



## Termination of Tenancy Notice

Property Address	Tenant's Name	Joint Tenant's Name

I/we, the above named tenant(s), wish to give 28 days notice of our intention to terminate our tenancy at the above address.

**Please tell us where you are moving to:**

Address	Postcode

**Please tell us below the type of accommodation you are moving to:**

	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Transfer to another Oak Tree HA property	<input type="checkbox"/>	Other Housing Association/ Council property	<input type="checkbox"/>	Private Let	<input type="checkbox"/>
Purchased a Property	<input type="checkbox"/>	Sheltered Accommodation	<input type="checkbox"/>	Stay c/o family/friends	<input type="checkbox"/>
Supported Housing	<input type="checkbox"/>	Residential Care/Hospital	<input type="checkbox"/>	Housing tied to employment	<input type="checkbox"/>
Student Housing	<input type="checkbox"/>	Other please give details			

**Please provide us with your contact details**

Contact Telephone Number(s)	Email

**Please tell us below why you are moving**

	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Mutual Exchange	<input type="checkbox"/>	Property too big	<input type="checkbox"/>	Property too small	<input type="checkbox"/>
To provide support	<input type="checkbox"/>	Harassment/Anti-social	<input type="checkbox"/>	Relationship breakdown	<input type="checkbox"/>
Property doesn't suit mobility/medical needs	<input type="checkbox"/>	Property can't be adapted for me	<input type="checkbox"/>	Aspiration (moving to a different area/house type)	<input type="checkbox"/>
Moving out of Inverclyde	<input type="checkbox"/>	To receive support	<input type="checkbox"/>	Moving in with partner	<input type="checkbox"/>
Other (please give details)					

**Additional Information if applicable**

Reason/Issue	<input checked="" type="checkbox"/>	Can you give us more details?
No longer like the property	<input type="checkbox"/>	
No longer like the area	<input type="checkbox"/>	
Communal areas (e.g. bins, close)	<input type="checkbox"/>	
Anti-Social behaviour	<input type="checkbox"/>	
Rent is not value for money	<input type="checkbox"/>	
Poor service from OTHA	<input type="checkbox"/>	
Can't afford to stay	<input type="checkbox"/>	

**Could Oak Tree HA have done anything more to support you to keep your tenancy?**

**Please tell us if you are in receipt of Universal Credit**    **Yes**

☐

**No**

☐

If you answer yes we will give you advice on what effect your termination date will have on your next UC payment.

**Please tell us here who the current suppliers are for your utilities**

<b>Gas Supplier</b>	
<b>Electricity Supplier</b>	

**Declaration**

- I/We give our notice of termination of tenancy on
- I/We will vacate the property and return all keys to the Association on \_\_\_\_\_
- I acknowledge that when I return the keys OTHA consider I have fully vacated the property and will enter it to carry out an inspection and any resulting repair works required to re-let the property.
- I acknowledge that any items left in the property after the keys have been returned will be disposed of by the Association and I may be charged for the disposal costs.
- I acknowledge that when I return all keys to the Association, I will remain liable for the rent and service charges until the end of my 28 days notice period unless the Association relets the property earlier, in which case, my rental liability will end the day the property is re-let.
- I understand that any transfer or mutual exchange applications for rehousing I currently have with OTHA/ICHR will now be cancelled and I will have to complete a new application form if I want to be considered for rehousing with OTHA/ICHR from my new address.

<b>Signed (Tenant)</b>	<b>Date</b>
<b>Signed (Joint Tenant)</b>	<b>Date</b>

**Consent of Spouse**

I agree to the termination of the above tenancy and will not exercise any rights under the Matrimonial Homes (Family Protection)(Scotland) Act 1981.

<b>Signature of Spouse</b>	<b>Date</b>
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