

**NOTICE OF TERMINATION OF TENANCY**

**If you have any queries about ending your tenancy or returning your keys please call 0208 921 6371**

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| **THIS IS A LEGAL DOCUMENT PLEASE ENSURE ALL SECTIONS ARE COMPLETED ACCURATELY AND IN FULL** |
| **Notice Period.** Four weeks’ notice is required by law to terminate the tenancy. The date given below must be a Monday and at least 4 weeks from the date this notice is signed |
| **1) Tenant Details****a) Full Name**(s) (in block capitals) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**b) Joint Tenant**(s) (in block capitals) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Moving from** (Address including full postcode) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **I hereby give notice to terminate the tenancy** of the above property on **Monday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** or at the end of the week of the tenancy, which shall expire next after the expiration of four weeks from the date of receipt of this notice.Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Is the tenant a sole tenant or joint tenant? [Confirm on V6] |
| **2)   Note for Joint Tenants:****a)** I understand that **by terminating this tenancy I do so in relation to all other joint tenants** (if any): **b)** I confirm that I was **advised to seek independent legal advice** before terminating the tenancy and to **discuss my case with a Tenancy Enforcement Officer** |
| **3)        Moving to/ or Next of Kin Address (Address including full post code)**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **4)        My contact phone number is:**  |
| **5)        Reason for Terminating Your Tenancy**Permanent Decant Domestic ViolenceRelationship breakdown Hate Crime(no violent) Other problem with neighbour Overcrowding Under occupation Property unsuitable due to Medical HealthProperty in poor condition Terminating due to Hospitalisation Move closer to family/friends Move closer to work Move to accommodation with support Moving to Sheltered Accommodation Death of tenant Moving AboardBuying Own Property Right to BuyMoving to Private Rental Moving to Housing Association LandlordStaying with friends/relatives Management TransferGone to Prison Other please state reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Disposal of Effects.** You will be charged if the council has to remove items left in this property, unless otherwise agreed. |
| I authorise Royal Greenwich to enter the above property on or after the  **(**date of actual move) to dispose of any articles left there and I agree to indemnify the Royal Borough Against any claim whatsoever arising from the loss or damage to those articles.Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Vacant Possession.** You are required to give RBG vacant possession when you leave your property i.e. no one should be left in the property (unless you are a joint tenant). |
| **6)   From what date do you no longer intend to return to the address**:**a)** Please confirm that you are giving RBG **Vacant Possession:** If no, please provide details of anyone, (other than a joint tenant), who is remaining in the property.Name(s): DOB(s): **b)** I am aware that there may be implications for anyone remaining in the household and I confirm that I have been **advised to seek independent legal advice and to meet with a Tenancy Enforcement Officer. Yes No****c)** I understand it is my responsibility to cancel/end my accounts for this address with my utility provider(s) e.g. Switch2, British Gas, EDF etc **Yes No** |
| **7)   The keys to the property will be returned on:** At the: |
| **Change of Tenancy.** No keys will be returned if this is a Change of Tenancy |
| **Returning keys and permits.** If you return the keys by 12 noon on Monday we will stop charging rent from the Sunday before. If you return the keys after 12 noon on the Monday, you will be charged an extra full weeks rent. Housing benefit will not cover rent on two properties. Please return all keys and parking permits. It is your responsibility to cancel any parking permits, if any refund is due this will be processed upon your cancellation of the permit. |
| **8)   Key returns****a)** Property keys – Number of Keys returned: **b)** ASSA or FOB keys – Number returned: Please return all ASSAs and FOB keys.**c)** Shed or Bike Space- Number returned: |
| **9)        Do you rent a garage** from Royal Greenwich? **Yes No**Address of garage:  |
| If you rent a garage your garage tenancy will need to be terminated. Please complete a termination form and return keys to Royal Greenwich. If you would like an alternative garage, or to keep your current garage please request this by completing an application form. |
| **10)        Do you have use of a shed or bike space** from Royal Greenwich? Number/Address of the shed/space: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| If you currently use a shed or bike space and are moving to a new area any keys should be returned to Royal Greenwich |
| **11)        Is your home contents’ insurance** under Royal Greenwich’s insurance scheme? |
| Your Contents Insurance will be cancelled when you council tenancy is terminated. You will need to reapply to join the scheme if you are moving into a Royal Greenwich council property, or seek an independent supplier. |
| **12)        A Copy of termination given to tenant?** **Yes** **No** Tenants signed (to confirm receipt) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:  |
| FOR OFFICE USE ONLY**13)**Notice accepted by (print name):  Signed: Office:  Date notice accepted:  |
| **14)** Termination Exception Tenancy Managers comments for exception –  Exception Approved YES NO Tenancy Managers Name (print Name): Signed: Date:  |