

APPLICATION FOR PERMISSION TO ALTER YOUR HOME

Please complete this form and return it to:

HomeFix, Saxon Weald House, 38-42 Worthing Road, Horsham, RH12 1DT or email to homefix@saxonweald.com

To help with your application, please give as much detail as possible.

Name:		Address:					
		Postcode:					
Mobile/phone:		Email:					
WHAT TYPE OF PROPERTY DO YOU LIVE IN? Please tick							
House No. Bedroom							
Bungalow No. Bedroor		ns					
Flat No. Bedroor		ns	Which floor?				
WHAT TYPE OF ALTERATIONS YOU ARE							
REQUESTING? Please give full details of what you are requesting to do:							
PLEASE PROVIDE MEASUREMENTS AND SPECIFICATIONS OF THE ALTERATIONS/ IMPROVEMENTS							

PLEASE SUPPLY PHOTOS WHEN YOU EMAIL OR POST THIS FORM BACK TO US.







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PLEASE LIST DETAILS OF ALL THE PROPOSED CONTRACTORS, CONSULTANTS, ARCHITECTS AND TRADESPEOPLE:

CONTRACTOR'S NAME	TRADE OR SERVICE (Professional registration number)	CON TACT DE TAILS (Email & telephone number)	EVIDENCE OF PUBLIC LIABILITY INSURANC		WARRANTY DETAILS		
I HAVE READ, UNDERSTOOD AND AGREE TO <u>SAXON WEALD'S PERMISSION CONDITIONS</u> - ALL TENANTS MUST SIGN THIS FORM BEFORE AN APPLICATION CAN BE MADE:							
ALL TENANTS MUS	ST SIGN THIS FORM	REPORE AV	APPLICATION CA	AN BE MA	ADE:		
LEAD TENANT	Name:	Signatur	Signature:		Date:		
JOINT TENANT	Name:	Signatur	Signature:		Date:		

PLEASE CHECK YOU HAVE COMPLETED THIS FORM IN FULL AND SUPPLY PHOTOS WHEN YOU EMAIL OR POST THIS FORM BACK TO US.



