevention or treatment work	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	Central heating and/or plumbing work	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	Electrical work	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	Preventative work/remedial action relating to subsidence	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Other:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	

B	Are there any outstanding claims or current applications relating to any of the above? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

11. NOTICES WHICH AFFECT THE PROPERTY

Have you received, within the last three years any of the following notices?

Notice			
The owner of a neighbouring property has made a planning application?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Any planning application, that could affect the property or the views?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Notice informing you that maintenance, repairs or improvements are required to your property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Other:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

You will need to provide details of any notices you are aware of to your solicitor or estate agent.

12. OTHER ISSUES AFFECTING THE PROPERTY

A	Has the property been damaged as a result of a storm or fire since you have owned it? If 'Yes' please provide details and advise whether there are any outstanding claims.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

B	Has there been any flooding at the property since you have owned it? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

C	Have you checked the long term flood risk assessment on the gov.uk website? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

The buyer is advised to go to flood-warning-information.service.gov.uk/long-term-flood-risk for an indication of the area's flood risk.

D	Is this property subject to an excessive noise or disturbance that a potential purchaser should be aware of? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

E	Is this property subject to a Green Deal loan or another financed home improvement scheme? If 'Yes' please provide details including any outstanding payments for the renewable devices and any feed in tariffs.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

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

Please note

The answers to question 13 should be contained within your lease agreement. Alternatively, the information will be contained within invoices, statements or notifications received from the freehold (landlord) and/or managing agent.

Please Note: All leaseholders should have their own copy of the lease, although this may be held by the mortgage lender or conveyancer who handled the purchase. A copy can usually be obtained from the Land Registry. Go to www.gov.uk/government/organisations/land-registry.

If the lease is new and has not yet been granted, please answer the questions based on the draft terms of the lease. The fact that the lease is in draft form it will need to be declared to potential purchasers. Contact your agent if you have any queries regarding the following questions.

13. LEASES AND SHARED RESPONSIBILITIES

A	How long is left on the lease for the property?	years	months
B	To who or to which organisation do you pay ground rent?		
C	How much is your current annual ground rent?	£	
D	To who or to which organisation do you pay service charges?		
E	How much is your current annual service charge?	£	
F	Are you required to contribute to the cost of repairs of a shared drive, private road, boundary or garden area, not already covered within the ground rent or service charges? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/> Don't know <input type="checkbox"/>
If you answered 'Yes' to 13F, how much are these additional charges?		£	
G	Are you required to contribute to the cost of repairs to the roof, common stairwell or other common areas, not already covered within the ground rent or service charges? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/> Don't know <input type="checkbox"/>
If you answered 'Yes' to 13G, how much are these additional charges?		£	
H	Is there any planned or ongoing major work to this property or the building it's contained within? If 'Yes' please provide details of the work.	Yes <input type="checkbox"/>	No <input type="checkbox"/> Don't know <input type="checkbox"/>
If you answered 'Yes' to 13H, how much is the expected cost which the owner of this property will need to pay?		£	

I	I Is there a general buildings insurance policy in place? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
	If you answered 'Yes' to 13I, how much is the annual building insurance?	£		
J	Does the lease prevent you from sub-letting? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
K	Is the property subject to event fees, such as a charge when selling the property? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
L	Are there any other charges, not already covered, which this property is subject to on a regular/periodic basis? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
M	Does the lease prevent you from keeping pets? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
N	Do you have access to a communal garden or similar? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

O	Leases often permit or prevent certain types of activity relating to the use of the property. Are there any other conditions or restrictions in the lease which could significantly impact on a person's use of the property? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
P	Is there a property manager/factor for the building? If 'Yes' please provide their details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

13. ADDITIONAL INFORMATION

A	Are you aware of any covenants, which have not been covered within this form? If 'Yes' please provide details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

A	Are you aware of any other material issues or information which relates to the property or has anything occurred which may affect the average consumer's transactional decision. Please describe this issue and any action that has been taken, if applicable. (Disclosure required under the Consumer Protection from Unfair Trading Regulations 2008).

I/we hereby declare that as the owner (or owner's representative) of this property, I/we have completed this form to the best of my/our knowledge and understand that if I/we have intentionally misled or omitted any information, which may affect the average consumer's transaction decision, I/we may be liable for prosecution under the Consumer Protection from Unfair Trading Regulations 2008.

Print
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Signed Date

Print
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Signed Date