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| **Residents Change of Details form** | | | | | | |
|  | | | | | | |
| **Please complete sections A and B of the form and hand back to a member of the reception team.** | | | | | | |
| **Section A – Current details of the resident** | | | | | | |
| Full Name | |  | | | | |
| Address and post code | |  | | | | |
| Landline number | |  | | Mobile number | |  |
| Email address | |  | | | | |
| Please state if the person named above is the owner or tenant of the above property | |  | | | | |
|  | |  | |  | |  |
|  | | | | | | |
|  | |  | |  | |  |
| **Section B – New details/requested changes to be made to records** | | | | | | |
| Please complete all sections that require updating and then sign and date the form | | | | | | |
| Name  (please note changes to surname) | |  | | | | |
| Address and post code | |  | | | | |
| Landline number | |  | | Mobile number | |  |
| Email address | |  | |  | |  |
|  | | | | | | |
|  | | | | | |  |
| Signed |  | | | Name (Print) | |  |
| Date: |  | | |  | |  |
| **If you are reporting the death of a resident please provide details of the next of kin if known.** | | | | | | |  |
| Name of Next of Kin | | |  | Telephone or email of Next of Kin: |  | |  |

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| **Section C - For Head of Office Services or other authorised member of staff** | | | | | | |
| **Updates to details** |  |  |  |  | Staff initials | Date completed |
| Resident database cross check completed to verify original details | | | | |  |  |
| Address Book updated with new details (add comments where necessary) | | | | |  |  |
| Net2 system updated with new details (add memo where necessary) | | | | |  |  |
| **Removal of details (in instances of residents moving to a new house or in the case of a deceased resident)** | | | | | | |
| Resident details removed from primary contacts in address book if relevant | | | | |  |  |
| In the case of a death, if next of kin details have been provided – contact the next of kin to obtain authorisation to be added to the DPML email system for property related communications only (Official comms only setting on address book) | | | | |  |  |
| Update the address book system with new contact details – set to “Official comms only” or “no permissions” until authorisation is obtained | | | | |  |  |
| Fill in the deleted Fob info below in case the resident applies for a refund in the future | | | | |  |  |
| Net2 System, Disable the Fob and delete the record | | | | |  |  |
| File this form in the Delamere Park Residents details folder/Fobs Folder | | | | |  |  |
|  | | | | |  |  |
| Signed Head of Office Services/Trustee | |  | | Date |  | |
|  |  |  |  |  |  |  |

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| **Fob Refund Information** | | | | | | |
| Resident Name | |  | | | | |
| Fob Number | |  | | | | |
| £5.00 refund applicable (yes/No) | |  | | | | |
| £5.00 refund given (Date) | |  | | | | |
| Signed Head of Office Services/Trustee | |  | | Date |  | |
|  |  |  |  |  |  |  |