











6-7 St Peters Hill  
Grantham  
Lincolnshire  
NG31 6QB



Please note that Cheffins may receive a commission in respect of any successful referral or introduction.

### DECLARATION OF ACCEPTANCE

I/we the undersigned confirm that I/we have read and fully understood the information sheet and agree to the costs therein.

Print Name/s.....

Signature/s:.....Date.....

Mobile number.....E-mail address.....

Current Address.....

### POST TENANCY FORWARDING ADDRESS

To comply with regulations of The Dispute Service, we require a post-tenancy address for correspondence.

We appreciate it is very unlikely that you will know this information at this time, so your emergency contact or a work address is enough. When your tenancy ends, we will ask you to confirm your forwarding/correspondence address

Print Name.....

House Name / Number.....street.....

Town/City.....Post Code.....

### NEXT OF KIN

Please provide details of your next of kin below:

Print Name.....

House Name / Number.....Street.....

Town/City.....Post Code.....

Contact Number.....Email Address.....