

TERMINATION OF TENANCY NOTICE BY TENANT

Doc. Ref:	VP FM 001	
Issue:	2	
Amended:	19/5/2014	
Page:	1 of 1	

PART A - To be completed by Tenant and returned to your Plymouth Community Homes Area Housing Office I hereby give notice to terminate the tenancy of:

Address							
Name							
My reason for terminating the tenancy is							
The notice* to expire at noon of	•		40.21				
or at the end of the period of your tenancy which will end next after the expiration of four weeks from the date of this notice.							
My forwarding address will be:							
Telephone contact number(s)	(Please prov	vide numbers wh	ere you can be conta	cted for	the next 4 weeks)		
Telephone No:			Mobile No				
Name of							
Name of:			T		Γ		
Gas Supplier			Electricity supplier				
Do you lease a garage from Plymouth Community Homes?							
Do you wish to retain this garage?**							
Address of garage:							
Declaration: I agree to meet a representative from Plymouth Community Homes at a pre-arranged time and date at my property to return all keys and utility keys/cards If I/we wish to extend my tenancy I/we will notify the Voids Office (Tel 0800 0281040) before noon of the Friday before the termination date stated above. I/we accept that should the keys be returned late I/we will be charged additional rent and/or the cost of installing new locks and following change of locks I/we will not be able to reenter the property. I/we undertake to clear the property (including garden) of all personal possessions and leave it in a clean and tidy condition and give consent for any personal possessions that may be left at the property (including garden) to be disposed by Plymouth Community Homes for which I/we may be charged. I/we accept that I/we will be charged for any willful or negligent damage that may have been caused to the							
property prior to my returnin		iny willful or neg	gligent damage that n	nay nav	e been caused to the		
Signature(s):				Date			
Name(s) Printed:			•				
If the Tenant is deceased or unable to sign this form and the notice is from the next of kin or other authorised person please supply the following information.							
Relationship to Tenant							
Your Name (Printed):							
Your Address:							
Telephone No.							

^{*} Minimum of four weeks' notice for living accommodation, except on Transfers

^{**} Minimum of one weeks' notice for garages and parking sites



TERMINATION OF TENANCY NOTICE BY TENANT

Doc. Ref:	VP FM 001		
Issue:	2		
Amended:	19/5/2014		
Page:	2 of 1		

PART B - For use by PCH to be completed by Housing Officer /Assistant

Form received by – name printed	Signature		Date
	Date	Initials	Comments
Termination Date			
Termination Logged on Computer			
Acknowledgement Letter Sent			
Cash Incentive Letter sent			
Reason Code			

Upon completion of Termination of Tenancy Procedure on Northgate the Termination of Tenancy should be emailed to 'tenancy termination' generic email address