

safeagent Client Money Protection Scheme - CLAIM FORM

The information provided on this form will be kept strictly confidential and will only be used by safeagent to process potential claims against the safeagent Client Money Protection Scheme.

Applications must be submitted within 12 months of the date notification was first made to safeagent of the misappropriation of clients' money.

Name of agent fir	m:
Address:	
Please state whet	her you are a: LANDLORD / TENANT (circle as appropriate)
TO BE COMPLE	TED BY LANDLORDS & TENANTS
Full name:	
Current address:	
Daytime telephon	e number:
Mobile Number:	
Email address:	
TO BE COMPLE	TED BY LANDLORDS only
Do you own the p	roperty jointly with others? Yes/No (circle as appropriate)
If yes, please give	e the full names and contact details for the joint owner/s

When did the agent firm commence acting for you?				
Please provide a copy of the Terms of Business you signed with the agent firm				
What is the monthly rent?	£			
What was the last date you received rent? (DD/MM/YYYY)				
(Please attach copies of your last 6 months rental statements from the agent firm if possible) Please provide the full address of the property(ies) managed by the agent firm. Please continue on				
a separate sheet if necessary. Property 1:				
Property 2:				
TO BE COMPLETED BY TENANT(S) only				
Please provide full address of the property rented from the agent	firm.			
Property Address:				
Are you a sole tenant, or a joint tenant? Joint / Sole (circle as appropriate)				
Please provide the name(s) of any other tenants in the property.				

Please provide the date your tenancy commenced (DD/MM/YYYY)				
What is the monthly rent?	£			
What was the last date you paid rent? (DD/MM/YYYY)				
As a tenant, did you pay a deposit? Yes / No (circle as appropriate)				
To whom did you pay the deposit? Landlord / Agent (circle as appropriate)				
How did you pay the deposit? (cash, cheque,debit/credit card)				
Did you receive a receipt for the deposit? Yes / No (circle as appropriate)				
If yes, please attach the original (keep a copy for your own records).				
Which tenancy deposit scheme was your deposit protected with?				
Has the tenancy ended? Please confirm date? (DD/MM/YYYY)				
When do you expect the tenancy to end? Please provide date				

LANDLORDS AND TENANTS

Please state here the exact amount you are claiming for.	
Rent/Deposit	£

Checklist for supporting documentation to send with your claim:

It is important that you provide this information to enable us to process your claim.

Landlords

- A completed safeagent Claim Form stating the exact rental period claimed for and amount
- A copy of the Assured Shorthold Tenancy Agreement for the tenancy(ies).
- Evidence of non-receipt of rent demonstrated by bank statements covering a 6-month period, to include the period of loss.
- A Police Crime Reference Number
- Evidence that the tenant has paid the rent. safeagent would seek this information from the tenant when the information requested in Points 1, 2 and 3 above have been provided.
- Copies of rental statements provided to the landlord by the letting agency firm covering a 6-month period, to include the period of loss. safeagent advises the potential claimant that we appreciate they may not have copies of all rental statements, but it would be useful to provide as much information as they can. safeagent also advises consumers at the outset that we do not hold any accounting or financial records relating to the firm.

Please note: Any settlement payments will be net of the agent firm's commission, VAT and maintenance charges.

Tenants

- A completed safeagent Claim Form
- A Police Crime reference Number
- A copy of the Assured Shorthold Tenancy Agreement and relevant clause noting where the deposit is alleged to have been protected.
- Evidence of payment of the deposit to the letting agent firm i.e. a bank statement or receipt.
- Evidence that the deposit was not protected by the deposit scheme referred to at Point 3.

Please return this completed form with enclosures to Claims Processing, safeagent, Cheltenham Office Park, Hatherley Lane, Cheltenham GL51 6SH

Your claim will be acknowledged within 3 working days of receipt.

safeagent

Cheltenham Office Park Hatherley Lane Cheltenham GL51 6SH T:01242 581712