# **Application for a Joint Tenancy**

## SECTION 1. Your current tenancy details

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Name of current tenant/s:

Property Address:

Post Code:

Telephone Number:

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| **SECTION 2. Details of all other people currently living in the tenancy:** |
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| Name |  | Relationship to tenant |  | Date of birth |
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| SECTION 3. Reasons for joint tenancy - to be completed by the current tenant(s). |
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| **SECTION 4. Details of Proposed Joint Tenant**  |
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| Please Note: Any proposed joint tenant (this includes the current tenant’s spouse, cohabitee or civil partner) must have been resident in the property as their main or principle home for the previous twelve months and the Council’s housing department must have received a Household Form confirming this. Before we can fully process this application, the proposed joint tenant must also submit proof of their identity (an example of this is a driving licence, current passport or birth certificate) if they have not already done so. |
| Surname |  |  | Date of Birth |  |
| First Name |  |  | National Ins. No. |  |
| Telephone Number |  |  | Relationship to you |  |

 **Please provide details of the proposed Joint Tenant’s housing history for the last 5 years – use a separate sheet if required.**

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| **Address** |  |  | **Address** |  |
|  |  |  |
|  |  |  |
| **From / To** |  |  | **From / To** |  |
| **Landlord** |  |  | **Landlord**  |  |

 **Please provide additional information separately where appropriate.**

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| Has a Household Form been submitted to the Council’s housing department at least 12 months prior to application |  | No [ ]  | Yes [ ]  |  [ ]  Information provided separately |
| Does the proposed Joint Tenant have any outstanding housing related debts? |  | **No** [ ]  | Yes [ ]  |  [ ]  Information provided separately |
| Has the proposed Joint Tenant been involved in anti-social behaviour or is/has been the subject of an ASBO? |  | No [ ]  | Yes [ ]  |  [ ]  Information provided separately |
| Does the proposed Joint Tenant have a medical condition that will require adaptations to your home? |  | No [ ]  | Yes [ ]  |  [ ]  Information provided separately |

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| **SECTION 5. Details of the proposed Joint Tenant** |
|  **Will other people be moving with the proposed Joint Tenant – please provide details**

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| First Name |  |  | First Name |  |
| Surname |  |  | Surname |  |
| Date of Birth |  |  | Date of Birth |  |
| Relationship to joint tenant |  |  | Relationship to joint tenant |  |

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| SECTION 6. DECLARATION (To be signed by the current tenant(s))* 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 request being cancelled.
* I/we give permission for East Lothian Council to carry out all tenancy checks in relation to this application.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature |  | Print name |  | Date  |
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| SECTION 7. DECLARATION (To be signed by the proposed Joint Tenant(s))* 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 request being cancelled.
* I/we give permission for East Lothian Council to carry out all tenancy checks in relation to this application and to seek references where appropriate.

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| --- | --- | --- | --- | --- |
| Signature |  | Print name |  | Date  |
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| Date application received: |  |
| **Household Form** checked:  | Yes [ ]  No [ ]  |
| Is the proposed joint tenant recorded as being resident for the previous 12 months? | Yes [ ]  No [ ]  |
| **Property Details** |
| Apartment Size: |  | Tenancy Type: SST [ ]  SSST [ ]  |
| Would the creation of a joint tenancy lead to overcrowding? | Yes [ ]  No [ ]  |
| Has the Spouse/Civil Partner/person with occupancy rights agreed to the request? | Yes [ ]  No [ ]  |
| **Tenancy checks**  | **Tenant** | **Joint Applicant** |
| Is there a Notice of Proceedings in force? | Yes [ ]  No [ ]  |  Yes [ ]  No [ ]  |
| Is an Order for Recovery in force? | Yes [ ]  No [ ]  |  Yes [ ]  No [ ]  |
| Rent account checks | Yes [ ]  No [ ]  |  Yes [ ]  No [ ]  |
| House file checks | Yes [ ]  No [ ]  |  Yes [ ]  No [ ]  |
| Orchard/Anti-social Behaviour checks | Yes [ ]  No [ ]  |  Yes [ ]  No [ ]   |
| Proof of Identification received & verified? |  Yes [ ]  No [ ]   |

**For Office Use Only**

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| Decision |
| Request Approved: | Yes [ ]   | No [ ]  | Date: |  |
| Community Housing Officer: |  |
| Sign Up Arranged | Yes [ ]  No [ ]  | Date: |  |
| Advise tenant(s) to contact Housing Benefit and Council Tax (if appropriate). |
| Email Change of Circs to Housing Benefit/Council Tax |