SIPP

JAMES HAY PARTNERSHIP

Property Return

JHAY0984

In which product is the property held:

Modular iSIPP ☐ IPS SIPP ☐

IPS 2008 SIPP ☐ James Hay Partnership SIPP ☐

IPS Pension Builder ☐ Group SIPP ☐

Family SIPP ☐

Tax Year

2011/12

Please complete this form in BLOCK CAPITALS and black ink and return it to: James Hay Partnership, Dunn's House, St Paul's Road, Salisbury, SP2 7BF. Should you have any queries please contact your Account Executive or our general enquiry number 0845 850 4455.

Please continue on a separate sheet if additional space is required.

1 Personal Details

Applicant to complete

Title

Forename(s)

Surname

SIPP Reference

Percentage of Property owned in SIPP

%

Property reference

Property address

Post Code

Have there been any changes or alterations in ownership or co-trustee?

Yes ☐ No ☐

If yes, please provide details

2 Lease Events

Applicant to complete

Please provide information on all tenants relating to the period and continue on page 2 for additional tenants.

Current Tenant

Name

Has there been a tenant at any point during the relevant tax period, as stated above?

Yes ☐ No ☐

If yes, current annual rent reserved under the terms of the lease

Have the following items been completed during the period?

Rent Review	Yes ☐	Date: D D M M Y Y	No ☐
Assignment	Yes ☐	Date: D D M M Y Y	No ☐
Sub-letting	Yes ☐	Date: D D M M Y Y	No ☐
Licence to Alter	Yes ☐	Date: D D M M Y Y	No ☐
Tenant Name Change	Yes ☐	Date: D D M M Y Y	No ☐

Rent received into SIPP during tax year

£

Outcome

Please confirm whether you are connected to the other party in the transaction

Yes ☐ No ☐

Have copies of relevant documents been sent to James Hay Partnership?

Yes ☐ No ☐

If no, please send copies with this form.

3 Financial Information

Applicant to complete

Rent due during the Period

£

Please provide VAT registration Number (required for all VAT opted properties)

What action has been taken to recover any rent arrears?

Invoices/expenses paid outside the SIPP. Please provide copies of all documentation.

What is the mortgage balance?

£ at D D M M Y Y Y Y

4 Insurance and Health & Safety

Applicant to complete

Date of property Inspection

D D M M Y Y Y Y

Was the property occupied?

Yes ☐ No ☐

If yes, name of occupier

What was the general condition of the property?

Externally

Internally

What maintenance is required?

What is the name of the insurer?

What is the renewal date?

D D M M Y Y Y Y

Please provide a copy of the insurance certificate.

Current Building Reinstatement Value

£

Has work, other than general maintenance been carried out at the property?

Yes ☐ No ☐

If so, who carried out the works and how were they paid?

Please use the space below for any comments you wish to add:

5 Additional Tenant Information

Applicant to complete

Tenant 2

Name

Current annual rent reserved under the terms of the lease

Have the following items been completed during the period?

Rent Review	Yes ☐	Date: D D M M Y Y	No ☐
Assignment	Yes ☐	Date: D D M M Y Y	No ☐
Sub-letting	Yes ☐	Date: D D M M Y Y	No ☐
Licence to Alter	Yes ☐	Date: D D M M Y Y	No ☐
Tenant Name Change	Yes ☐	Date: D D M M Y Y	No ☐

Rent received into SIPP during tax year

£

Outcome

Please confirm whether you are connected to the other party in the transaction

Yes ☐ No ☐

Have copies of relevant documents been sent to James Hay Partnership?

Yes ☐ No ☐

If no, please send copies with this form.

5 Additional Tenant Information (continued)

Applicant to complete

Tenant 3

Name

Current annual rent reserved under the terms of the lease

Have the following items been completed during the period?

Rent Review	Yes ☐	Date: D D M M Y Y	No ☐
Assignment	Yes ☐	Date: D D M M Y Y	No ☐
Sub-letting	Yes ☐	Date: D D M M Y Y	No ☐
Licence to Alter	Yes ☐	Date: D D M M Y Y	No ☐
Tenant Name Change	Yes ☐	Date: D D M M Y Y	No ☐

Rent received into SIPP during tax year

£

Outcome

Please confirm whether you are connected to the other party in the transaction

Yes ☐ No ☐

Have copies of relevant documents been sent to James Hay Partnership?

Yes ☐ No ☐

If no, please send copies with this form.

Tenant 4

Name

Current annual rent reserved under the terms of the lease

Have the following items been completed during the period?

Rent Review	Yes ☐	Date: D D M M Y Y	No ☐
Assignment	Yes ☐	Date: D D M M Y Y	No ☐
Sub-letting	Yes ☐	Date: D D M M Y Y	No ☐
Licence to Alter	Yes ☐	Date: D D M M Y Y	No ☐
Tenant Name Change	Yes ☐	Date: D D M M Y Y	No ☐

Rent received into SIPP during tax year

£

Outcome

Please confirm whether you are connected to the other party in the transaction

Yes ☐ No ☐

Have copies of relevant documents been sent to James Hay Partnership?

Yes ☐ No ☐

If no, please send copies with this form.

6 Signature

Applicant to complete

I confirm that the information given above is factually accurate to the best of my knowledge. I accept that this information may be shared with HM Revenue & Customs if requested.

Signed

Print name

Date

D D M M Y Y Y Y

James Hay Partnership is able to provide literature in alternative formats. The formats available are: Large Print (as recommended by RNIB), Braille, Audio Tape and PC Disk. If you would like to receive this document in an alternative format please contact us on 0845 850 4455. For the hard of hearing and / or speech impaired, please use the Typetalk service via 18001 0845 850 4455.

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