



**APPLICATION TO CHANGE TENANCY TO ANOTHER PERSONS NAME**

**ADDRESS:** .....

**TENANCY HELD BY:** .....**D.O.B.**.....

**APPLICANTS SURNAME:** .....**FORENAME(S):** .....**D.O.B.**.....

**APPLICANTS SURNAME:** ..... **FORENAME(S):** .....**D.O.B.**.....

**RELATIONSHIP TO TENANCY HOLDER:** .....

1. I should be glad if authority could be given for the above tenancy be made over to me. I certify, that I have lived at the above address as a member of the Tenant's household since the .....
2. I agree that approval of this application is conditional to me becoming liable for any amount of money in respect of rent or any other proper charge related to the tenancy, which may be due to the Government of Gibraltar at the date application.
3. The reason for the submission of this application is the following:  
 .....
4. The following persons have been residing at the above address with the applicant and will continue to reside after the change of tenancy:

| SURNAME | NAME | DATE OF BIRTH | RELATIONSHIP | NATIONALITY | I.D.CARD NUMBER |
|---------|------|---------------|--------------|-------------|-----------------|
|         |      |               |              |             |                 |
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**Housing Department**  
HM Government of Gibraltar

In addition, I authorise the Housing Department to disclose to or request from any Government Departments or its agencies any information directly or indirectly related to the details shown above which could be required or relevant for the processing of this application.

Signature of Applicant(s):..... Date:.....

I/We .....hereby

consent to the transfer of this Tenancy into the name(s) of .....

.....

Signature of Tenant(s): .....Date:.....

Telephone No:.....

**PLEASE NOTE THAT REQUESTS TO CHANGE THE TENANCY TO ANOTHER PERSONS NAME ARE CONDITIONAL UPON ANY ARREARS OF RENT BEING SETTLED.**

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FOR OFFICE USE ONLY

TENANT/S EMPLOYER;.....

APPLICANT/S EMPLOYER;.....

STANDING ORDER: YES/NO

DEDUCTIONS: YES/NO