

Transfer of Equity (ToE) Instruction Form

A Transfer of Equity refers to the process of changing the ownership structure of a property. It involves the legal transfer of ownership or a share of ownership in a property from one party to another. This could be done for various reasons, such as adding new owners, removing existing owners or both.

Where a Transfer of Equity is required, please complete this form in its entirety, have this signed by each transferor and transferee of the property and supply the documents listed on page 5. If you have any questions or there are any exceptional circumstances pertaining to the Transfer of Equity, please contact the head office.

Details of Transferor(s)																																															
Please supply the details of those currently on the title deeds																																															
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20%;">Full Name:</td><td></td></tr> <tr><td>Home Address:</td><td></td></tr> <tr><td>Telephone:</td><td></td></tr> <tr><td>Email Address:</td><td></td></tr> <tr><td>NI Number:</td><td></td></tr> <tr><td colspan="2" style="background-color: #e0e0e0;"></td></tr> <tr><td>Full Name:</td><td></td></tr> <tr><td>Home Address:</td><td></td></tr> <tr><td>Telephone:</td><td></td></tr> <tr><td>Email Address:</td><td></td></tr> <tr><td>NI Number:</td><td></td></tr> <tr><td colspan="2" style="background-color: #e0e0e0;"></td></tr> <tr><td>Full Name:</td><td></td></tr> <tr><td>Home Address:</td><td></td></tr> <tr><td>Telephone:</td><td></td></tr> <tr><td>Email Address:</td><td></td></tr> <tr><td>NI Number:</td><td></td></tr> <tr><td colspan="2" style="background-color: #e0e0e0;"></td></tr> <tr><td>Full Name:</td><td></td></tr> <tr><td>Home Address:</td><td></td></tr> <tr><td>Telephone:</td><td></td></tr> <tr><td>Email Address:</td><td></td></tr> <tr><td>NI Number:</td><td></td></tr> </table>	Full Name:		Home Address:		Telephone:		Email Address:		NI Number:				Full Name:		Home Address:		Telephone:		Email Address:		NI Number:				Full Name:		Home Address:		Telephone:		Email Address:		NI Number:				Full Name:		Home Address:		Telephone:		Email Address:		NI Number:	
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Address of Property to be Transferred																																															
Please supply the address of the property you wish to transfer equity upon																																															

Value of the Property to be Transferred	
Please supply the market value of the property.	
<u>NB: The property must be exchanged for no consideration or this will be a sale/purchase and not a Transfer of Equity.</u>	
Details of the Mortgage (if applicable)	
Is there a mortgage on the property if so with whom?	
If so, what is the mortgage account number?	
Details of Transferee(s)	
Please supply the details of those to be added on the title deeds	
	Full Name:
	Home Address:
	Telephone:
	Email Address:
	NI Number:
	Full Name:
	Home Address:
	Telephone:
	Email Address:
	NI Number:
	Full Name:
	Home Address:
	Telephone:
	Email Address:
	NI Number:
	Full Name:
	Home Address:
	Telephone:
	Email Address:
	NI Number:

Names & Ages of Current/Future Occupiers of the Property (if applicable)			
Please list the full name(s) and ages of individual(s) who intend to live in the property but will not be owners. <i>(please use the below if you require more space)</i>	Full Name:		Age:
	Full Name:		Age:
	Full Name:		Age:
	Full Name:		Age:
	Full Name:		Age:
	Full Name:		Age:

NOTES (please use this space for any additional details):

Client Declaration

WE CONFIRM that we are over 18 years of age and that we are of sound mind and that we have heard these instructions read to us and acknowledge that they represent our intentions as to the Transfer of Equity on my Property.

WE UNDERSTAND the information contained in these instructions will be sent by Goodwills Legal Services Ltd to Premier Solicitors Ltd (a Solicitors practice associated with and appointed by Goodwills Legal Services Ltd) for them to conduct the Transfer of Equity and **WE FURTHER UNDERSTAND AND HEREBY AUTHORISE** Premier Solicitors Ltd to act on our behalf in relation to the Transfer of Equity. **WE UNDERSTAND** that in due course Premier Solicitors Ltd will contact us and provide their terms of business regarding the Transfer of Equity.

WE UNDERSTAND that advice given by Goodwills Legal Services Ltd is based on their understanding of HMRC practices at the time the advice is given. **WE THEREFORE** agree that no person, company or agent of such company responsible for this Transfer of Equity shall be liable if changes in HMRC practices affect any liability to tax or duty.

WE UNDERSTAND that the advice is based on the information that we have supplied. **WE THEREFORE** agree that no person, company or agent of such company responsible for the Transfer of Equity shall be liable if we have withheld or provided inaccurate information relevant to the Transfer of Equity.

THE DATA PROTECTION ACT 2018. The information recorded in this document may be retained physically or electronically for reference purposes and will be held in accordance with the Data Protection Act 2018. The information may also be used by Goodwills Legal Services Ltd and its Appointed Representatives to provide you with the details of services suitable to your requirements and to keep you informed of any changes in legislation and practices. Goodwills Legal Services Ltd will **NEVER** pass your details to any third party unrelated to the Transfer of Equity.

SIGNED BY TRANSFERORS:

Full Name:		Signed:	
Full Name:		Signed:	
Full Name:		Signed:	
Full Name:		Signed:	

SIGNED BY TRANSFEREES:

Full Name:		Signed:	
Full Name:		Signed:	
Full Name:		Signed:	
Full Name:		Signed:	

DATE: ____ / ____ / ____

Transfer of Equity Requirements

FOR CONSULTANT USE ONLY

- Completed & Signed ToE Instruction Form (as previous);
- Three forms of identification from each Transferrer & Transferee (as below); and.
- Proof of name change (if applicable).

Please note that if a / the Transferor(s) is over the age of 85, we would require a GP letter confirming the individual(s) have mental capacity.

One document (original or certified copy) from List A and List B **AND** one additional document from either list A or B

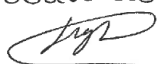
A **Proof of Identity**

- Current signed passport
- Birth certificate
- Current photographic driving licence
- Full old-style driving licence (paper)
- Armed Forces ID card/Police warrant card
- Identity card
- Residence permit issued by the Home Office
- Firearms or shotgun certificate
- Benefit book or original notification letter from Benefits Agency
- Photographic registration cards for self-employed individuals in the construction industry - CIS4

B **Proof of Address**

- Confirmation from the electoral register
- Recent utility bill or bank statement, not more than 3 months old.
- Council Tax demand or statement
- Current UK driving licence (but only if not used as evidence of ID)
- Local Authority rent card or tenancy agreement.
- Mortgage statement
- Solicitors letter confirming recent house purchase or land registry confirmation of address
- Benefit book or original notification letter from Benefits Agency (but not if used as evidence of ID)
- Inland Revenue self-assessment or tax demand
- Electoral Register entry
- NHS Medical card

If you intend to supply certified copies, please certify each form of identification with the appropriate wording (below) to confirm it is a true copy of the original. Please then sign, date it, and print your name. Please see below an example:

I hereby certify this
to be a true and exact
copy of the original
Goodwills legal services

08/08/2023