

**APPLICATION To carry out**

 **an alteration / improvement**

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| Name(s): |  |
| Address: |  |
| Tel No:  |  |
| Email: |  |

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| Please provide full details of the proposed works you wish to carry out, attach any plans and drawing of your proposal, if using a contractor please provide their documentation. |

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| Will you be using a contractor?Yes 🖵 No 🖵If yes, please provide full details including name, address and telephone number of your chosen contractor(s) Name: Name:Address: Address:Tel No: Tel No:Please provide any company insurance, Health & Safety and relevant qualification documentation. (if applicable) |

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| What is the estimated costs of the proposed work?  |
| What is the proposed start date of the work? |

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| Does the work require Planning Consent from East Lothian Council?Yes 🖵 No 🖵If yes, have you applied?Yes 🖵 No 🖵If yes, have you received approvalYes 🖵 No 🖵 |

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| Does the work require a Building Warrant?Yes 🖵 No 🖵If yes, have you applied?Yes 🖵 No 🖵If yes, have you received approval?Yes 🖵 No 🖵 |

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| **UNDERTAKING [Please read this carefully before signing]** * I/we agree that if the application proposal is approved, I/we will ensure that the work is carried out:
	+ by competent, professionally qualified tradesmen where required, and will check that they are properly registered if there is work on gas pipework or electrical systems;
	+ to all current national standards, safety requirements, statutory regulations and codes of practice that may apply;
	+ to any specification, other standards and the quality that Homes for Life Partnership requires.
* I/we agree that before any work commence, I will obtain and pass to Homes for Life Housing Partnership any Planning Consent and/or Building Warrant required.
* I/we agree to ensure that the work is carried out within any time limits set by Homes for Life Housing Partnership and that I/we will advise Homes for Life Housing Partnership when the work is finished so that they may inspect it if necessary.
* I/we agree that I will obtain and pass to Homes for Life Housing Partnership all building, gas and/or electrical safety certificates required following the completion of work.
* I/we agree that if the completed work does not meet the required standards I/we will arrange for remedial work to be carried out at my/our own expense.
* I/we agree that if Homes for Life Housing Partnership has to undertake any remedial work as a result of the work carried out by others either not being finished, or being below the standards required (including the quality of the work) then I/we will reimburse Homes for Life Housing Partnership for the cost of their work.
* I/we agree that if any damage is caused to other parts of the property as a result of work on my alteration, Homes for Life Housing Partnership will arrange for the necessary repairs and that I/we will pay the costs of these repairs.
* I/we agree that if approved (applicable), I/we agree to maintain/repair any works carried out at our own expense.
* I/we accept that Homes for Life Partnership may ask for the removal of alteration/improvement reinstate the property to the original condition, and I/we agree to do so at my/our expense.
* I/we accept that at the end of my tenancy Homes for Life Housing Partnership may require me/us to reinstate the property to the original condition, and I/we agree to do so at my/our expense.
* I/we are aware that certain alterations such as those that affect the electrical or gas supply will need to be checked by a qualified trades person appointed by Homes for Life Housing Partnership, this will incur a charge which you will be required to pay. These checks are very important for the safety of you, your family and your neighbours.

Permission will not normally be refused unless the proposed alteration/improvement is going to present a safety hazard or structural problem to the property or adversely affect the future let ability of the property. If permission is refused you have the right to appeal the decision.Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**FOR OFFICE USE ONLY**

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| Date received: |

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| Acknowledgement sent: |

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| Passed to HO/MO on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 28 days target date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

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| This is an alteration/improvement\* (delete one)Approved Yes 🖵 No 🖵Decision sent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |