

**AB/01**

**CERTIFICATE OF TITLE/PROOF OF OWNERSHIP**

Housing Grants, Construction and Regeneration Act 1996  
The Regulatory Reform Order 2002

**To the WYCHAVON DISTRICT COUNCIL**

(Full names)

Of  
(Address)

Owns the freehold interest in or is the lessee with a term of not less than five years remaining unexpired in the property known as: -

(Address)

The freehold/leasehold interest was acquired on

(date)

Where can the property deeds be inspected?

Signed

Occupation

Name (print)

Business Address

(Official Certifying Stamp)

*This form to be completed by your mortgage company or by a solicitor who has access to your property deeds.*

*Providing false information is an offence. In order to combat fraud we may check the information given to us, in connection with your application, with other Government Agencies and departments.*