

**City of Carlisle
Verification of Rent Form**

HBref:

To be completed by claimant

Name Address

Your Signature

Have you recently applied for a Pre-tenancy determination on this property? Yes No

To be completed by the landlord/agent

Date of Tenancy Date moved in

Amount of Rent Date of change

Length of Tenancy Frequency of payment

Is this a Joint Tenancy Yes No

If so, please provide details of joint tenant(s)

Does your rent include any of the following services? Please delete as applicable

Water Charges	Yes/No	Fuel for cooking	Yes/No
Heating	Yes/No	Lighting	Yes/No
Heating of Hot Water	Yes/No	Cleaning rooms/windows	Yes/No
Laundry	Yes/No	Parking Space	Yes/No
Garage	Yes/No	Gardening	Yes/No
Emergency Alarm	Yes/No	Personal Care/Support	Yes/No

If Emergency Alarm/Personal Care/Support is included please provide details of the amount included in the rent.

Meals Yes No

If meals are included please specify which meals

Please detail any other charges

If your tenants rent does not include services please say how they pay for them.

Landlord Name

Agents Name

Address

Address

Signature

Signature

Date

Date