

Important:
Please read the notes
overleaf before
completing this form

Form K19

Land Charges Act 1972

Fee panel

Place "X" in the appropriate box. See
Note 1 overleaf.

A cheque or postal order for
the correct fee accompanies
this application.

Please debit our Direct Debit
under an authorised agreement
with Land Registry.

**APPLICATION FOR AN OFFICE COPY OF AN
ENTRY IN THE REGISTER**

Application is made for an office copy of the entry described below

Is a copy of any plan filed in the register required?
Please delete as applicable.

YES/NO

Delete words
not applicable.

PARTICULARS OF ENTRY

LAND CHARGE (Class _____ Sub-Class _____)
ANNUITY
PENDING ACTION
WRIT OR ORDER
DEED OF ARRANGEMENT

Insert number and date
of the registration

L/C Registration No.

Date of registration
(see Note 2 overleaf)

Day	Month	Year

PARTICULARS OF ESTATE OWNER

Forename(s)

SURNAME

Only one individual or
body to be entered.

FOR OFFICIAL USE ONLY

1	#
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2	OC
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3	01
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4	
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5	
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(See Note 3 overleaf)

KEY NUMBER

**Solicitor's name and
address (including
postcode).**

If no solicitor is acting
enter the applicant's
name and address
(including postcode).

(See Notes 4 and 5
overleaf)

Solicitor's reference

Name and address (including postcode)
to which copy is to be sent
(Please use BLOCK CAPITALS)

← This space
must be
completed
by the
applicant

Solicitor's reference _____

NOTES FOR GUIDANCE OF APPLICANTS

The following notes are supplied for assistance in making the application overleaf. Detailed information for the making of all kinds of applications to the Land Charges Department is contained in Practice Guide 63 – *Land Charges – Applications for registration, official search, office copy and cancellation* which is obtainable on application at the address shown below.

1. **Fees.** These must be paid by Direct Debit under an authorised agreement with Land Registry or by cheque or postal order made payable to “Land Registry” (see the Practice Guide referred to above).
2. **Date of completion.** Complete all boxes and refer to month by 3 letters:-

e.g.

Day		Month			Year			
0	4	S	E	P	1	9	8	1

3. **Key Number.** If you have been allocated a key number, please take care to enter this in the space provided overleaf, whether or not you are paying fees by Direct Debit.
4. **Solicitor’s reference.** Any reference must be limited to 25 characters, including any oblique strokes and punctuation.
5. **Despatch of this form.** When completed, send this application form to the address shown below, which is printed in a position so as to fit within a standard window envelope.

**The Superintendent
Land Charges Department
Office Copy Section
Seaton Court, 2 William Prance Road,
PLYMOUTH PL6 5WS
DX 8249 PLYMOUTH (3)**

(see Note 5 above)