



Pure Classic

Additional Property Questionnaire

Please complete this form and en	nail it to propertyf	orm@pureretiren	nent.co.uk		
Applicant Name(s):					
Application Number (If known):					
1. Accommodation					
Property Type (e.g. detached, ser	mi-detached, bung	galow etc)			
Please indicate the number of:					
Living Rooms	Bedrooms				
Kitchens	Bathrooms				
Cloak Rooms	Garages				
Off Street Car Park Spaces					
Any other outbuildings (including any self-contained annexs) (please provide details):					
2. Mains Services					
Does your property have the follo	owing working ma	ins services:			
Electricity		Yes	No		
Gas		Yes	No		
Water		Yes	No		
Drainage		Yes	No		
(If no please confirm type of drain	nage):				
3. Outside					
Does your property have a garde	n·	Yes	No		
Estimated size of garden		.03			
Has there been any previous insu	rance claims on th	e property in rela	tion to:		
Flooding or movement (e.g. subs	idence)	Yes	No		
Are there any known rights of wa	y or shared				
access drives/paths shared with r	neighbours	Yes	No		
Is there any known Japanese Kno 7 meters	tweed within	Yes	No	Unknown	



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4. Other Information		
Has the property had any structural		
alterations in the last 10 years	Yes No	Unknown
Does the property have spray foam		
insulation in the roof	Yes No	Unknown
Does the property have any damp concerns (if yes please provide detail)	Yes No	Unknown
E. Dhotographs		
5. Photographs		
Please provide a photograph for each of the following	(email to propertyfor	m@pureretirement.co.uk)
1. Front of the property		
2. Rear of the property		
3. Kitchen(s)		
4. Bathroon(s)		
6. Occupiers		
Who resides in the property		
Have you been declined for a mortgage/		
equity release loan in the last 24 months	Yes No	
7. Your Declaration and Authorisation		
This form has been completed by (please tick): Broker or Customer		
By ticking the below box I confirm that the information or has been obtained from the customer to the best of based on this information you/the customer are confirmed by Pure Retirement to make their lending decision.	f their knowledge, and ming that this informa	by accepting any offer
Please tick to confirm acceptance of the above parag	raph	
Print Name: F	rint Name:	