

Joint to sole tenancy application form

Do you need this form in large print or in a different format or language? Do you have any questions?
Please telephone us on 0303 123 1890.

If you would like to change your tenancy from a joint tenancy to a sole tenancy please complete this form in full and email it to:

NewLettings@guinness.org.uk

Or post to

The Guinness Partnership Ltd, Henshaw House, 851 Silbury Boulevard, Milton Keynes MK9 3JZ

- Both tenants need to sign the application form.
- Both tenants will need to sign the legal paperwork if the application is approved.

If one tenant has left the property and cannot be traced it is unlikely that we will be able to approve the application. Please complete contact our Customer Service Centre for more information.

Who should keep the tenancy?

Guinness cannot give you advice on this. The decision must be made between the joint tenants or if there is a dispute you must seek independent legal advice or ask the Citizens Advice Bureau in your area. They can be contacted on telephone 03444 111 444.

When would you refuse an application?

We would normally refuse an application if:

- There are outstanding rent arrears on the account.
- We have or are in the process of obtaining a possession order for your home.
- Legal action is being taken against you or a member of your household.
- You have an ongoing disrepair claim with us.
- The property is not suitable for the needs of the remaining tenant. We will discuss alternative arrangements with you.

Whether or not to approve this application will be at our discretion.

Will you rehouse me if I give up the tenancy?

No, once you have given up the tenancy you will need to find your own alternative accommodation. We would advise you speak to the housing department at your local council before making this application.

SECTION 1 – Existing tenancy

Tenant 1 - wishing to remain at the property?

First name

Last name

Date of birth

Sex
M F

Tenant 2 - wishing to be taken off the tenancy?

First name

Last name

Date of birth

Sex
M F

What is the address and postcode of the property?

Property address

Postcode

What is the best way to contact you?

Tenant 1: telephone number

Tenant 2: telephone number

Other (please state)

Household members* who will continue to live at the property

Please state who is living with you at the above address. If there are no household members please write 'none'.

Person 1

First name

Last name

Date of birth

Sex
M F

Title Mr Mrs Miss Other

Is this person related to either/both tenant/s? If so, state relationship below.

Person 2

First name

Last name

Date of birth

Sex
M F

Title Mr Mrs Miss Other

Is this person related to either/both tenant/s? If so, state relationship below.

Person 3

Sex M F

First name

Last name

Date of birth Title Mr Mrs Miss Other

Is this person related to either/both tenant/s? If so, state relationship below.

Person 4

Sex M F

First name

Last name

Date of birth Title Mr Mrs Miss Other

Is this person related to either/both tenant/s? If so, state relationship below.

Person 5

Sex M F

First name

Last name

Date of birth Title Mr Mrs Miss Other

Is this person related to either/both tenant/s? If so, state relationship below.

Person 6

Sex M F

First name

Last name

Date of birth Title Mr Mrs Miss Other

Is this person related to either/both tenant/s? If so, state relationship below.

*Lodgers do not count as household members

Child care arrangements

Do you have shared child care arrangements i.e. will your children live in another house for some of the time? Yes No

If no, please explain.

Is anyone in the household expecting a baby? If yes, please confirm. Yes No

Mother's name

Date baby due

You will be asked to produce the MATB1 form confirming the expected date.

Your property details

Type of property House Flat Bungalow Studio or bedsit Other

Number of bedrooms Studio/bedsit 1 bed 2 bed 3 bed 4 bed 5+ bed

Has your home been adapted for a disability e.g. wheelchair access, level access shower room? If yes, please give brief details Yes No

Will a member of the housing remaining in the property require these adaptations? Yes No

SECTION 2 – to be completed by the person wishing to become a sole tenant

Declarations

I

request to become the sole tenant of:

Address

 Postcode

I declare the information I have given on this form is correct and complete.

Signature Date

To be completed by the tenant wanting to give up the tenancy

I

request to have my the legal rights to:

Address

 Postcode

Assigned – passed on to (name of remaining tenant):

I understand that if this application is approved and the tenancy assigned I will have no further rights or obligations in relation to this tenancy.

I understand that I remain liable for any rent arrears or breaches of tenancy which occurred whilst I was a joint tenant.

I declare the information I have given on this form is correct and complete.

Signature Date

First name
Last name

New address

 Postcode

For office use only

Does the signature match tenancy agreement?

Yes No

Does tenancy information match the housing system?

Yes No

Property

Does the household meet the bedroom standard?

Yes No

If no, please explain.

Has the MATB1 been produced? (If applicable).

Yes No

Has formal shared child care agreement been produced? (If applicable).

Yes No

Has the property been adapted for a disabled person?

Yes No

If , please explain.

Checks

Has satisfactory citizenship and immigration documents been provided?

Yes No

If no, please explain.

Customer Accounts Team

Rent Arrears £

Court Costs £

Other debts £

Live NoSP Yes No

P O Yes No

SPO Yes No

Tenancy Enforcement Team

Ongoing legal action (if yes, please explain).

Yes No

Neighbourhoods Team

Breaches of tenancy (if yes, please explain).

Yes No

Recommendation

Is this joint to sole change recommended?
(If no, please state reasons for refusal).

Yes No

Checked (LA)

Name:

Date:

Approval

I approve this change in tenancy

I do not approve this change in tenancy

Checked (VALTM)

Name:

Date: