

Primary Contact Details:

First Name:	
Surname:	
Home Address:	
Post Code	
Telephone:	
Mobile:	
E-mail:	
Flat number (if non-resident leaseholder):	

Management Proposal

Is it your intention to;

- a) Self manage:
- b) Appoint a managing agent:

Building Information:

Address of property seeking RTM:

Is the development split into structurally detached blocks?

Yes: No:

If yes how many blocks?	
How many flats in total?	
Name of freeholder:	
Name and address of existing managing agent:	

Qualifying Criteria:

If not structurally detached is the part of the building vertically divided and capable of being redeveloped independently

Yes: No: N/A:

Are at least two thirds of flats in each block owned by qualifying tenants?

**A qualifying tenant is a leasehold owner whose lease was originally granted for a term of more than 21 years.*

Yes: No:

If part commercial (i.e. shops or offices on ground floor). Does the non-residential part exceed 25% of the total floor area?

Yes: No: N/A:

If a single block, do 50% or more leaseholders support RTM?

Yes: No: N/A:

If Multiple blocks, do 50% or more leaseholders in each block support RTM?

Yes: No: N/A:

If Multiple blocks, specify the numbering of the flats in each block:

Block Name	Numbering

Declaration

I confirm the information provided herein is correct:

Signed:

Print Name:

Date:

Details of those willing to act as founding Directors:

Full name & title:	
Date of birth:	
Nationality:	
Occupation:	
Address:	
Telephone:	

Full name & title:	
Date of birth:	
Nationality:	
Occupation:	
Address:	
Telephone:	

Full name & title:	
Date of birth:	
Nationality:	
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Nationality:	
Occupation:	
Address:	
Telephone:	

Full name & title:	
Date of birth:	
Nationality:	
Occupation:	
Address:	
Telephone:	

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