

There is a one-off fee of £75.00 to register your property as sublet. Please pay this on to your service charge account.



**Home
Ownership
Services**

SUBLET REGISTRATION FORM

SECTION A – LEASEHOLD PROPERTY

LEASEHOLD PROPERTY ADDRESS (including postcode)

SECTION B – LEASEHOLD DETAILS

NAME OF LEASEHOLDER

FULL CORRESPONDENCE ADDRESS

(Please note you need to supply an address in the UK)

CONTACT TELEPHONE NUMBERS

HOME:

WORK:

MOBILE:

E-MAIL ADDRESS:

SECTION C – SUBLET DETAILS

Please tick one of the following boxes to confirm how the property is being sublet:

THROUGH A MANAGING AGENT

TO FAMILY MEMBERS

TO A HOUSING ASSOCIATION

SUB-LET PRIVATELY

NONE OF THE ABOVE (Please specify)

IF APPLICABLE, PLEASE SUPPLY THE DETAILS OF YOUR MANAGING AGENT

NAME OF COMPANY

ADDRESS

CONTACT TELEPHONE NUMBER

E-MAIL ADDRESS

CONTACT NAME

SECTION D – TENANT(S) DETAILS

NAME OF TENANT(S)

CONTACT TELEPHONE NUMBERS

HOME:

WORK:

MOBILE:

SECTION E – TENANCY DETAILS

START DATE:

LENGTH OF TENANCY:

IF YOU ARE SUB-LETTING THE PROPERTY PRIVATELY, DO YOU HAVE A TENANCY AGREEMENT WITH YOUR SUB-TENANT? **YES / NO***If you answered yes to the above, please supply a copy of the agreement.***SECTION F – SERVICE CHARGES**

Please indicate the address where Service Charge/Ground Rent Invoices should be sent

 LEASEHOLDERS CORRESPONDENCE ADDRESS MANAGING AGENTS**SECTION G – EMERGENCY**

Please indicate who to contact in an emergency (repairs/access)

 LEASEHOLDER DIRECT MANAGING AGENTS**SECTION H – GAS SAFETY**

In respect of the enclosed Landlords Gas Safety (Installation and Use) Regulations 1998, please indicate:

 I enclose a copy of the current Landlords Gas Safety Certificate for this property There are no gas appliances in this property**SECTION I - DECLARATION**

I/we understand that as the leaseholder(s), I/we remain responsible for complying with the terms of the lease during the period that the property is sub-let

I/we understand that as the leaseholder(s), I/we remain responsible for the payment of Service Charges and Ground Rent during the period that the property is sub-let

I/we understand that it is our responsibility to inform our sub-tenants of the terms of lease regarding Anti-Social Behaviour and Noise Nuisance

Consent to contact: I/we agree that Cambridge City Council can use the correspondence address, email and phone number(s) as the primary means to contact me/us. I consent to my information being shared in accordance with the Councils Privacy Notice (a copy of which can be obtained via our website)

Signed:

Date:

(Print Name)

Signed:

Date:

(Print Name)

Please inform us of any change to the above information as soon as possible.

Please complete and return this form to:

leasehold.services@cambridge.gov.uk