

## Application for Tenants to Sublet their Home

### SECTION 1. Your current tenancy details

Property address:

|  |
|--|
|  |
|  |
|  |

Postcode:

Telephone:

|  |
|--|
|  |
|--|

Name of tenant/s:

|  |
|--|
|  |
|  |

### SECTION 2. Details of all other persons currently resident in the Council property:

| Name | Relationship to tenant | Date of birth |
|------|------------------------|---------------|
|      |                        |               |
|      |                        |               |
|      |                        |               |
|      |                        |               |

Reasons for Sublet - to be completed by the current tenant(s).

|  |
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|  |
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|  |
|  |

Contact details (including address & telephone number) for tenant during the period of the sublet.

|               |  |           |  |
|---------------|--|-----------|--|
| Telephone No. |  | Address   |  |
| Mobile No.    |  |           |  |
| Email address |  |           |  |
|               |  | Post code |  |

**SECTION 3. Details of the proposed Subtenant(s): Main Subtenant**

|               |  |           |  |
|---------------|--|-----------|--|
| First Name    |  | Address   |  |
| Surname       |  |           |  |
| Date of Birth |  |           |  |
| Telephone No  |  | From / To |  |

**Details of the Proposed Subtenant(s) : Joint Subtenant**

|               |  |           |  |
|---------------|--|-----------|--|
| First Name    |  | Address   |  |
| Surname       |  |           |  |
| Date of Birth |  |           |  |
| Telephone No  |  | From / To |  |

**SECTION 4. Details of the proposed rent charges**

|                           |   |   |   |
|---------------------------|---|---|---|
| Fortnightly Rental Charge | £ | Any other payment should be noted here. |   |
| Security Deposit          | £ | Payment                                 | £ |
|                           |   | Reason                                  |   |

**SECTION 5. Proposed sublet period**

|                                |  |                               |  |
|--------------------------------|--|-------------------------------|--|
| Proposed start date of Sublet* |  | Proposed end date of Sublet** |  |
|--------------------------------|--|-------------------------------|--|

\* At least 30 days from the date of application. \*\* No longer than six months from the start date.

**SECTION 6. DECLARATION (To be signed by the current tenant(s))**

- I/we request to sublet my tenancy in terms of Section 32 and Schedule 5 of the Housing (Scotland) Act 2001.
- I/we confirm that I/we have provided true information. I/we am/are aware that deliberately withholding information or giving false information may lead to this application being cancelled.
- I/we confirm that I/we intend to return to the tenancy and to take up occupancy as our principle or only home. I/we understand if we do not return within the specified period, I/we should take steps to terminate the tenancy.
- I/we understand that the **Subtenant(s) will have no legal right to the tenancy** in my/our absence and acknowledge that East Lothian Council will take the appropriate steps to the recover vacant possession of the property.
- I/we confirm that I/we understand that I/we am/are liable to continue to pay the rent for the property for the duration of the sublet.
- I/we understand that our housing application will be deferred for the period of the sub let.
- I/we understand that I/we am/are also responsible for the tenancy during the period of the sublet.
- I/we confirm that I/we have not received payment (other than rent or deposit) for agreeing to the sublet.

| Signature | Print name | Date |
|-----------|------------|------|
|           |            |      |
|           |            |      |
|           |            |      |

**IMPORTANT**

Please return this application form to your Community Housing Officer based at your local area housing office.

They will contact your proposed Subtenant(s) to confirm their details and circumstances. It is important that your Subtenant responds to our letter and provides the information we ask for as soon as possible - any delay may result in a decision on your application being delayed. We aim to make a decision within 28 days of receipt of all of the information we require. We will inform you of our decision in writing. If you are unhappy with the outcome, you have the right of appeal. We will provide further information on the appeal process in our decision letter.

## For Office Use Only - Request for Extension to Sublet Period

Extension request received from:

|           |                          |              |                          |                  |  |
|-----------|--------------------------|--------------|--------------------------|------------------|--|
| Tenant(s) | <input type="checkbox"/> | Subtenant(s) | <input type="checkbox"/> | Date of receipt: |  |
|-----------|--------------------------|--------------|--------------------------|------------------|--|

Agreement to request extension of sublet received from:

|           |                          |              |                          |       |  |
|-----------|--------------------------|--------------|--------------------------|-------|--|
| Tenant(s) | <input type="checkbox"/> | Subtenant(s) | <input type="checkbox"/> | Date: |  |
|-----------|--------------------------|--------------|--------------------------|-------|--|

|  |  |   |
|--|--|---|
| Date of initial sublet period:         |  | Total period to be no more than 12 months |
| Date initial sublet period due to end: |  |   |
| Period of extension requested:         |  |   |

Tenancy checks

|              |                              |                             |
|--------------|------------------------------|-----------------------------|
| Rent Account | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| House file   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Orchard/ASB  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Notes

Decision

|                            |                              |                              |  |
|----------------------------|------------------------------|------------------------------|--|
| Request Approved:          | Yes <input type="checkbox"/> | No: <input type="checkbox"/> |  |
| Community Housing Officer: |                              | Date:                        |  |

|                   |                              |       |  |
|-------------------|------------------------------|-------|--|
| Tenant advised    | Yes <input type="checkbox"/> | Date: |  |
| Subtenant advised | Yes <input type="checkbox"/> | Date: |  |

|                       |       |  |
|-----------------------|-------|--|
| Sublet period to end: | Date: |  |
|-----------------------|-------|--|