**Prescribed Information for Assured Shorthold Tenancies**

Under the Housing Act 2004, the landlord is required to give the following information to the tenant and anyone who paid the deposit on the tenant's behalf (a Relevant Person) within 30 days of receiving the deposit.

The scheme administrator of TDS Custodial is:

**The Dispute Service Limited**

PO Box 1255

Hemel Hempstead

Herts

HP1 9GN

Phone 0300 037 1001

Email info@tenancydepositscheme.com

Fax 01442 253193

Web custodial.tenancydepositscheme.com

**(i) THE DEPOSIT**

The amount of the deposit paid is **£**

**(ii)** **Address of the property to which the tenancy relates**

**(iii) DETAILS OF THE LANDLORD(S)[[1]](#footnote-1)**

**Name(s)**

**Address**

**E mail address**

**Telephone number**

**Fax number**

**(iv) DETAILS OF THE TENANT(S)**

**Name**

**Address**

**E mail address**

**Mobile number**

**Fax number**

**Contact details for the tenant(s) to be used at the end of the tenancy**

**Name**

**Address**

**E mail address**

**Mobile number**

**Fax number**

Please provide the details requested in **(iv) for each tenant** (there is a continuation sheet for this purpose).

**(v) RELEVANT PERSON’S CONTACT DETAILS**

If there is a **relevant person** (i.e. anyone who has arranged to pay the deposit on the tenant's behalf) the details requested in **(iv) must be provided for them**, as part of the Prescribed Information. Use the continuation sheet for this purpose.

**(vi) CIRCUMSTANCES WHEN THE DEPOSIT MAYBE RETAINED BY THE LANDLORD**

**The circumstances when all or part of the deposit may be retained by the landlords by reference to the terms of the tenancy are set out in** clause(s) of the tenancy agreement. No deduction can be paid from the deposit until the parties to the tenancy agreement have agreed the deduction, or an award has been made by TDS Custodial or by the court.

**(vii) CONFIRMATION**

The landlord certifies and confirms that:

* (a) the information provided is accurate to the best of my/our knowledge and belief and
* (b) I/we have given the tenant the opportunity to sign this document by way of confirmation that the information is accurate to the best of the tenant's knowledge and belief.

**Signed by or on behalf of**

**the landlord**

The tenant confirms that:

* I/we have been given the opportunity to read the information provided and
* I/we sign this document to confirm that the information is accurate to the best of my/our knowledge and belief.

**Signed by the tenant(s)**

Responsibility for serving complete and correct Prescribed Information on each tenant and relevant person is the responsibility of the member and the landlord. The Dispute Service Limited does not accept any liability for a member's or landlord's failure to comply with The Housing Act 2004 and/or The Housing (Tenancy Deposits) (Prescribed Information) Order 2007.

**Prescribed Information for Assured Shorthold Tenancies (Continuation Sheet)**

**Tick one of the following:**

* The information below relates to a Tenant □
* The information below relates to a Relevant Person □

**First line of address of the property to which the tenancy relates**

**(iv) CONTACT DETAILS**

**Name**

**Address**

**E mail address**

**Mobile number**

**Fax number**

**Details of the Tenant(s) contact details to be used at the end of the tenancy**

*(This section only needs to be completed for a tenant,* ***not*** *a relevant person)*

**Name**

**Address**

**E mail address Tick if the same as shown above**

**Mobile number Tick if the same as shown above**

**Fax number Tick if the same as shown above**

**Please provide the details requested for each tenant and each relevant person** (i.e. anyone who has arranged to pay the deposit on the tenant's behalf). Attach this sheet securely to the remainder of the Prescribed Information.

1. **The agent may insert their details here instead of the landlord’s** [↑](#footnote-ref-1)