

MANAGEMENT ACCEPTANCE FORM

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I/We hereby appoint Lines & James Limited as my/our Agent to undertake all subsequent management of the property identified below for the duration of the tenancy. I/we confirm I/we have read and understood the Terms of Business and Conditions of Agency to receive rents and to account to my/our bank after deductions of outgoings and management expenses and will make the said property available for letting during the entire term of this agreement.

Property Address

Postcode

Telephone No.

In the event of maintenance repairs up to £200 plus VAT or expenditure in excess of this sum required to prevent further costs or protect my/our investment with the inability to contact me/us in time, I/we authorise Lines & James to proceed with the expenditure without prior reference to me/us.

I/We acknowledge that Lines & James shall deduct from rental monies due to us, all property related bills and fees as agreed, during the period they become due.

DECLARATION

I/We agreed to be bound by this contract and certify that I/we fully understand the content and have received a copy thereof. Please proceed with;

- (1) **Full Management** @ 12.5% +VAT (15%)
- (2) **Rent Collection** @ 10% + VAT (12.5%)
- (3) **Finders Service** @ £500 + VAT (£600) – one off fixed fee
- (4) **I confirm I require you to prepare an Inventory.** YES / NO

My property is unfurnished/furnished (*delete as applicable*)

No. of bedrooms.....

Cost for Inventory make to be deducted from the first months rent please see Additional Costs as set out in the Terms of Business.

Signed

Date

**OWNERS DETAILS &
PROPERTY INFORMATION
QUESTIONNAIRE**

OWNERS DETAILS AND PROPERTY INFORMATION QUESTIONNAIRE

ABOUT THIS FORM

To be completed by the landlord

The landlord may be the owner or owners; a representative with the necessary authority to rent the property for an owner who has died; a representative with the necessary authority to rent the property for a living owner (eg: Power of Attorney) or be renting in some other capacity. The form should be completed and read as through the questions were being answered by the owner.

If you are the landlord or Agent, you should be aware that this form runs in line with the Consumer protection from unfair Trading Regulations 2008 and as such it must be completed as wholly and accurately as possible. Under the Consumer protection from unfair Trading regulations 2008 both the landlord and agent must disclose anything, within their knowledge, that would affect the decision of the transactional decision of the average consumer.

The purpose of this form is to help landlords and agents to understand the types of details that should be disclosed should they be known. This form however should not be considered exhaustive and as such anything not included on the form that you feel would affect the decision of the average consumer should be disclosed to potential tenants.

If you are found to be in breach of the Consumer Protection from Unfair Trading Regulations 2008 then you could face both an unlimited fine and/or imprisonment of up to two years.

The information provided within this form should only relate to the period during which you owned the property; should there be any material information prior to your ownership that you are aware of, there is an 'additional information' section at the end of the form that you can utilise.

1. OWNERS INFORMATION

Full name(s) of the owner(s)		
Address of the owner(s)		
	Post Code:	Post Code:
Home telephone number		
Mobile number		
Email address		

Does anyone have Power or Attorney?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please provide their name, address, contact numbers and email address.			

2. BANK DETAILS

Please provide details of the bank account you wish the rent to be paid into.

Name of bank	
Address of bank	
Account Name	
Account Number	
Sort Code	

3. PROPERTY TO BE RENTED

Throughout this form the property may be referred to as 'the property', 'this property' or 'your property'

Address 1	
Address 2	
Town	
County	
Postcode	

4. LENGTH OF OWNERSHIP

When did you become the legal owner of this property?	Month:	Year:
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5. TAX

Which Council Tax band does this property fall within?
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6. PARKING

What parking arrangements are there at the property?

Garage	<input type="checkbox"/>	Allocated parking space	<input type="checkbox"/>	Driveway	<input type="checkbox"/>
On street	<input type="checkbox"/>	Resident permit	<input type="checkbox"/>	Metered parking	<input type="checkbox"/>
Shared parking	<input type="checkbox"/>	None	<input type="checkbox"/>	Other	<input type="checkbox"/>

7. KEYS TO THE PROPERTY

We require a minimum of 3 sets of keys for the property. Please supply Lines & James with 3 sets of keys before you vacate the property. Keys such as window keys should be left at the property and clearly labelled.

8. SECURITY

Is there an alarm at the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please provide any contract details, the code and any specific instructions on how to set/disarm the system.			

9. MANAGEMENT COMPANY

Is there a block management company?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please provide the name, address and contact details.			

10. GENERAL MAINTENANCE

Location of the stopcock		Don't know <input type="checkbox"/>
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If you would like us to use the services of a particular contractor please supply their details below:

Type of contractor (e.g. Plumber, Electrician, Gardener, Gas Engineer)	
Name	
Contact number	
Email address	

Type of contractor (e.g. Plumber, Electrician, Gardener, Gas Engineer)	
Name	
Contact number	
Email address	

Type of contractor (e.g. Plumber, Electrician, Gardener, Gas Engineer)	
Name	
Contact number	
Email address	

Type of contractor (e.g. Plumber, Electrician, Gardener, Gas Engineer)	
Name	
Contact number	
Email address	

11. BUILDING RESTRICTIONS/CONDITIONS

Is your property a listed building?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please state the grade of the property			

Is your property in a designated conservation area?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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12. CHANGES TO THE PROPERTY

Have there been any structural alterations; additions or extensions to the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If 'Yes' please outline the nature of the work

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Was Building Control approval obtained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Was planning permission obtained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Was a completion certificate obtained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Was listed building consent obtained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If you answered 'No' to any of the above questions please outline to reason(s) why.			

If you answered 'Yes' the relevant documents will need to be supplied prior to your property being marketed.

Has there been a major repair or replacement to any part of the roof since you purchased the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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13. UTILITIES/SERVICES

Is there central/partial central heating in the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please give details of the type of central heating			
When was the central/partial central heating installed?	Month:		Year:
Is there a maintenance contract in place for the central/partial central heating system?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

If you answered 'Yes' please provide the month and year the contract was renewed and the expiry date, if known.

Renewed:	Expires:	Don't know <input type="checkbox"/>
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Has the primary heating system in your property been serviced?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' when was the heating system serviced?	Month:		Year:

Do you have a valid Gas Safety Certificate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' when was the Gas Safety Certificate issued?	Month:		Year:
If 'No' would you like Lines & James to arrange this or arrange it yourself?	Lines & James <input type="checkbox"/>	Arrange yourself <input type="checkbox"/>	

Has a Legionella Risk Assessment been carried out at the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' when did the assessment take place?	Month:		Year:
If 'No' would you like Lines & James to arrange this or arrange it yourself?	Lines & James <input type="checkbox"/>	Arrange yourself <input type="checkbox"/>	

Has an electrical installation condition report been carried out?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' when was the electrical wiring checked?	Month:		Year:

If you answered NO to having a valid Gas Safety Certificate you will need to obtain one

If you answered NO to having a Legionella Risk Assessment one will need to be carried out.

If you answered NO to having a valid Electrical Installation Condition Report you will need to obtain one

Please indicate which services are connected to the property.

Service	Supplier	Serial Numbers & Meter Location
Electricity		
Gas		
Liquid Petroleum Gas (LPG)		
Water main or private water supply		
Drainage to public sewer		
Septic Tank		
Cesspool		
Telephone		
Cable TV or Satellite		
Broadband		
Other:		
Other:		

Other services includes renewable technologies.

If you have a septic tank or cesspool, do you have a maintenance contract in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please supply the company the contract is with.			

14. BOUNDARIES/ACCESS

Have you had a dispute with your neighbour at the property which has been resolved or is ongoing?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please provide details			

Have any of the boundaries of your property been altered within your ownership or (if longer) the last 10 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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Is there a current application to alter the boundaries of your property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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Do you have right of access through any neighbouring homes, buildings or land?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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Do any neighbours have right of access through any part of your house, buildings or land?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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Is there a public right of way through and/or across your house, buildings or land?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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15. ENERGY PERFORMANCE CERTIFICATE (EPC)

Does your property have an EPC, which has been undertaken within the last 10 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If 'No' would you like Lines & James to arrange this or arrange it yourself?	Lines & James to arrange <input type="checkbox"/>	Arrange Yourself <input type="checkbox"/>
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If you have an EPC you will need to give a copy to Lines & James. If you do not have an EPC you will need to get one for your property.

16. SPECIALIST ISSUES

Has there ever been any preventative work for dry rot, wet rot or damp carried out at your property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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Has there ever been any treatment of dry rot, wet rot or damp carried out at your property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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Does any part of your property contain Asbestos?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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Has Japanese Knotweed ever grown within the property boundary or close vicinity?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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Has the property every been subject to subsidence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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17. GUARANTEES

Are there any guarantees or warranties relating to this property?

National House Building Council (NHBC)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Roofing work	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Damp/rot prevention or treatment work	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Central heating and/or plumbing work	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Electrical work	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Preventative work/remedial action relating to subsidence	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Other:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

Are there any outstanding claims or current applications relating to any of the above?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please provide details			

18. NOTICES WHICH AFFECT THE PROPERTY

Have you received, within the last three years any of the following notices?

The owner of a neighbouring property has made a planning application?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Any planning application, that could affect the property or the views?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Notice informing you that maintenance, repairs or improvements are required for your property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Other:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

You will need to provide details of any notices you are aware of to Lines & James.

19. OTHER ISSUES AFFECTING THE PROPERTY

Has the property been damages as a result of a storm or fire since you have owned it?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please provide details and advise whether there are any outstanding claims.			

Has there been any flooding at the property since you have owned it?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please provide details			

Have you checked the long-term flood risk assessment on the gov.uk website?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
If 'Yes' please provide details			

The tenant is advised to go to www.flood-warning-information.service.gov.uk/long-term-flood-risk for an indication of the area's flood risk.

Is this property subject to an excessive noise or disturbance that a potential tenant should be aware of?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details

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Is this property subject to a Green Deal loan or another financed home improvement scheme?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If **'Yes'** please provide details including any outstanding payments for the renewable devices and any feed in tariffs.

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20.RESTRICTIONS/CONSENTS

Is there a current mortgage on the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Buy to Let <input type="checkbox"/>
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If **'Yes'** have you obtained consent to rent from your mortgage lender? Yes No

If **'Yes'** please provide details and supply a copy to Lines & James.

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If **'No'** you will need to obtain consent before Lines & James can market your property.

Is there currently a head lease?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If **'Yes'** do you have a copy of the head lease? Yes No

If **YES** you will need to provide a copy to Lines & James

If **NO** You will need to obtain a copy and forward it to Lines & James before the tenancy agreement can be signed.

Have you obtained consent to rent from any head lessee?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If **'Yes'** please provide details of any restrictions and supply a copy to Lines & James

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If **NO** you will need to obtain consent before Lines & James are able to market your property.

Are any tenants going to be restricted access to any parts of the house, or sub buildings? (e.g. Loft or detached garage)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes' please provide details		

Do you plan to or have you arranged for any works to be carried out which may affect the tenant's moving in date or living conditions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes' please provide details		

Are there any restrictions that would prevent a specific type of tenant (e.g. pet owner) being accepted?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes' please provide details		

Please note that due to the Equality Act 2010 Lines & James would not be able to act on your behalf should you be seen to be discriminating against protected characteristics.

21. INSURANCES

Do you have Landlords Insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes' please provide the insurer and policy number		
Insurer:	Policy Number:	

If you answered **'No'** to the above

Do you have Buildings Insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes' please provide the insurer and policy number		
Insurer:	Policy Number:	

Do you have Contents Insurance for any contents that you own and will be providing during the tenancy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes' please provide the insurer and policy number		
Insurer:	Policy Number:	

22. FURNISHED STATE

Please advise what level of furnishing you are planning to rent the property in.

Unfurnished <input type="checkbox"/>	Part Furnished <input type="checkbox"/>	Furnished <input type="checkbox"/>
Unfurnished does not mean leaving the property entirely empty. It is usually expected that curtain poles, blinds, carpets and certain white goods will be included such as a fridge freezer, washing machine and cooker.	Part furnished will usually include curtain poles, blinds, carpets, certain white goods and larger items such as wardrobes (if there isn't already built in storage space in the bedrooms) beds, dining tables and chairs.	Renting a property fully furnished means that the property is ready to move into. The specifics of what will and will not be included would be down to you as the landlord and the tenant to negotiate.

If you are **NOT** renting the property **Fully Furnished** please list below what items you will be including:

23. ADDITIONAL INFORMATION

Are you aware of any covenants, which have not been covered within this form?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
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If 'Yes' please provide details

Are you aware of any other material issues or information which relates to the property or has anything occurred which may affect the average consumer's transactional decision? Please describe this issue and any action that has been taken, if applicable. (Disclosure required under the Consumer Protection from Unfair Trading Regulations 2008).

I/We hereby declare that as the owner (or owner's representative) of this property, I/we have completed this form to the best of my/our knowledge and understand that if I/we have intentionally misled or omitted any information, which may affect the average consumer's transactional decision, I/we may be liable for prosecution under the Consumer Protection from Unfair Trading Regulations 2008.

Signed

Print Date.....

Signed

Print Date.....

Notice of the Right to Cancel

The Consumer Contracts (Information, Cancellation and Additional Charges) Regs 2013

The right to cancel only applies if the Landlord enters into an agreement with the Agent where the Landlord is a consumer (being an individual acting wholly or mainly outside of their own trade or business) and this Agency Agreement is signed:

- at a place which is not the Agent's office;
- at the Agent's offices but following a meeting between the parties away from the Agent's offices; or
- without meeting face to face at all.

Information for Landlords:

You have the right to cancel this contract within 14 days without giving any reason. The cancellation period will expire after 14 days after the day on which this contract was entered into.

To exercise the right to cancel, you must inform the Agent at *[Insert address, tel, fax and email]* of your decision to cancel this contract by a clear statement (eg a letter sent by post, fax or email). You may use the model cancellation form below, but it is not obligatory.

To meet the cancellation deadline, it is sufficient for you to send your communication concerning your exercise of the right to cancel before the cancellation period has expired.

Effects of cancellation

If you cancel this contract, the Agent will reimburse to you any payments received from you without undue delay, and not later than 14 days after the day on which the Agent was informed about your decision to cancel this contract. The Agent will make the reimbursement using the same means of payment as you used for the initial transaction, unless you have expressly agreed otherwise; in any event, you will not incur any fees as a result of the reimbursement. However, if you requested that the Agent begins the performance of services during the cancellation period, you shall pay an amount which is in proportion to what has been performed until you have communicated to the Agent your cancellation of this contract, in comparison with the full coverage of the contract.

----- *cut here* -----

Complete, detach and return this form **ONLY IF YOU WISH TO CANCEL THE CONTRACT**.

Cancellation Notice to be Included in Notice of the Right to Cancel

To: _____ *[Insert Agent's name, address, fax number and email address]*

I/We* hereby give notice that I/we* wish to cancel my/our* contract

[Agent to insert reference number, property address or other details to enable the contract to be identified. He may also insert the name and address of the consumer.]

Signed.....

Name and Address

Date.....

* *delete as appropriate*