##### **FORM B**

**Application for consent to let flat §4 (xvii) / (xviii) of your Lease FEE: £75**

|  |  |
| --- | --- |
| Your name (flat owner) |  |
| Contact address (not the flat) |  |
| Telephone no. (not the flat) | Landline:  Mobile: |
| Email address |  |
| Is it your intention as the owner to let the property on a continuous basis? | Yes / No |
| Details of any letting agent | Name:  Telephone no:  Email address: |
| Full name of tenant(s) |  |
| Full name of other occupiers (aged 18 or over) |  |
| Number of children under 18 |  |
| Flat no. in Regent Square |  |
| Garage / parking space no. |  |
| Contact no. |  |
| *YOU ARE REQUIRED TO GIVE THE FOLLOWING INFORMATION FOR INSURANCE PURPOSES* | |
| Term of letting agreement | Start date:  End date: |
| Are your tenants (please tick as applicable) | * In full time employment * Family member or friend * Social housing tenants * Students |

**On first application to rent your property, owners will need to complete this form together with form A & D and return to:**

**61 Regent Square London. E3 3HW**