** Request to succeed to OR remain in**

**a Council Tenancy after a tenant has died form**

Please complete this form to apply to succeed or to be granted a new tenancy of a property of a Leeds City Council tenant who has died.

We will need to carry out some checks before we decide if you can legally succeed the property. If you cannot we will then consider if we will grant you a new tenancy of the property.

Once complete, please return this form to the Housing Office.

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| **Details of the deceased tenant** | |
| Property Address including postcode |  |
| Full Name of the deceased tenant |  |
| Date of Birth of the deceased tenant (or their age if DoB not known) |  |
| Date of Death of the deceased tenant |  |
| **Your details** (person who has been living at the address and is applying to succeed to the tenancy) | |
| Your Name |  |
| Your DoB |  |
| Your relationship to the deceased tenant |  |
| Your address (if different to the property address) |  |
| How long have you lived at the property address? |  |
| Where did you live before coming to live at the property? |  |
| Give the dates you lived in your previous property? |  |
| Who was your previous landlord? |  |
| Do you have another tenancy of any other property (even if you are not living there)? |  |
| Do you own any other property (even if you are not living there)? |  |
| How did you come to live at the property? |  |
| Why do you want to remain at the property? |  |
| Have you looked at moving to another property? | **Yes / No**  If no, please explain why not… |
| Are there any adaptations in the property? (eg a wet floor shower) |  |

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| --- | --- | --- | --- |
| **Your household details – please list everyone who wants to live in the property with you** | | | |
| **Name** | **Age** | **Relationship to you** | **DOB** |
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| Is there anyone in your household with vulnerability issues such as mental illness, physical or learning disability? | | If yes – please give details: | |
| Is there anyone who suffers from poor physical health or frailty? | | If yes – please give details: | |
| Does anyone in your household need adaptations such as a wet floor shower or ramp? | | If yes – please give details: | |
| Does anyone have any other agency involvement - eg social services? | | If yes – please give details: | |
| Are you aware of any pets or animals in the property? | | If yes – please give details and no. | |
| Is there any other information you want to give to support your application to succeed to the tenancy? | | If yes – please give details: | |

Please return the form to your local housing office along with any proof you have lived at the address for over 12 months, for example electoral roll, Council Tax bill, Utility bill, Bank statements etc.