

**Davisons Solicitors
Intermediary Services**

INSTRUCTION FORM

Name of Introducing Broker:

Address:

DX:

Email address:

Telephone No:

Fax No:

Full Names Currently on Title Deeds:

Mr:

Mrs/Miss/Ms:

Full Address of Property:

Correspondence Address :(if different)

Home Tel No:

Work Tel No:

Mobile:

Transaction Details: Remortgage/Sale/Purchase/Buy to Let/Commercial

Full Address of Property:

Is this a Transfer of Title? Yes/No (If yes what name is it to be transferred to)

Full Name:

D.O.B

Full Name:

D.O.B

Existing First Lender; (address of where the title deeds are held)

Name:

Address:

Account No :(s)

Outstanding Mortgage Balance: £

Existing Second/Third ETC Lenders: (if applicable)

Name:

Address:

Account No :(s)

Outstanding Mortgage Balance: £

Please state details of any other occupiers aged 17 and over :(if applicable)

Name: Age/D.O.B

Name: Age/D.O.B

Any additional Information that may be of use:

Amount of Referral Fee £

Amount of Broker Fee £

(Standard Referral Fee is £75.00, if you wish to have an alternative amount please detail above)

Once completed please fax to

0871 277 7161