

## Tenancy Termination Form



Only complete this form when you are ending your tenancy and you understand that WCHG will lock change the property and will dispose of all items left both internally and externally on receipt of this form.

**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*: |  |

|  |  |
|--|--|
| Is This a Joint or a Sole Tenancy*                                 | Joint / Sole   |
| Please indicate the reason why you are terminating your tenancy: * | <div><input type="checkbox"/> Affordability due to bedroom tax</div> <div><input type="checkbox"/> Affordability can no longer afford to live here</div> <div><input type="checkbox"/> New Housing Association Tenancy</div> <div><input type="checkbox"/> Moving to another WCHG property</div> <div><input type="checkbox"/> Residential or Supported Accommodation</div> <div><input type="checkbox"/> Bought Own Home</div> <div><input type="checkbox"/> Other - please state below</div> <div>Other: _____</div> |

|  |  |
|--|--|
| Does the Property have any accessibility features? * | <input type="checkbox"/> N/a<br><input type="checkbox"/> Wet Room<br><input type="checkbox"/> Stairlift<br><input type="checkbox"/> Level Access Shower<br><input type="checkbox"/> Ramps and Rails<br><input type="checkbox"/> Other - please state below<br><br>Other: _____ |
| When Would You Like Your Tenancy to End? *           |  |

### Forwarding Address\*

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

### Declaration:

|  |  |
|--|--|
| <ul style="list-style-type: none"> <li>I understand that WCHG on receipt of this form will terminate the whole tenancy, including that of any joint tenant.</li> <li>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.</li> <li>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 weeks rent being charged.</li> <li>I can confirm that all of my belongings and rubbish from my property have been removed.</li> <li>I understand that WCHG may recharge me for any items or rubbish left in the property or garden.</li> </ul> |  |
| Full Name: *   |  |
| Signature: *   |  |
| Date: *  |  |

To proceed your application, we need some additional information, attached to your application:

- ✓ A copy of your ID and a document with a signature showing.
- ✓ Document with signature showing - i.e. passport/driver's license so we can check this against original TA.

Once completed, please return the application form and attachments to [NeighbourhoodAdvisors@wchg.org.uk](mailto:NeighbourhoodAdvisors@wchg.org.uk) or hand it into our **Reception:** 8 Poundswick Lane, Wythenshawe, M22 9TA