



Home Improvements Application Form for Tenants

Many residents like to make improvements to their homes and in the majority of cases we're happy for them to do so. However, you must contact us to discuss your plans before making improvements to your home.

You can use this form to tell us what work you want to do, and we will confirm in writing whether you can go ahead. Please attach copies of improvement plans with this application, if applicable, and copies of any survey reports and permissions, and return to customerservices@accentgroup.org.

Please wait for our agreement before carrying out any work or purchasing materials.

Once you have our agreement it is likely that we will visit you to inspect the work to make sure it is done correctly. You will also need to agree with certain conditions before permission is granted. Should you have any questions or queries that require an immediate response, or need help completing this form, please contact your Housing Partner.

Your Contact Information

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other:
Name	
Address	
Town	
Postcode	
Telephone (Home)	
Telephone (Work)	
Mobile Telephone	
E-mail Address	

Details Of The Alteration

Please use this section to give as much information about the location of the work, and as detailed a description as possible.

Where is the location of the alteration?

External Internal Both

If inside, which rooms will be affected?

Kitchen Living Room Hallway/Landing/Stairs

Bathroom Bedroom Other (specify below)

Description of the alteration, continue on a separate page if necessary:

Planning Permission

Please use this section to give us information about the planning permission you have acquired, if you have not acquired planning permission you need to contact your Local Planning Office to confirm if it is required.

Do you have all the necessary permissions for the work?

Yes No Not required

Carrying Out The Work

Will you be carrying out the work yourself?

Yes No

Contact details of the person or company who will be doing the work:

Name	
Address	
Town	
Postcode	
Telephone	
E-mail Address	
Qualifications (GAS SAFE/NICEIC)	

Assuming that we grant you permission, please answer the following:

What date will you start the work?	
What date do you expect it to end?	
How much do you expect it to cost?	

If you carry out this work, you must agree to maintain the alterations you have made and be responsible for any repairs that are required as a result of the alterations.

I agree (Signature)	
Date	