Application for Joint Tenancy

Name of Tenant(s)	
Address	
Postcode	
Home Tel	
Mobile No	
Email Address	
If you are requesting a joint tenancy the person must have been living in your property as their only principal home for the 12 months before making this application. The Association must also have been informed that they were a member of the household.	

PLEASE ANSWER ALL QUESTIONS IN FULL USING BLOCK LETTERS

Do you require any of t	he following options to aid you with	your application?
Large Print Text \square	Language Interpreting Service \Box	Braille Text 🗌



Tenancy Reference No.
Date Returned:

Full Name		Relationship tapplicant(s)	o main	Age	Dat	e of Bi	irth
		Tenant					
REASON(S) for ap	plying for a	joint tenancy					
REASON(S) for ap	pplying for a	joint tenancy					
REASON(S) for ap	pplying for a	joint tenancy					
Details of propos	ed joint tend		Date of Birth	Telepho Numbe		Relo	ationship to
Details of propos	ed joint tend	ant	Date of			I	•
Details of propos Full Name	ced joint tend	ant t Address	Date of Birth	Numbe	r	I	
Details of propos Full Name Have you informe	Current Ed Housing B	ant t Address senefit / UC of	Date of Birth	Number	r	You	
Details of propos Full Name Have you informe	Current Ed Housing B	ant t Address senefit / UC of	Date of Birth this char	Number nge? nt tenant? ent/Previous	r	You	
Details of propos Full Name Have you informe	Current ed Housing B be moving i	ant Address Senefit / UC of	Date of Birth this characteristics posed jointo Curr	Number nge? nt tenant? ent/Previous	r	You Yes 🗆	No 🗆
Details of propos Full Name	Current ed Housing B be moving i	ant Address Senefit / UC of	Date of Birth this characteristics posed jointo Curr	Number nge? nt tenant? ent/Previous	r	You Yes 🗆	No 🗆

Has anyone included on this application been evicted for anti-social behaviour within the last 3 years?	Yes □	No □
If Yes, please provide details:		
Name of Person Evicted		
Evicting Landlord		
Has any person covered by this application been the subject of an Anti-Social Behaviour Order (ASBO) under Section 19 of the Crime and Disorder Act 1998, on or after 30th September 2002?	Yes □	No □
If YES please provide details:		
Name of person subject to ASBO		
Are you, or any person noted on this application form required to register with police under the Sex Offenders Act 1997	Yes □	No □

DECLARATION

Please read through the following statements and sign at the bottom to acknowledge and show you understand and agree with them

- I declare that to the best of my knowledge, the answers given to the questions on this form are true and accurate. I/We understand that any false information provided may result in my/our application to run a business from home being cancelled.
- I/We authorise the Association to make any necessary enquiries to verify the accuracy of the information provided.
- I/We understand that illegal activity as a result of this arrangement will result in action being taken against my tenancy.
- I confirm that I will notify Angus Housing Association immediately of any changes in my circumstances as related in this application.

circumstances as related in this application.	
• I understand that the issue of this form does not guarantee prom Angus Housing Association Limited	permission to take in a lodger
Name (Block Capitals)	
Signature of Tenant	Date
Name Joint Tenant (Block Capitals)	
Signature of Joint Tenant	Date
PROPOSED JOINT TENANT DECLARATION	
Please read through the following statement and sign at the I show you understand and agree with them	oottom to acknowledge and
I declare that the information provided above is true and that tenant at the property detailed above. I confirm that the propis, or will be from the date on which the joint tenancy takes effhome. I have seen and understand the terms and conditions a Agreement under which I wish to become a joint tenant.	perty at the address above fect, my only or principal
Name (Block Capitals)	
Signature of Proposed Joint Tenant	Date

Once completed please send your form to:

Arbroath Office:

Angus Housing Association Ltd 93 High Street Arbroath DD11 1DP

Dundee Office:

Angus Housing Association Ltd Ormiston Crescent Whitfield, Dundee DD4 OUD

OFFICIAL USE ONLY				
Tenant Ref No: New Tenant ref No. (if applicable):				
Decision: Request Granted \square Request Refused \square (please tick as appropriate)				
Name of Officer:	Da	te of decision:		
Reason for refusal (if relevant):				
Records Updated	Letter Sent:	_ Date		
Housing Officer		_ Date		
Housing Manager		Date		

YOUR PERSONAL INFORMATION (TENANT)

We, Angus HA, are the controller of the personal information that we hold about you. This means that we are legally responsible for how we hold and use personal information about you. It also means that we are required to comply with data protection laws when holding and using your personal information. This includes providing you with the details of how we hold and use your personal information, who we may share it with and your rights in relation to your personal information. Full Statement available on our website

We have appointed a Data Protection Officer (DPO), Daradjeet Jagpal, who ensures we comply with data protection laws. If you have any questions about this statement or how we hold or use your personal information, please contact the DPO by: e-mail at angusdpo@infolawsolutions.co.uk or writing to: The Data Protection Officer, Angus Housing Association Limited, 93 High Street, Arbroath, DD11 1DP.

You can contact us by: e-mail at admin@aha.org.uk; telephone on 0345 177 22 44; or writing to: Angus Housing Association Limited, 93 High Street, Arbroath, DD11 1DP

Angus Housing Association Limited

93 High Street, Arbroath Angus DD11 1DP The Square, Ormiston Crescent Dundee DD4 OUD

Tel 0345 177 2244 Email admin@aha.org.uk www.angusha.org.uk

Scottish Charity No. SC020981