

Name:

Rent Details Form

Please return to: Benefits Section, Housing & Community Care, Perth & Kinross

Council, Pullar House, 35 Kinnoull Street, PERTH, PH1 5GD

Telephone 01738 476049 Text Phone 01738 442573

Part 1: To be	Compl	eted by t	the Housi	ng Benef	it Claimant
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Address:						
Postcode:	Telephone Number:					
I understand tha	at: formation that is incorrect or fail to disclose relevant information, you	mav take act	ion			
against me	e - including Court action;	-				
	ll you immediately in writing about any changes in my circumstar . I understand that if I am unsure I will contact you for guidance;		ght affect			
 you may us benefit class 	use or share this information with others as stated in the declaration I a aim form.	read and sigr	ned on the			
I declare that the	e information given in Parts 1 and 2 of this form is correct and compl	ete.				
Signature of persolaiming	rson	te /	/			
•	we a lease, please have your Landlord or the Agent who manages the	e property till	in Part 2			
of this form.	ve a lease, please have your Landlord or the Agent who manages the Completed by the Landlord or the Agent Who Manage					
of this form. Part 2: To be Please answer a entitlement until	Completed by the Landlord or the Agent Who Manage all the questions. We cannot work out your tenant at the above address we have this information. Please write in BLOCK CAPITALS. Please ot J SMITH.	es the Propess's Benefit	perty			
of this form. Part 2: To be Please answer a entitlement until JOHN SMITH no Landlord's Fu Address:	Completed by the Landlord or the Agent Who Manage all the questions. We cannot work out your tenant at the above address we have this information. Please write in BLOCK CAPITALS. Please ot J SMITH.	es the Propess's Benefit	perty			
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Part 2: To be Please answer a entitlement until JOHN SMITH no Landlord's Fu Address: Contact Telep If you have an A have an Agent, p	Completed by the Landlord or the Agent Who Manage all the questions. We cannot work out your tenant at the above address of J SMITH. Ull Name: Agent who manages the property on your behalf please give their detaplease write 'none'.	es the Propess's Benefit e give full nar	ne, eg			

When did they move into you	r property?/	_/ When did their tenancy	start?/		
Do they have any 'free' weeks	s or any other rent fre	e periods? (delete as appropriate)	No Yes		
If 'Yes', please state what of	dates				
Do you require them to give a period of notice before they can vacate the property? (delete as appropriate)					
If 'Yes', what period of not	ice do they have to gi	ive?			
Were they required to pay a d	eposit? (delete as app	ropriate)	No Yes		
If 'Yes', how much is the d	_/				
How many adults are in the p					
How much is charged as rent	How much is charged as rent? £ How often?				
Reason for no signed lease ex	xisting is				
Does the rent include a charg	Does the rent include a charge for meals? (delete as appropriate)				
If 'Yes', how much? £	(we will cont	act you for more information)			
Does the rent include service	charges? (delete as a	opropriate)	No Yes		
If 'Yes', please list all the cl	harges included:				
What Services are inclu-	ded?	How much?	How often?		
My tenant is (tick which applies	s): a sole tenan	<u> </u>			
my teriant is (lick which applies	, <u> </u>				
	a joint tenan	t with	(state name		
Declaration	given on this form is	true and complete. Lunderstand	that if Laiva informat		
on this form that is incorrect y	ou may take action a	true and complete. I understand tagainst me - including Court action			
changes in my tenant's circur	nstances I agree to n	otify you.			
Landlord/Agent's Signature	Signature:		Date:		
Data Protection		If you or someone you k	now would like a copy of th		
This authority is under a duty to prote and to this end, may use the informat		ninisters, document in another lang	document in another language or format, (on occasion, only a summary of the document will be provided in		
form for the prevention and detection			arranged by contacting the		

information with other bodies responsible for auditing or administering public funds for these purposes.

In terms of the Data Protection Act 1998, you are entitled to know what information Perth & Kinross Council hold about you, on payment of a fee of £10. Applications should be made to the Director (Housing & Community Care, Housing & Community Care, Perth & Kinross Council, Pullar House, Kinnoull Street, PERTH, PH1 5GD.

Customer Service Centre on 01738 475000.

You can also send us a text message on 07824 498145.

All Council Services can offer a telephone translation facility.

www.pkc.gov.uk

(PKC Design Team - 2016377)