



Property Purchase Questionnaire

Scheme Name:

Section 1: Property details

Property address:								
Property description e.g., factory including office:								
Could any part of the property be described as residential? If yes, please provide further information:								
Property price:	£							
Proposed exchange and completion dates								
Is the property being transferred in specie?	<input type="checkbox"/> YES <input type="checkbox"/> NO							
If in specie who currently owns the property?								
Is the property opted to Tax?	<input type="checkbox"/> YES <input type="checkbox"/> NO							
Is the scheme registered for VAT?	<input type="checkbox"/> YES <input type="checkbox"/> NO							
Is the property Freehold or Leasehold:	Freehold <input type="checkbox"/> Leasehold <input type="checkbox"/>							
If leasehold, please advise the unexpired term:								
Is the property being purchased at auction?	<input type="checkbox"/> YES <input type="checkbox"/> NO							
Date of auction	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							
Please provide auction pack or advise where the property details can be obtained from:								
Is the property a new build?								
If YES, please provide details of the builder:								
Does the Property have any Mezzanine flooring, solar panels, car charging ports please provide details.								
Details of any restrictive covenants, easements, or third-party rights (e.g., rights of way) affecting the title.								

Section 2: Lease details

Is the property subject to an existing lease:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Is the tenant a connected party:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Is a copy of the lease attached:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Tenant:	
Lease term:	
Rental amount:	£
Review date:	
Payment frequency:	
Are there any rent arrears?:	<input type="checkbox"/> Yes <input type="checkbox"/> No Amount: £

Section 3: Financing the purchase

Please confirm how the purchase is to be funded:	
Is borrowing required:	<input type="checkbox"/> YES <input type="checkbox"/> NO
If borrowing is required, who is the preferred lender:	
Amount of borrowing:	£
Is the property being purchased jointly with another party:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Joint purchaser:	
Is the joint purchaser connected?:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Value owned by joint purchaser:	£

Section 4: Environmental

Are you aware of any environmental risks:	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please provide further information:	
Please advise if there has been any flood incidents or claims in the last 10 years?:	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please provide further information:	
Do you have any asbestos survey or management plan for the control of asbestos:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Does the property have a current Energy Performance Certificate (EPC):	<input type="checkbox"/> YES <input type="checkbox"/> NO Rating A / B / C / D / E / F / G
If an EPC is not held, please provide further information:	

Section 5: Insurance

To ensure the Scheme assets are protected at all times, insurance will be automatically arranged via the Trustee Block Policy (Berkeley Insurance) unless otherwise requested.

Please select **one** of the following:

Option 1: Trustee Block Policy (Default) Please arrange cover via Berkeley Insurance. The premium will be paid directly from the Scheme bank account.

- Note: This ensures the policy is automatically compliant with all Trustee requirements listed below.*

Option 2: Member-Arranged Insurance We wish to arrange our own commercial insurance.

Minimum Requirements for External Policies

If you select Option 2, you must provide a copy of the insurance schedule annually. All external policies must meet the following specifications:

- Insured Party:** Must be listed as *"The Trustees of the [Insert SSAS Name]"*.
- Reinstatement Value:** Must be based on a professional valuation (RCA) completed within the last 3 years.
- Property Owners Liability:** Minimum cover of £10 million.
- Loss of Rent:** Minimum of 3 years cover.
- Terrorism:** cover to be included.

Important Note: Where the purchase relates to Commercial Land with no building, only Public Liability and Loss of rent cover is required.

Section 6: Solicitor Details

Please provide details below of the Solicitor you wish for us to appoint to act for the Trustees. If you do not have a preferred Solicitor and would like to use one of our panel Solicitors please let us know.

Do you have a preferred Solicitor?:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Solicitors contact Name:	
Solicitor company name:	
Solicitor company address:	
Solicitor's company telephone number:	
Solicitors contact email address:	

Section 7: Vendors Details

Name of the vendor	
Is the vendor connected to the member(s)	
Vendors Solicitor contact Name:	
Vendors Solicitor company name:	
Vendors Solicitor company address:	
Vendors Solicitor company telephone number:	
Vendors Solicitors contact email address:	

Section 8: Property Declaration

We confirm that by signing the declaration below:

- I/We confirm that the information provided in this document is true and accurate and to the best of my/our knowledge
- I/We understand that all costs relating to the property investment should be paid from the pension fund as they are a direct cost of purchasing an asset owned by the Pension Scheme.
- I/We confirm that SeaBridge SSAS Limited has not provided me/us with any advice with regards to holding property within our Pension Scheme.
- I/We understand that commercial property may take time to realise it's value therefore could delay the payment of member's benefits.
- I/We confirm that the Member Trustees will ensure that the property is insured prior to completion of the purchase and remains insured whilst it is owned by the Pension Scheme.

This questionnaire is to be signed by two Member Trustees

Print Name:

Signature

Date

.....

Print Name:

Signature

Date

.....

Please return the completed documents to:

SeaBridge SSAS Limited
Eliot Park Innovation Centre
4 Barling Way
Nuneaton
CV10 7RH

ssasteam@seabridgessas.co.uk