



SUBMISSION FORM FOR DEFECTIVE TITLE/LOST TITLE DEEDS

Proposers name in full:	
Postal Address:	
Address of Property to be insured:	
Phone & e-mail:	
Current market value of property (developed value if relevant):	
Property Type (Commercial/Residential/Other):	
Indemnity Limit Required:	
Please state the reason for no title:	
Please provide details of the continued/intended use of the property:	
How important is the land in the context of the entire site:	
Please provide confirmation that there have been no third party challenges to title to date:	

In your opinion, how would a third party challenge the title:	
Please provide confirmation that a Registry of Deeds search against the Vendor discloses no adverse entries:	
Do you require the PRA or any other State Body to be named on the policy:	
Do you require the interest of any other party to be noted:	
Confirmation that a Registry of Deeds search against the Vendor discloses no adverse entries:	
Any additional information that you have to hand that may be useful:	

Checklist

<p>Please supply the following along with your submission:</p> <ol style="list-style-type: none"> 1. A copy memorial of the missing deed/s 2. Statutory Declaration in relation to the property and the Missing Deeds not being pledged 3. A map of the area with the relevant property highlighted 4. A note from the proposers Solicitor outlining the position generally

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Woodquay, Galway, Ireland
H91 HTT2

Tel: +353 (0)91 563518

Email: info@burkeins.ie
Web: www.burkeins.ie

Signed: _____

Date: _____

Capacity of Signatory:
(i.e. solicitor/proposer) _____

Print Name: _____

Solicitor Contact Name: _____

Email Address: _____

Telephone Number: _____

Please email the completed submission along with the above documents to:

info@burkeins.ie, Stephanie Burke smburke@burkeins.ie or Paul Cawthorne: pcawthorne@burkeins.ie

Or post to: Burke Insurances 6 St Brendan's Road Woodquay Galway T: 091 - 563518