

APPLICATION FOR BTLC ACCOMMODATION

Estate Office
51 Walden Street
London E1 2AL
T 020 7377 5955
F 020 7377 0030

Please fill in all the requested information and return to the Estate Office:

Name _____

Present Address: _____

Length of time at Address: _____

Type of accommodation: Private Council Owner
Other
(please circle)

If less than 3 years please provide your previous address:

Existing Landlord
Details _____

Age: _____

Nationality: _____

Telephone No: _____

Email Address: _____

Job Title: _____

Work Address: _____

Work no. _____

Accommodation Type Single Studio Flat One Bed Single Flat
Required (Please Circle)

One Bed Couple Flat Two Bed

Family

If you require a two bedroom flat please provide details of the other members of your household:

Surname	First Names	Date Of Birth	Sex

Date accommodation is required from:

Your signature _____

Date _____

Head of Department/Personnel Officer Name:

Head of Department/Personnel Officer Signature:

Tel No: _____

Date: _____

**PLEASE NOTE: THIS APPLICATION CAN NOT BE PROCESSED
WITHOUT THE SIGNATURES OF YOUR HEAD OF
DEPARTMENT/PERSONNEL OFFICER**

For Estate Office Use Only:

Property Allocated: Flat No:

Building:

Rent PCM:

Notes:
