

Enhanced AML Check PURCHASER INFORMATION FORM

Estate Agent Branch Ref:

Purchase Address

Full Name

Date of Birth

Home Address

Time at address

Tel. Number

Full Name

Date of Birth

Home Address

Time at address

Tel. Number

I/We hereby give permission for Identity Checks as prescribed by the HMRC "Money Laundering Regulations 2007: supervision of Estate Agency Businesses", and described at: <https://www.gov.uk/government/publications/april-2014-supervision-of-estate-agency-businesses-by-hmrc/april-2014-supervision-of-estate-agency-businesses-by-hmrc> to be completed and for the results to be shared with my Estate Agent and my appointed Conveyancing Lawyer. I/We confirm that the information above to be true and agree to pay £35 + VAT for the provision of the AML check if I/We do not use Team Conveyancing

Signature

Today's Date

Signature

Today's Date

OFFICE USE ONLY

As the Estate Agent acting on behalf of the above named Purchaser(s), I can confirm that I:

- met the Purchaser(s) in person no more than 2 months from the date shown below
- saw and copied the Purchaser(s) original genuine and untampered Passport(s) and/ or Driving Licence(s)
- consider the photo ID(s) attached to be a good likeness of the Purchaser(s)
- will only use the copy of the photo ID(s) to enable me to confirm the Purchaser(s) identity
- witnessed the Purchaser(s) signatures above
- believe the offer to be in line with market expectations and have identified nothing suspicious about the transaction

If there are any boxes that you can not tick, please describe the reason below and escalate to Branch Manager.

Escalation Required

(See Escalation Chart and give reason below)

Estate Agent Name (Reference)

Estate Agent Signature

Today's Date

Escalation Required Authorised

(See Branch Manager Decision Matrix and give reason below)

Branch Manager Name

Branch Manager Signature

Today's Date