



ARCON HOUSING ASSOCIATION

12 Lloyd Street, Manchester M2 5ND Telephone 0161 214 4120

Email: waitinglist@arcon.org.uk

Reference provider must complete all sections

LANDLORD REFERENCE

Landlord's Name

Landlord's Address

Landlord's Telephone Number

Landlord's Email Address

Tenant Details

Tenant's Name

Tenant's Address

Tenancy Address
(if different from above)

Tenancy start date

Tenancy end date if applicable

Household Members

Please list all residents of the property

Name	Date of birth	Relationship to tenant

Tick if any of the residents require support from outside agencies?

Rent Arrears

Is the rent account in arrears?

If YES, what is the balance?

Is there any history of rent arrears / notice seeking possession / court action?

If YES, please give details

Are there any other housing related debt outstanding

If YES, please give details:

Breaches of tenancy

Have there ever been any complaints, written or verbal, from two or more other residents about the conduct of this tenant or any member of their family, or visitors to this address?

Has the applicant ever been the subject of an injunction or given an undertaking to the Court because of allegations of anti-social behaviour or neighbour nuisance?

Has there been any history of involvement as a complainant of anti-social behaviour or any other tenants matter?

Has the tenant kept the property / garden in good condition?

RETURN TO THE APPLICANT OR ARCON HOUSING ASSOCIATION

DECLARATION: I confirm that the above information is correct and to the best of my knowledge. I understand that the validity of this reference may be checked.

Signed

Print Name

Job Title

Date

Please stamp with your official stamp or attach a compliment slip or letterhead.
If you do not have a stamp or letterhead, make sure you give us your telephone number.