

BUYERS QUESTIONNAIRE

Client Name:

Please supply (and where appropriate confirm or amend) the following details:

ABOUT YOU:

1. Your full name(s) including middle names with title

First

Middle

Surname

Buyer 1:

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Buyer 2:

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2. Address details

Buyer 1:

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Buyer 2:

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3. Contact Telephone Numbers & E-mail

Daytime No.

Evening No.

Mobile No.

Buyer 1:

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Buyer 2:

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E-mail

Buyer 1:

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Buyer 2:

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We will normally communicate with you using e-mail and the postal system.

If you would like to opt out of e-mail correspondence please tick the following box.

4. National Insurance Number(s)

Buyer 1:

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Buyer 2:

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5. Date of Birth(s)

Buyer 1:

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Buyer 2:

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6. Is this an Investment Purchase or are you going to live in the property?

This is an investment purchase

I will be living in the property

7. Please indicate your preferred method of remitting your payment on account:

I enclose a cheque payable to 'Vas Solicitors'

Bank transfer using payment reference (please see letter)

ABOUT YOUR PURCHASE:

1. Full address of property

2. Name of seller(s):

3. Estate Agent's Name, Address and Telephone No (if none please state No Agent):

Estate Agent name:	
Address:	
Tel No.:	
E-mail:	

4. Purchase price

5. Amount of preliminary deposit paid to Agent or Developer (if any) £ _____

6. Amount of deposit available on exchange of contract £ _____

7. Do you require a Mortgage? If so, please provide the name of the proposed mortgage lender and the amount of the loan applied for.

Lender's Name _____ Loan Amount £ _____

8. Will anyone over the age of 18 be living with you at the property? If so, please supply their full names and ages

9. Please confirm the address and phone number of financial advisor (if any)

10. Are you having a private survey? If so, would you like us to recommend a surveyor?

11. Would you like to make a Will or amend your existing Will? New Will Amend Will

12. Please provide your bank details for payment of any monies required throughout your matter.

Sort Code: _____ Account No: _____ Name: _____

NB. PLEASE NOTIFY US OF ANY CHANGES TO THE ABOVE.

I confirm that I accept the terms set out in your client care letter and you Terms of Business accessible via www.vassolicitors.co.uk and declare that the information contained herein is true to the best of my knowledge.

Signed

Dated