

Reference (for our use only)

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**Intervention archives document request form**

**Name of the solicitor/law firm that held the documents/files: .......................................................................................**

**Returning documents to you**

We will do everything we can to try to find and return your documents. However, please note that, at this stage, we cannot confirm whether we have them. We only have documents or files that were in the law firm’s offices or storage facilities when we closed that firm down.

We aim to deal with requests within six to 12 weeks from when we have received all the information we need.

Please note that if any of your files/documents are in storage facilities used by the solicitor or firm, then these can take longer to recover. If this is the case, we will let you know.

**Completing this form**

When filling out this form:

* make sure you read all parts of the form before completing it
* complete as much it as possible, as this will help us to deal with your enquiry more quickly
* include a copy of identification from each person who signs this form (please see section 7)
* make sure all persons named on this form sign it (please see section 8)
* use a blank sheet and attach it, in case you need more space.

Please note:

* if any information, documents or signatures are missing, it might delay your request
* if we need any further information or there is information missing from your form, we will contact you.

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**Reasonable adjustments**

We make reasonable adjustments to try to make sure that all people can use our services and information. These can include printing forms in a larger print or a preferred communication method. We are committed to the promotion of equality and diversity. If you wish to make a request, please [contact us](https://www.sra.org.uk/home/contact-us/).

**Returning your form**

Please send your signed completed form and copies of your identification documents:

By email: iaf@sra.org.uk

By post:

Intervention Archives

Solicitors Regulation Authority

PO Box 6956

Coventry

CV6 9RF

[sra.org.uk](http://www.sra.org.uk)

**Urgent requests**

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| **If your request is urgent, please explain why** |

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| Part 1: Your details |
|  Mr Mrs Ms Miss Other (Please give details): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Your name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Your address – house no/name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Your email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Your daytime tel number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Would you like us to send correspondence to this address? Yes NoWould you like us to send the documents to this address? Yes No If no, where would you like us to send correspondence and the documents?Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Part 2: Please tell us which files/documents you are looking for |
| Please tick all that apply.   Marriage certificate Deeds Lease  Deed of gift Power of Attorney Will  Change of name deed – please specify previous name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other – please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_What name or name(s) is/are on the file or document? The name(s) on the file will be the law firm or solicitor’s client(s). If it is in the name of a company or other legal entity, please state so. We will need a copy of identification and permission in writing from all those named on the file. If the client is deceased, we will need a copy of the death certificate (please see part 5). \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_------------------------------------------------------------------------------------------------------------------------------------If your request is for a file, what does it relate to (eg property sale/purchase, litigation)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**For an immigration file**, please state date of birth and country of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Part 3: Property files/leases/deeds |
| If your request is for property files/leases/title deeds, what is the address and postcode of the property. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Have you ever had a mortgage on the property? Yes No**If yes:** we will need the mortgage lender’s consent before we can release the correspondence file. This does not relate to the deeds. Please contact the mortgage lender and ask for their written consent. If you have repaid the mortgage, we will need a written proof of this from your mortgage lender. Please send this in with your request. We do not accept financial statements.  |
| Part 4 Wills |
| What is the date of the will (if known)? Is it your own will? Yes No If not, what is the name of the person whose will it is? ………………………………………………..We will need the authority of that person to send the will to you.Address on the will at time of making it: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Part 5 Deceased PersonsIf they have passed away then we will need:* a copy of the death certificate and a copy Grant of Probate or copy of Letters of Administration or copy of the will
* the written authority and identification of the executors

Is a copy of the death certificate enclosed with this form? Yes No Is a copy of the Grant of Probate enclosed with this form? Yes No Is a copy of the will enclosed with this form? Yes No Authority of ExecutorsI give my authority for the will to be forwarded to the person named in Part 1.Print name:................................... Signed:................................... Date:...................................Print name:................................... Signed:................................... Date:...................................All executors must provide a form of identification. We can accept the types of identification listed in Part 7 (Identification). |
| Part 6: If you are acting as a power of attorney |
| If you are acting as a power of attorney for the person named in the file or document, please send a copy of the full power of attorney document.  |
| Part 7: Identification |
| To be able to release your document(s), we will need to see proof of your identity. We need either **one document from list A** or **two documents from list B**.**List A** – a copy of one of the following on:* current passport
* current UK photocard driving licence (we do not accept counterpart licences)
* current EEA identity card that was issued in the UK.

**OR****List B –** a copy of two of the following, where your name and address are clearly shown: * original statement fewer than three months old for credit card, or a debit card.
* a utility bill fewer than three months old and sent to you by post
* council tax bill for the current year
* council rent book showing the rent paid for the last three months
* latest mortgage statement which was sent to you by post
* a paper driving licence (this is not and is different to the counterpart licence)
* NHS/doctor appointment letters dated in the last three months (not appointment cards)
* HMRC letters dated in the last three months
* DWP letters dated in the last three months or an annual letter.

**Information if you are requesting a file/document on behalf of a business**If you are a company, a director/company secretary must complete this form and provide identification. They must also send proof of their position in the company. This can be confirmation on company-headed paper, or a print off from Companies House, or equivalent. If this business is a partnership, a partner should do this. EnclosedCompany or Entity Name …………………………………………………………..Company Number …………………………………………………….. |

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| Part 8: Authorities |
| **Important, please take note.**We need a hand-written signature and a copy of identification from every party (all clients named on files, company representaives, etc) named on this form to release files. If you have supplied a separate document/file that includes the party’s signature, then you do not have to supply it here:**We do not accept electronic or typed signatures or stamped signatures.** **We will also require a form of identification from each person named on the form.** Surname:.................................... First name:................................ Signature:......................................Date:...........................................  Surname:.................................... First name:................................ Signature:......................................Date:...........................................Surname:.................................... First name:................................ Signature:......................................Date:...........................................Surname:.................................... First name:................................ Signature:......................................Date:...........................................Surname:.................................... First name:................................ Signature:......................................Date:........................................... |

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| Privacy notice |
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