



Isle of Man Land Registry
Submission of an application

Form 100

For Registry Use Only	
Application Number	Date Presented

Note: Please complete in typescript or block capitals using black ink. Further information on the completion of this form can be found in the guidelines

1. Details of Applicant(s)
<i>Please provide the full name of each Applicant. If more than 4 continue on Appendix I using a similar heading.</i>
<p>Name</p> <p>1</p> <p>2</p> <p>3</p> <p>4</p>

2. Application lodged by																						
<i>All communications relating to this application will be directed to the person lodging it until registration is completed. If this form accompanies Form 1 the name below must that of be an Advocate.</i>																						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 5px;">Name</td> <td></td> </tr> <tr> <td style="padding: 5px;">Firm</td> <td></td> </tr> <tr> <td style="padding: 5px;">Name of Building</td> <td></td> </tr> <tr> <td style="padding: 5px;">Number</td> <td></td> </tr> <tr> <td style="padding: 5px;">Street</td> <td></td> </tr> <tr> <td style="padding: 5px;">District</td> <td></td> </tr> <tr> <td style="padding: 5px;">Town</td> <td></td> </tr> <tr> <td style="padding: 5px;">Postcode</td> <td></td> </tr> <tr> <td style="padding: 5px;">Telephone</td> <td></td> </tr> <tr> <td style="padding: 5px;">Email</td> <td></td> </tr> <tr> <td style="padding: 5px;">Your Reference</td> <td></td> </tr> </table>	Name		Firm		Name of Building		Number		Street		District		Town		Postcode		Telephone		Email		Your Reference	
Name																						
Firm																						
Name of Building																						
Number																						
Street																						
District																						
Town																						
Postcode																						
Telephone																						
Email																						
Your Reference																						

3. Property affected by this Application	
In all cases, please enter the Parish, Local Government District in which the land is located and an address with the postcode (if any) for the land	
Parish:	Local Government District:
Address:	
3.1 Is the property registered? <i>Please place X in the appropriate box</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
3.2 If Yes , enter the Title Number(s) and the Registered Owners of the title(s) affected by this submission.	
<u>Title Number</u>	<u>Registered Owner(s)</u>

4. Nature and priority of forms included with this application					
<i>Please set out in priority order each event to be registered with reference to its Land Registry form number. Please note that any Appendices for inclusion are part of the form which they support.</i>					
Item	Description	Form number	Consideration / Market Value or Value of Share Transferred £	Registration Fee £	Registry use only
1					
2					
3					
4					
5					
6					
7					
8					
Total Fee					

5. Original Supporting documents lodged with this application.					
<i>Please list any original deeds and documents lodged in support of this application. For each supporting document please reference the Land Registry form number that it supports as set out in Section 4 above.</i>					
Item	Nature of Document	Date of Document	Parties or Description (if any)	Document Supports Form no	Registry use only
1					
2					
3					
4					
5					
6					
7					
8					