

## **Giving Notice to end my Tenancy Form**



Please complete this form when you wish to give notice of your intention to end your tenancy with WCHG.

**Please note this form is only for giving notice of your intention to end your tenancy.**

To end your tenancy, please do so by completing the form 'Tenancy Termination', this form is available on the website, you will find it under the Tenancy Termination tab.

Only complete the termination form on the date you wish your tenancy to be ended. Tenancies will always be ended on the Sunday following the termination date.

**Your tenancy will not be terminated until we receive the completed Tenancy Termination form.**

If you require any further information on this, please contact us at [NeighbourhoodAdvisors@wchg.org.uk](mailto:NeighbourhoodAdvisors@wchg.org.uk)

**Please make sure you fill in all the required (\*) fields of this form.**

**Your Name\***

First Name:	
Last Name:	

**Address\***

Street Address:	
Address Line 2:	
City:	Post Code:

**Details**

Contact Number*:	
Date of Birth*	
Email:	

National Insurance Number*:	
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Is This a Joint or a Sole Tenancy*	Joint / Sole
Please indicate the reason why you are terminating your tenancy: *	<input type="checkbox"/> Affordability due to bedroom tax <input type="checkbox"/> Affordability can no longer afford to live here <input type="checkbox"/> New Housing Association Tenancy <input type="checkbox"/> Moving to another WCHG property <input type="checkbox"/> Residential or Supported Accommodation <input type="checkbox"/> Bought Own Home <input type="checkbox"/> Other - please state below Other: _____
Does the Property have any accessibility features? *	<input type="checkbox"/> N/a <input type="checkbox"/> Wet Room <input type="checkbox"/> Stairlift <input type="checkbox"/> Level Access Shower <input type="checkbox"/> Ramps and Rails <input type="checkbox"/> Other - please state below Other: _____
Please indicate the date you intend to terminate your tenancy: *	

**Where are you moving to, please state your forwarding address: \***

Street Address:			
Address Line 2:			
City:	Post Code:		

Declaration:

- I understand that WCHG on receipt of this form will terminate the whole tenancy, including that of any joint tenant.
- I will return my keys to Wythenshawe Community Housing Group before 12pm on the date my tenancy ends. Post box to return keys is located at WCHG Car Park entrance on Woodhouse Lane.

- I understand that I am liable for weekly rent up until the Sunday before my termination date, keys received after 12pm will incur a further week's rent being charged.
- I can confirm that all my belongings and rubbish from my property have been removed.
- I understand that WCHG may recharge me for any items or rubbish left in the property or garden.

Full Name: *	
Signature: *	
Date: *	

Once completed, please return the application form to:

[NeighbourhoodAdvisors@wchg.org.uk](mailto:NeighbourhoodAdvisors@wchg.org.uk) or hand it into our **Reception: 8 Poundswick Lane, Wythenshawe, M22 9TA**