



TENANCY TERMINATION FORM
ARK HOUSING ASSOCIATION LTD

Please Provide the Following Details and Print Clearly

Tenant Name	
Joint Tenant Name	
Property Address & Postcode	
Contact Number or E.mail Address	

Where the tenancy is a joint tenancy, both tenants must complete and sign this form to end the tenancy

I/we wish to end this tenancy for the following reasons (please tick all the boxes that apply):

- | | | | | | |
|---------------------|--------------------------|----------------------------|--------------------------|----------------------|--------------------------|
| Buying own home | <input type="checkbox"/> | Moving to another Landlord | <input type="checkbox"/> | Rent Too High | <input type="checkbox"/> |
| Fleeing harassment | <input type="checkbox"/> | Moving for employment | <input type="checkbox"/> | Do not like the area | <input type="checkbox"/> |
| Can't Manage Stairs | <input type="checkbox"/> | Going into Home/Hospital | <input type="checkbox"/> | Property too big | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | Problems with neighbours | <input type="checkbox"/> | Property too small | <input type="checkbox"/> |

Please give

details: _____

End of Tenancy Date:

Name of Gas Supplier	
Name of Electricity Supplier	

Forwarding Address Date you will move in	
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Tenant signature		Date	
Joint tenant or spouse signature		Date	
Signed on behalf of Ark HA		Date	

[NOTE: If you are a sole tenant and you are married, both your signature and your wife/husband's signature are required under the Matrimonial Homes (Family Protection) (Scotland) Act 1981]

PLEASE RETURN TO: ARK HA, The Priory, Canaan Lane, Edinburgh