

# Request to keep a pet



This form should be completed by residents requesting permission to keep a pet (as and where it is required by the terms of their tenancy/ lease agreement).

## Your personal details

Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_

Address: \_\_\_\_\_

Tenancy Reference: \_\_\_\_\_ Tenancy type: \_\_\_\_\_

## The property where you live

Property type:  House  Purpose built flat  Conversion flat

If you live in a flat, what floor do you live on? \_\_\_\_\_

Does the property have a private garden?  Yes  No

## About pet(s) living with you now

### Pet one (tick one box only)

Dog  Cat  Reptile  Bird  Other (please specify): \_\_\_\_\_

Type or breed of pet (e.g. labrador/ iguana/ parrot): \_\_\_\_\_

How many pets of this type live at the property? \_\_\_\_\_

### Pet two (tick one box only)

Dog  Cat  Reptile  Bird  Other (please specify): \_\_\_\_\_

Type or breed of pet (e.g. labrador/ iguana/ parrot): \_\_\_\_\_

How many pets of this type live at the property? \_\_\_\_\_

### Pet three (tick one box only)

Dog  Cat  Reptile  Bird  Other (please specify): \_\_\_\_\_

Type or breed of pet (e.g. labrador/ iguana/ parrot): \_\_\_\_\_

How many pets of this type live at the property? \_\_\_\_\_

## About pet(s) you want to keep in the future

### Pet one (tick one box only)

Dog       Cat       Reptile       Bird       Other (please specify):

Type or breed of pet (e.g. labrador/ iguana/ parrot):

How many pets of this type live at the property?

How long will the pet live at the property?       Permanently       Temporary for \_\_\_ years \_\_\_ months

Does the pet need a licence?       Yes       No

Will the pet be used for breeding?       Yes       No

Will you be the registered owner?       Yes       No

Owners name and address (if different):

### Pet two (tick one box only)

Dog       Cat       Reptile       Bird       Other (please specify):

Type or breed of pet (e.g. labrador/ iguana/ parrot):

How many pets of this type live at the property?

How long will the pet live at the property?       Permanently       Temporary for \_\_\_ years \_\_\_ months

Does the pet need a licence?       Yes       No

Will the pet be used for breeding?       Yes       No

Will you be the registered owner?       Yes       No

Owners name and address (if different):

### Pet three (tick one box only)

Dog       Cat       Reptile       Bird       Other (please specify):

Type or breed of pet (e.g. labrador/ iguana/ parrot):

How many pets of this type live at the property?

How long will the pet live at the property?       Permanently       Temporary for \_\_\_ years \_\_\_ months

Does the pet need a licence?       Yes       No

Will the pet be used for breeding?       Yes       No

Will you be the registered owner?       Yes       No

Owners name and address (if different):

## Support

Will the pet support you (or a member of your household) with a disability?       Yes       No

If yes, please describe the support the pet will provide (e.g. I need a guide dog because I have a sensory disability):

Do you have any other support needs you feel L&Q should be aware of when making our decision?

## Declaration

I confirm and agree that should L&Q grant my request to keep a pet(s):

- I will not mistreat the pet
- I will ensure the pet has appropriate access to health care
- I am fully responsible for the behaviour of the pet
- Any nuisance caused by the pet will be treated as a breach of my tenancy/ lease
- I will find the pet another suitable home if it does cause a nuisance to other people that live near me
- I will not make any alterations to my home to accommodate a pet without gaining prior permission from L&Q. This includes installing a cat/dog flap in the front door of a flat.

Print name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete and return this form to:

**L&Q Direct**  
**Sidcup**  
**DA14 5HU**

**Tel: 0300 456 9996**

**Email: [centralsupportservices@lqgroup.org.uk](mailto:centralsupportservices@lqgroup.org.uk)**

### For office use only

#### L&Q Direct

Date received:

CSA's name:

Sent to:  North East  South East  South  West

Date sent:

#### Neighbourhood services

Date received by NSO:

NSO's decision:  Approved  Declined

Reason for decision: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NSO's name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Authorised by: \_\_\_\_\_

