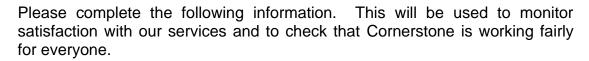


Removing a Tenant from a Tenancy Agreement

Title:			Surname	:	
First Name(s):					
Date of Birth:	National Insurance Number:				
Relationship to tenant:					
Current Address:					
Telephone Number:					
Do you have any children u	nder 183	? Yes		lo	ck ✓)
If yes how many \Box a	nd are th	ney movir	ng in with you	u? Yes	No ☐ (Please tick ✓)
Please list your addresses	or the pa	ast 6 yea	rs:		
Address	From	То	Rented/ Owned	Landlord	Reason for leaving
Employment:			Net mont	hly income: £	
Name of Employer:					
Address of Employer:					
Do you own or part own any If yes, please provide detail		ty yes/	no		
Are you currently a tenant of the second of	of any oth s	ner social	l landlord y	es / no	

Have you or any other person moving in permanently been charged, cautioned or convicted for a Schedule one offence? (Schedule one offence include sexual assaults, various forms of abuse, other forms of maltreatment from murder to cruelty or neglect and other offences resulting in bodily injury to the victim.)					
Yes/No					
Have you or any other person moving in permanently been convicted of arson?					
Yes/No					
Have you or any other person moving in permanently had or having, any action taken against you/them for anti social behaviour?					
Yes/No					
If you have answered yes to the above questions you will be sent a confidential additional questionnaire, which must be completed and returned to Cornerstone.					
Which of the following describes your citizenship?					
Please tick one only					
British Citizen EU Member					
Person subject to immigration control					
Under the Immigration Act 2014 we are required by law to prove that people who are applying for a tenancy are eligible for housing. This also includes anyone over 18 years old who will be coming to live at the property with you. When this form is returned to us, our staff will contact you to discuss what original documentation you will need to provide. We will take copies of these documents and hold them on file.					
Declaration: I declare that the information I have given in this form are true and complete. I understand that the giving of false or misleading information, by myself, or by any person action on my behalf, may be grounds for possession of the tenancy. In Signing, this form I give permission for Cornerstone to process personal information under the Data Protection Act, I also give my permission to discuss and disclose any information with other relevant agencies concerning this application.					
Applicant Signature Date					

Equality Monitoring Form





All the following questions are voluntary. You do not have to give us any of the information but everything you do tell us will help us improve our services. The information you provide is completely confidential and will not be used to identify you in any way. Only group results will be reported on.

White.		Black or Black British.		
	British Irish Any other white background		Caribbean African Any other black background	
Mixed.		Asia	n or Asian British.	
	White and Black Caribbean		Indian	
	White and Black African		Pakistani	
	White and Asian		Bangladeshi	
	Any other mixed background		Any other Asian background	
Chinese.	,		other ethnic background se write in box	



Do you c	consider yourself to be a disabled person? Yes	s No		(Please ticl	< ✓)
disability or disabi	ability Discrimination Act 1995 defines as any long term illness, heath problem lity which limits your daily activities or the can do, including problems which are d age.)				
	Hearing impairment Visual impairment Speech impairment Mobility impairment Physical co-ordination difficulty		Severo Menta Learn	eed physical of the disfigurement of the disfigurement of the disficultient of the describe between the describe between the distribution of the d	ent s/disabilities
	If you have answered yes, please give details				



Adding additional person on to the Tenancy Agreement Or permanently moving in with a Tenant of Cornerstone

The following is a list of <u>all</u> persons that will occupy the property:

Title Mr/Mrs Miss/Ms	Surname	First Name(s)	Relationship to New Tenant	Sex (M/F)	DOB