

FINANCE

Warwick District Council Riverside House Milverton Hill Leamington Spa CV32 5HZ

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Verification of Tenancy (VOT) V2 Sept 20

Tenancy Details	Information
Landlord's Name	
Landlord's Address:	
House/Flat	
Name/Number	
Street	
Town	
Postcode	
If applicable Agent's	
Address: House/Flat	
Name/Number	
Street	
Town	
Postcode	
Name of Tennant/s	
Address of Property	
Tenancy Start Date	
Date Tenant Moved In	
Type of Tenancy	
Duration of Tenancy	
Current Rent Charged	£
Rent Frequency	Weekly, 4-Weekly or Monthly:
-	vithin the rent e.g. water, gas, heating, meals etc? if ices/utilities charged: please do not enter any

services paid for separately by the tenant.

Service	Charge	Frequency
1.	£	
2.	£	
3.	£	
4.	£	

1. (If applicable) Date of last rent	Date:
increase	
2. (If applicable) Date of next rent	Date:
increase	

Declaration:	I declare that the information on this form is true and complete.
Signature of Landlord/Agent	
Date:	
Business Address (if different from above)	







About where you live (To be completed by the tenant)

There is no need to complete the below if you have recently answered these same points as part of making a new claim. However, if you are being asked for clarification, or already have a current claim with us but are changing address, it is essential to complete this page in full.

Date your tenancy started	Date:
Date you moved in	Date:
Type of Tenancy (Private, Housing Association, Hostel).	Type:

In the table below, please state the number of rooms in the whole property, the number just for you (and your household), and the number you share with other people. Your household would include any dependants and/or non-dependants (but <u>not</u> joint tenants or housemates).

Example:	In the whole property	Just for you (and your Household)	That you share with other people
Bedrooms	5	3	0
Toilets	2	1	1
Complete	In the whole	lust for you (and	That you share with

Complete each box.	In the whole property	Just for you (and your household)	That you share with other people
Living Rooms			
Bedrooms			
Bathrooms			
Separate Toilets			
Kitchens			
Other Rooms			

Are you responsible for paying Council Tax at this property? **YES** \(\textstyle \) **NO** \(\textstyle \)

If you are renting privately, please complete the following <u>after</u> your landlord has completed the Verification of Tenancy (overleaf) so we can pay your Housing Benefit directly to you:

Account number:	Sort Code:
Account name (i.e., Mr A N Other):	
Bank or Building Society name:	

We will need a bank statement to verify this information. We are only able to make payments into current accounts (not Post Office accounts) with an eight digit account number.

Are you, your partner, or any of your partner's children related to your landlord/agent, or to your landlord/agent's partner? Related includes through marriage (even if the marriage has ended). Some examples are parent, step-parent, parent-in-law, brother, sister, son, son-in-law, daughter, daughter-in-law, step-son, step-daughter, ex-wife, ex-husband, aunt, grandchild, grandparent, or the partner of any of the above:

husband, aunt, grandchild, grandparent, or the partner of any of the above:
YES \(\begin{aligned} \textbf{NO} \(\text{p} \end{aligned} \text{Please clarify the relationship or connection: } \(
I declare that the information on this form is true and complete.

Failure to answer all of the questions may result in your payments being delayed.

_____ Date: ___