

APPLICATION FOR SUCCESSION OF TENANCY

Please complete this form if you believe you have the right to take over (succeed) to a tenancy after a tenant dies. Information about succession is available on our website: www.barnethomes.org.

Please return the completed form with the supporting document to **Barnet Homes, 3rd Floor, 2 Bristol Avenue, Colindale, NW9 4EW**



Section 1: Current Tenancy Details

Title: Name:

Contact Number: Email:

Address of Property:

Details of Person(s) in occupation:

Title: Name:

Date of Birth: Gender: Relationship:

Title: Name:

Date of Birth: Gender: Relationship:

Title: Name:

Date of Birth: Gender: Relationship:

Title: Name:

Date of Birth: Gender: Relationship:

Date of Death (Current Tenant):

Did the Tenant Succeed Themselves?:

Yes: No:

Section 2: Property Details

Type of Property:

House: Flat:

Maisonette: Bungalow:

Does the Property Have any of the Following:

Level Access Shower: Stair Lift:

Ramps: Handrails:

Other Adaptions (Please List):

Do You Need These Adaptions:

Yes: No:

Section 3: Details of Applicant

Title:	Name:		
Date of Birth		Gender:	Relationship:
Contact Number:	Email:		
Date Applicant Moved into Property:			
National Insurance Number:			
Is This Property Your Only or Principle Home?:			
Yes: <input type="checkbox"/>		No: <input type="checkbox"/>	

If the Property Is Assessed as Too Large for His/ Her Needs, Will the Proposed Tenant Consider Transfer to a Smaller Property

Yes: No:

Please Give Details of All Previous Addresses Over Last Five Years:

Address :

Landlord:	From:	To:
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Address :

Landlord:	From:	To:
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Address :

Landlord:	From:	To:
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Section 4: Supporting Documents

The proposed assigned tenant needs to provide **one** document from **Box A** and **two** from **Box B**. **Tick Boxes of Documents Included.**

Documents must demonstrate that the applicant currently lives at the address of succession and has done so for the last 12 months.

Box A		Box B
Passport:	<input type="checkbox"/>	Utility Bill/s: <input type="checkbox"/>
Birth Certificate:	<input type="checkbox"/>	DVLA Document: <input type="checkbox"/>
Driving Licence:	<input type="checkbox"/>	TV Licence: <input type="checkbox"/>
		Bank Statement: <input type="checkbox"/>

Other Document (Must show National Insurance Number):

Death Certificate Of Deceased Tenant Enclosed? (Required Document):

Yes: No:

Section 5: Declaration

I declare that the information I have given on this form is correct and complete. I understand that if I give information that is incorrect or incomplete Barnet Homes may take action against me including possession proceedings and/or I may be prosecuted. I understand that if I do not occupy the property as my only or principle home Barnet Homes may seek possession of the property and I may be prosecuted.

I understand Barnet Homes is under a duty to protect the public funds/ resources it manages on behalf of the council and may share the information I have provided on this form for data matching purposes for the prevention and detection of fraud and crime, where the law allows.

I understand you may cross check this information with other council and government departments and other organisations such as credit reference agencies, where the law allows.

Signature (Applicant):

Print Name:

Date:
