



WHITEINCH & SCOTSTOUN  
HOUSING ASSOCIATION LTD

**APPLICATION TO ASSIGN A TENANCY(1)**

**WHITEINCH AND SCOTSTOUN HOUSING ASSOCIATION'S WRITTEN CONSENT MUST BE OBTAINED  
BEFORE YOU CAN PASS YOUR TENANCY TO ANOTHER PERSON**

<b>1. TENANTS DETAILS</b>	
<b>TENANT(S) NAME</b>	
<b>ADDRESS</b>	
<b>POSTCODE</b>	
<b>TELEPHONE NUMBER</b>	
<b>START DATE OF TENANCY</b>	
<b>PROPERTY TYPE</b>	
<b>NO OF BEDROOMS</b>	

**PLEASE COMPLETE FORM AND RETURN TO**

**WSHA**

**1 Northinch Court**

**Glasgow**

**G14 OUG**

**2. WHY DO YOU WANT TO PASS ON YOUR TENANCY?**

Empty space for providing reasons for wanting to pass on the tenancy.

**3. WHO DO YOU WANT TO PASS YOUR TENANCY TO?**

NAME(S)	DATE OF BIRTH (DD/MM/YY)			RELATIONSHIP TO YOU	WHEN DID THEY MOVE IN (DD/MM/YY)

**NB: PLEASE ENCLOSE PROOF OF IDENTITY & 2 FORMS OF RESIDENCY FOR EACH PERSON LISTED AT SECTION 3**

**4. PROVIDE DETAILS OF PREVIOUS ADDRESSES OVER THE PAST 5 YEARS  
FOR ALL PEOPLE DETAILED AT SECTION 3  
(continue on a separate sheet if necessary)**

NAME	ADDRESS	LANDLORDS NAME, ADDRESS AND TELEPHONE NUMBER	DATE FROM	DATE TO	REASON FOR MOVING

<b>5. DO ANY OF THE PEOPLE LISTED AT SECTION 3 OWN OR RENT ANY OTHER PROPERTY? (✓)</b>	<b>YES</b>	<b>NO</b>

**IF YES GIVE DETAILS (NAMES & ADDRESSES):**


6. HAS ANYONE LISTED AT SECTION 3 EVER HELD A TENANCY WITH WHITEINCH AND SCOTSOUN HOUSING ASSOCIATION (✓)	YES	NO

IF YES PLEASE GIVE DETAILS BELOW:

NAME	ADDRESS	DATE FROM	DATE TO

7. WHO WILL LIVE AT THE TENANCY ADDRESS?

NAME	DATE OF BIRTH (DD/MM/YY)			RELATIONSHIP TO PERSON(S) APPLYING FOR THE TENANCY

<b>8. ARE YOU MOVING OUT OF THE PROPERTY? (✓)</b>	<b>YES</b>	<b>NO</b>
<b>IF YES, WHEN WILL YOU MOVE OUT? (date)</b>		
<b>WHERE ARE YOU MOVING TO? (address)</b>		

<b>9. HAS YOUR HOME BEEN ADAPTED IN ANY WAY FOR USE BY A DISABLED PERSON? (✓)</b>	<b>YES</b>	<b>NO</b>
<b>If yes, please give details</b>		
<b>DO ANY HOUSEHOLD MEMBERS REQUIRE G/LEVEL ACCOMMODATION OR SPECIAL ADAPTATIONS? (✓)</b>	<b>YES</b>	<b>NO</b>
<b>If yes, please give details</b>		

<b>10. DECLARATION (To be completed by the existing tenant/joint tenants)</b>
<p>THE INFORMATION I HAVE GIVEN IN THIS FORM IS TRUE AND ACCURATE. I AGREE THAT WHITEINCH AND SCOTSOUN HOUSING ASSOCIATION CAN MAKE ANY ENQUIRIES THEY NEED TO CONFIRM THE DETAILS I HAVE GIVEN.</p> <p>I/WE UNDERSTAND THAT I/WE WILL RECEIVE A WRITTEN REPLY TO THIS APPLICATION WITHIN ONE MONTH OF RECEIPT OF THIS APPLICATION, AND THAT THE CHANGE OF TENANCY <u>CANNOT</u> GO AHEAD UNTIL WHITEINCH AND SCOTSTOUN HOUSING ASSOCIATION'S WRITTEN CONSENT HAS BEEN GIVEN.</p> <p><b>TENANTS SIGNATURE:</b> _____</p> <p><b>JOINT TENANTS SIGNATURE:</b> _____</p> <p><b>DATE:</b> _____</p>

**11. DECLARATION UNDER THE MATRIMONIAL HOMES (FAMILY PROTECTION)(SCOTLAND) ACT 1981 (To be completed by the existing tenant(s) spouse or partner if they are not joint tenant(s).**

I \_\_\_\_\_ am fully aware of all the details of the

application to assign the tenancy of \_\_\_\_\_

and give my consent to it. I confirm that the details given are true and accurate.

**SIGNED:** \_\_\_\_\_

**WITNESSED:** \_\_\_\_\_

**WITNESSED:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**NB: THE EXISTING TENANT(S) OF THE PROPERTY SHOULD NOT WITNESS SECTION 11**

**12. ASSIGNEE(S) DECLARATION**

**(To be completed by the person(s) named at section 3)**

THE INFORMATION I HAVE GIVEN IN THIS FORM IS TRUE AND ACCURATE. I AGREE THAT WHITEINCH AND SCOTSOUN HOUSING ASSOCIATION CAN MAKE ANY ENQUIRIES THEY NEED TO CONFIRM THE DETAILS I HAVE GIVEN.

I/WE UNDERSTAND THAT I/WE WILL RECEIVE A WRITTEN REPLY TO THIS APPLICATION WITHIN ONE MONTH OF RECEIPT OF THIS APPLICATION, AND THAT THE CHANGE OF TENANCY CANNOT GO AHEAD UNTIL WHITEINCH AND SCOTSTOUN HOUSING ASSOCIATION'S WRITTEN CONSENT HAS BEEN GIVEN.

**ASSIGNEE SIGNATURE:** \_\_\_\_\_

**JOINT ASSIGNEE SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**IF WE ASSIGN YOU A TENANCY BASED ON FALSE OR MISLEADING INFORMATION, WE MAY TAKE LEGAL ACTION TO GET OUR PROPERTY BACK.**

