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**Application for tenancy change**

**Please answer all question using full using Block Letters**

**BEFORE YOU COMPLETE THIS FORM, PLEASE READ THE IMPORTANT INFORMATION ON THE PAGE(S) ATTACHED. PLEASE LET US KNOW IF YOU REQUIRE ANY ASSISTANCE TO COMPLETE THE FORM.**

You are required to inform us of any new person coming to live with you or anyone leaving your home. From 1st November 2019, this is especially important if you later want to assign (pass on) your tenancy, become a joint tenant with another person or would like them to succeed to (take over) your tenancy in the event of your death. To qualify, the other person must have been living in your property as their only and principal home for the 12 months before application is made. **The 12-month period does not start until we have been notified and have registered the individual.**

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| **What type of tenancy change are you requesting?**  (Please see information sheet for definitions) |
| 🖵 Succession 🖵 Sole Tenancy to Joint Tenancy 🖵 Joint to Sole Tenancy 🖵 Assignation |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| FULL NAME OF TENANT: Mr/Mrs/Ms/Miss | | | | |  |
| FULL NAME OF JOINT APPLICANT: Mr/Mrs/Ms/Miss | | | | |  |
| YOUR ADDRESS | |  | | | |
| Tel No. Home |  | | Work |  | |
| Mobile 1 |  | | Email |  | |
| Mobile 2 |  | | Email |  | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Give details of all persons (including partner) presently occupying the accommodation.  YOU SHOULD ALSO INCLUDE YOUR OWN PERSONAL DETAILS | | | | | | |
| Full Name | Relationship  to applicant | Address | Age | Date of Birth | | |
|  | Self |  |  |  |  |  |
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| Why do you wish to apply for a change of tenancy? |
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|  |  |
| --- | --- |
| New Tenancy claimed by |  |
| Relationship to Tenant |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Please give details of your applicants’ previous addresses over the last 5 years. | | | | |
|  | Address | Dates from | Dates to | Name and Address of Landlord  or did you own the property? |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Do they have an outstanding debt to a previous landlord? | | 🖵 Yes 🖵 No |
| If yes, who was their landlord? |  | |
| Address of landlord |  | |
| Do they have a repayment plan in operation? | | 🖵 Yes 🖵 No |
| If yes, please give details |  | |

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| --- | --- | --- |
| Has any person on this application been the subject of an anti-social behaviour order (ASBO) or under S19 of the Crime and Disorder Act 1998, on or after 30/9/02? | | 🖵 Yes 🖵 No |
| If yes, which person was this? |  | |

|  |  |  |
| --- | --- | --- |
| Is anyone on this form Registered under the Sexual Offences Act 2003? | | 🖵 Yes 🖵 No |
| If yes, which person was this? |  | |

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| **WHAT WE DO WITH YOUR PERSONAL DATA:**  Under current Data Protection legislation, the information you provide will be used for the purpose of checking and assessing your Change of Household Composition request and is necessary to support your allocation of a tenancy at the property identified on this application. In making enquiries in connection with this Change of Household Composition application, your information may also be shared with other agencies such as current/former landlord; Department for Work and Pensions; doctor or health visitor.  Further general information about how Homes for Life Housing Partnership processes your personal data can be found on our website ‘www.homesforlife.co.uk/’ under the link “Privacy Notice”, which can be found on our home page. If you do not have internet access, a hard copy is available on request.  **DECLARATION:** I DECLARE THE PARTICULARS GIVEN BY ME ON THIS FORM ARE TRUE IN ALL RESPECTS.  **PLEASE NOTE WE CANNOT PROCESS YOUR APPLICATION UNLESS YOU HAVE SIGNED THIS SECTION**  **Signature of applicant: ...................................................... Date: ...........................................**  **Name (Block Capitals): ......................................................**  **Signature of joint applicant: ..................................................... Date .............................................**  **Name (Block Capitals): .....................................................**  This form should be used to tell us of a change in the number of people who form part of your household, especially if the number of people has or will increase. In the event of future changes to your tenancy, from 1st November 2019, the necessary 12-month period qualification applies to anyone joining your household, including your spouse, civil partner or co-habiting partner. However, in the event of your death your spouse, civil partner or joint tenant will automatically qualify, provided the property has been their only or principal home at the time of your death. |

|  |  |
| --- | --- |
| **FOR OFFICIAL USE ONLY** | |
| Tenant Ref No: Current monthly rent £ Property size: | |
| Current Rent Balance: | |
| Approved/Refused: Signature: | |
| Date: | EPC Required: 🖵 Yes 🖵 No |
| Comments: | |

**APPLICATION FOR TENANCY CHANGE – INFORMATION SHEET**

**This form should be used to apply to change your tenancy. We have listed some frequently asked questions below, but please contact us should you have further questions. As of the 1st November 2019, the Housing (Scotland) Act, 2014 changes the residency conditions of the following tenancy changes – succession, assignation and sole to joint. Please note also the information on adapted properties on page 1 of this application.**

**SUCCESSION (take over the tenancy after the tenant’s death)**

**Q. The tenant of the house has died, who can succeed the tenancy?**

A. In the event of the tenant’s death, the Scottish Secure Tenancy can be succeeded to twice. Each time there are three levels of priority: Level 1 – surviving spouse, civil partner or joint tenant. Please note, anyone in these categories will qualify automatically provided the property has been their only or principal home at the time of your death; Level 2 – other members of the family over 16 years of age or co-habitants, providing this was their only or principal home for 12 months prior to the tenant’s death and had been registered as part of the tenant’s household; Level 3 - carers over 16 years of age, providing the property was their only or principal home for 12 months prior to the tenant’s death and had been registered as part of the tenant’s household. All notices of rights to succeed must be advised to us within 28 days of the death of the tenant.

**ASSIGNATION (pass your tenancy to someone else)**

Q. My daughter or son has been living with me and I am going into residential care or moving away to another area, can I assign the tenancy to them?

A. Yes, you can assign the tenancy to someone as long as they are over 16 years of age and have been registered with us as living in the property as their only or principal home for at least 12 months prior to application.

**SOLE TO A JOINT TENANCY**

**Q. Can I apply to become a joint tenant?**

A. Yes, you can apply to become a joint tenant if you are over 16 years of age and share one of our houses with the tenant as your only or principal home. You must have been registered as part of the tenant’s household for the 12-month period prior to application. This applies to anyone wanting to become a joint tenant, including spouse, civil partner or co-habiting partner.

**JOINT TENANCY TO A SOLE TENANCY**

**Q. I am a joint tenant with my husband/wife or partner and wish to sign the tenancy over to them, what should I do?**

A. The joint tenant leaving the property must give us and the remaining tenant 28 days’ notice in writing. The remaining tenant should complete this “Application for Tenancy Change” form.

Homes for Life Housing Partnership,

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