

Application for Membership: Regulated Letting Agent



Complete this form if you are a letting agent with client money protection insurance, regulated by one of the approved bodies below. Prices per tenancy are detailed on our website.

Section 1: Details of Firm

Company name (legal entry)

Trading name (if different)

Head office address

Postcode

Correspondence address (if different to head office address)

Postcode

Telephone number

Email address

Website

If a Limited Company, please give registered number

The company expects to register deposits with TDS in the next 12 months

The value of these deposits is expected to be £

Section 2: Approved Body Membership & Eligibility

This firm is a regulated member of

- ARLA NALS RICS
 Law Society NAEA TPOS (with Lonsdale PI, CMP and TLP check)*

Approved body membership number

Do you have Professional Indemnity Insurance?

- Yes No

If yes, please state amount £

Name of insurer

* As part of this application, TPOS members with CMP will require an annual check with The Letting Partnership at a cost of £250+VAT.

Section 2: Approved Body Membership & Eligibility

Do you have Client Money Protection Insurance?

Yes No

If yes, please state amount £

Name of insurer

Do you hold tenancy deposits and other client money in a ring-fenced client account?

Yes No

Have you ever been refused a licence to operate an HMO under the mandatory requirements of the Housing Act 2004?

Yes No

Which redress scheme are you a member of?

The Property Ombudsman Ombudsman Property Services Property Redress Scheme

Do you have a written complaints procedure?

Yes No

Have you ever been a member of another tenancy deposit scheme?

Yes No

If yes, which one?

Are you still a member?

Yes No

What made you join TDS?

Where did you hear about TDS?

Are you happy for us to publicise your new membership of TDS? We may do this through social media, a blog or a news item on our website and would include links to your website.

Yes No

Section 3: Compliance with TDS Rules

I agree on behalf of myself/the firm and my/our clients:

1. I/We will be bound by the Membership Rules for Lettings Agents and Corporate Landlords and the Rules for the Independent Resolution of Tenancy Deposit Disputes.
2. I/We will provide the information prescribed by statute and regulation.
3. I/We will inform TDS promptly if we open or close an office.
4. I/We will inform TDS promptly if there are any changes of ownership or tenants during the course of the tenancy.
5. I/We will co-operate with TDS in the event a dispute is referred for adjudication and that the decision of the adjudicator is final and binding.
6. I/We are not subject to recent or on-going disciplinary procedures of my/our professional body.
7. Subject to my/our written consent, TDS may have access to our credit rating should TDS determine that it is necessary to process this application.
8. I/We accept that TDS can carry out an audit at my/our expense if they reasonably consider that it is necessary to verify the accuracy of my/our returns for the purpose of calculating my/our subscription.
9. I/We undertake to pay any disputed deposit to TDS within ten days of being asked to do so.
10. All deposit registrations will be submitted via the TDS website.

Name _____

Signed _____

Dated / / _____

What you need to do now

Complete the form and return it to: customer.relations@tenancydepositscheme.com

Or post it to:

TDS, 1 The Progression Centre, 42 Mark Road, Hemel Hempstead, Herts, HP2 7DW

When we receive your complete application, we will confirm the details and let you know the progress and the subscription fee we can offer you within ten working days.

Once you have paid your membership fee, you will be able to start registering deposits.

So that we can provide you with the login details for each of your branches, supply us details for each branch on the next page.

Details of your Branches

Branch 1	Telephone number
Email address	
Postal address	
Postcode	


Branch 2	Telephone number
Email address	
Postal address	
Postcode	

Branch 3	Telephone number
Email address	
Postal address	
Postcode	

Branch 4	Telephone number
Email address	
Postal address	
Postcode	

If you have more branches, please provide the details of these separately and attach with your application.

Contact us

 TDS, 1 The Progression Centre,
42 Mark Road, Hemel Hempstead,
Herts, HP2 7DW

 0300 037 1000

 01442 253 193

 www.tenancydepositscheme.com