

Application to undertake alterations or to replace/remove existing fittings at my own expense



Names of Tenants and Joint Tenants or Leaseholder(s)

Address and post code

Six Town Housing,
6 Knowsley Place,
Bury,
BL9 0EL
Tel:0161 686 8000

Contact details:

Home:

Mobile:

Email:

Details of the work to be carried out including any existing items to be removed. *(photos, drawings with measurements must be supplied along with details of materials to be used)*
In the case of gas works please supply the manufacturer and model of the appliance to be fitted.

Please supply your contractor details; If you are doing the work yourself state "DIY"

Please note for works that include gas and electrical alterations we will require the contractors registration numbers

Company / Contractor

Address and post code

Telephone number (s):

Electrical Part 'P' Registration Number:

Gas Safe Registration Number:

Individual Gas Safe Badge Number:

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Is the gas appliance

New

Used

Has the proposed gas installer checked the suitability of the flue?

Yes

No

If the appliance is a gas fire is it suitable for installation to class II flue ?

Yes

No

I, as the tenants/ leaseholder of the above property agree that the alteration will be carried out by a competent person / contractor and completed to a professional standard. I agree to allow the work to be inspected by an officer of Six Town Housing during progress and on completion. I understand that I will bear the full cost of the alteration / improvement. I understand that I, as the tenants/ leaseholders will indemnify the Council against all claims, demands, costs and expenses which may be incurred by the Council in consequence of the removal, repair or replacement of the alteration.

I have read and signed that I agree to the Terms and Conditions accompanying this application

Estimated date of work to be carried out
(subject to authorisation)

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Signature of tenant(s) / Leaseholder(s)

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Print Name(s)

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Date

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OFFICE USE ONLY

Permission is granted according to the terms and conditions and in accordance with any special conditions stated below and the details supplied on your application.

Special conditions

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Authorised Signature

Position held

Date

Permission is refused for reasons stated below:

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Authorised Signature

Position held

Date

Post Inspection Notes

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Date:

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Please use this space below to provide sketches, drawings or additional information

Click on the link here to email to Six Town Housing: SixTownNeighbourhood@sixtownhousing.org

