

**Licence To Alter Application Form (LTA1)  
For Shared Owners/Leaseholders/Freeholders**



**Section 1: Your Details**

Property Owner(s):

Property Address:

Correspondence Address: (if different)

Tel No:

Email:

**Section 2: Type of alteration proposed**

Please refer to our Guide On Alterations (tick all that apply)

Kitchen / Bathrooms	<input type="checkbox"/>	Door / Windows	<input type="checkbox"/>	Non-Structural Works	<input type="checkbox"/>
Gas	<input type="checkbox"/>	Electrical	<input type="checkbox"/>	Structural Works	<input type="checkbox"/>
Other	<input type="checkbox"/>	Please specify <input type="text"/>			

**Section 3: For works already completed**

Please complete this section only if works have been completed

Date of Completion  /  /20

The Following Documents are required:	Enclosed	Not Applicable
Plans showing property before and after	<input type="checkbox"/>	<input type="checkbox"/>
Planning permission	<input type="checkbox"/>	<input type="checkbox"/>
Building control completion certificate	<input type="checkbox"/>	<input type="checkbox"/>
Party wall notice and conditional survey	<input type="checkbox"/>	<input type="checkbox"/>
Insurance documents	<input type="checkbox"/>	<input type="checkbox"/>
Electrical / gas safety inc. installation certificates	<input type="checkbox"/>	<input type="checkbox"/>
Fensa Certificate	<input type="checkbox"/>	<input type="checkbox"/>



**Section 4: Current Plan of your dwelling**

Please show the layout of the full property. Complete your plans in ink, not pencil. If you need to use additional pages please include your name and address on all supplementary pages.

### Section 5: Proposed Plan of your dwelling

Please show the layout of the full property, include details of all pipe runs and services that will change, or be added as part of your proposal. These must be marked clearly on the current and proposed plan. Complete your plans in ink, not pencil. If you need to use additional pages please include your name and address on all supplementary pages.

**Section 6: Details of proposed contractors, architects, consultants, solicitors etc.**

Name	Employed as (builder, plumber, architect, solicitor etc.)	Contact telephone number / email	Is the contractor registered with a Competent Person Scheme / Trade Body? (Y/N)

**Section 7: Please ensure you include the following with your application**

Full specification of the works (as detailed by your contractor(s))	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Risk Assessment / Method Statement	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Proposed and existing plans and, or drawings	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Building Control Completion / Approval Letter	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Local Authority planning permission	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Evidence your contractor(s) are registered with Competent Persons Scheme e.g. Gas Safe, NICEIC, FENSA, etc.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Insurance documents (professional indemnity /employer & public liability) *Please refer to our Guide to Alterations for more information	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

I / we confirm that I am/ we are the leaseholder(s)/freeholder(s) of the property for which this application relates to. I / We have read the Guide to Alterations and understand Clarion Housing's standard terms and conditions.

.....	.....
Signed Applicant 1	Signed Applicant 2
(Mr/Mrs/Ms/.....).....	(Mr/Mrs/Ms/.....).....
Print Name	Print Name
___/___/20___	___/___/20___
Date	Date

Send your completed application form and documentation to:  
Customer Support Team, Clarion Housing, Reed House, Peachman Way, Broadland Business Park, Norwich, NR7 0WF  
Or email to: [customerservices@myclarionhousing.com](mailto:customerservices@myclarionhousing.com)