

**FORM C**

**Notification of change of tenants §4 (xix)/(xx) of the Lease. FEE: £75**

Your name (flat owner)	
Contact address (not the flat)	
Telephone no. (not the flat)	Landline: Mobile:
Email address	
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.	
<i>YOU ARE REQUIRED TO GIVE THE FOLLOWING INFORMATION FOR INSURANCE PURPOSES</i>	
Term of letting agreement	Start date: End date:
Are your tenants (please tick as applicable)	<ul style="list-style-type: none"> <li>• In full time employment</li> <li>• Family member or friend</li> <li>• Social housing tenants</li> <li>• Students</li> </ul>

**This form must be submitted with Form D and returned to:**

**[eml@eastways.org](mailto:eml@eastways.org)**

[www.eastways.org](http://www.eastways.org)