

## **Alterations Request Form**

Please complete all the below fields with as much detail as possible and then submit your property alteration request to:

Email: <a href="mailto:services@bestha.co.uk">services@bestha.co.uk</a>

Post: 2a Sentinel House, Albert Street, Eccles, Manchester, M30 0NA.

Date of request:				
Person making the request (Tenant):				
Name of person supporting the				
tenant to make this request: (if				
applicable)				
Relation to tenant:				
Full Address of the property:				
Email address to confirm if your				
request has been accepted:				
Phone number to confirm if your				
request has been accepted:				
Full details of alteration				
Please be specific on details such as sizes and materials required:				
Specific Location in Property				
For example: Upstairs bathroom, on wall next to the toilet:				
Why is this alteration required				
Why is this alteration required				
Please obtain a supporting occupational therapist report where possible?				

## **Important Note:**

If your request is accepted, BeST will accept no liability for any works in relation to the alteration and it may be at the end of the tenancy we ask the property is brought back to its original condition.



Print				
Name:				
Signed:				
Date:				
For office use only				
Has the requ (please highl	est been accepted? ight)	Yes	No	
Reason for this:				