



St. Leger Homes of Doncaster

NOTIFICATION OF CHANGE OF NAME

Please complete this form in BLOCK CAPITALS

ADDRESS

I REQUEST TO HAVE MY NAME CHANGED ON THE ABOVE TENANCY:

FROM: FORMER NAME – Please give your former name in full

MR/MRS/MS/MISS

FIRST NAME(S)

LAST NAME

TO: NEW NAME – Please give your new name in full

MR/MRS/MS/MISS

FIRST NAME(S)

LAST NAME

Please confirm your date of birth:

Please provide proof of change of name e.g

1. Copy of marriage certificate if you are changing your name due to marriage.
2. Copy of your change of name Deed Poll documents if you are changing your name for any other reason.

SIGNED:

DATE:

Details of all household members

Last name	First name	Relation to applicant	Date of birth



Return this form to: **St. Leger Homes of Doncaster, St. Leger Court, White Rose Way,
Doncaster. DN4 5ND**

FOR OFFICE USE ONLY

FROM: Rent Control Officer

DATE: _____

TO: Central Support

NOTES/
GARAGE TENANCY:

TYPE OF IDENTIFICATION SEEN: _____

SIGNATURE: _____

RENT CONTROL OFFICER