



Isle of Man Land Registry  
**Application to Registrar for rectification of the Title Register**  
 Rule82

**Form 26**

FOR REGISTRY USE ONLY
Application Number

Note: This form must be accompanied by Form 100.

<b>1.1 Title Number</b>	
Registered Owner(s)	
Index of Names Number(s)	

<b>2. Does the Application Affect:</b>	Whole of the land in the Title?	<input type="checkbox"/>
	Part of the land in the Title? <i>Note: If part, a Survey Map Extract must be supplied to identify the extent of each land parcel affected by the application.        Use Appendix B for second and subsequent parcels.</i>	<input type="checkbox"/>

<b>3. The application is being made by:</b> <i>check the box required.</i>	
The registered owner(s)	<input type="checkbox"/>
Another applicant. <i>If so please enter the details in box 3.1</i>	<input type="checkbox"/>

<b>3.1 Applicant(s) Name</b> <i>Please provide the full name of each applicant, including title.        In the case of a company provide the company's full name. If more than two applicants continue on Appendix C.</i>		
	<b><u>APPLICANT 1</u></b>	<b><u>APPLICANT 2</u></b>
Title		
Forenames		
Surname or Company Name		
Company No.		
Index of Names number (if any)		

<b>3.2 Service Address</b>		Rule 15
<i>This must be an address in the Island or the UK to which all notices and communications from the Land Registry will be directed after registration is completed.</i>		
Flat or Unit No.		
Name of Building		
Number		
Street		
District		
Town or Parish		
Postcode		
Country		

<b>4 The nature of the rectification falls within the following sub-section of section of the Act</b>		
<b>4.1</b>	65(2)	<input type="checkbox"/>
<b>4.2</b>	65(2)(a)	<input type="checkbox"/>

**5. Set out the proposed rectification for entry on the title register.**  
*Give details of the error or omission to be rectified here. A Survey Map Extract must be supplied if the application affects anything shown or depicted on the Filed or Supplementary Plan  
 If there is insufficient space please continue on Appendix I. If set out in a supporting document, identify the document*

**5.1 The grounds relied upon in support of this application are**  
*Give concise summary here. State any supporting documents which contain supporting facts.  
 If there is insufficient space please continue on Appendix I.*

<b>6. Is this application made with the knowledge and consent of all persons whose interests are or may be affected by the entry?</b>	Yes <input type="checkbox"/>
<i>Evidence of such consent must be lodged in support of this application. If No, please answer 6.1.</i>	No <input type="checkbox"/>
<b>6.1 The consent referred to in section 6 has not been obtained for the following reasons.</b>	

**7. Signature of each applicant**

*To avoid unnecessary delays please ensure that all forms have been correctly completed, signed and dated and that all necessary documents and maps are furnished together with the correct fees.*

I/We authorise the agent nominated by this application to receive and respond to all communications affecting this application until the registration is completed. *Delete if application is made by the applicants.*

**Signature(s)**

**Date**

**8. Signature of person lodging application (if not the applicant)**

*To avoid unnecessary delays please ensure that all forms have been correctly completed, signed and dated and that all necessary documents and maps are furnished together with the correct fees.*

**Signature**

**Date**

**Name of Advocate**

*Please state the name of the signing advocate in block letters*

**Name of Firm**

*Please state the name of the firm in block letters*