Tenant Alterations Request Form

Property Address:				
Tenant Name(s):				
Tenancy Start Date:				
Contact Number / Email:				
Proposed Alteration Details				
Type of Alteration:				
Description of Proposed Works:				
Location:				
Supplier/Contractor:				
Start Date:				
Completion Date:				
Reason for Alteration:				
Painting or Decorating?	Yes	No		
If Yes, confirm use of company-approved colours and suppliers.				
Fixing to walls/ceilings/floors?	Yes	No		

If Yes, describe how fixtures will be installed and later removed.

Tenant Declaration and Agreement

- 1. No alteration or decorative work may be carried out until written approval has been granted by the landlord or managing agent.
- 2. Any works must be completed to a professional standard and, where required, must use company-approved colours and suppliers.
- 3. If any alteration or decoration is carried out without prior written consent, this will be a breach of the Alterations Policy

4. Upon vacating the property, the premises unless otherwise agreed in writing.5. If the property is not reinstated, the mana deduct it from the tenancy deposit.		-	
6. The details provided are accurate and co	mplete.		
Tenant Signature(s):			
Date:			
Landlord / Managing Agent Section			
Request Approved?	Yes	No	
Conditions of Approval:			
Inspection Required Before Works?	Yes	No	
Inspection Required After Works?	Yes	No	
Authorised by (Landlord/Agent):			
Signature:			
Date:			