

Emergency contact details

Tenant(s) name:

Address:

I give my permission for the individual(s) and their details as listed below to be held on file by Housing Plus Group. I agree for them to be contacted on my behalf in the event of an emergency relating to myself or my tenancy.

Signed: Dated:

Emergency contact name(s):

I am happy for my contact details as listed below to be held on file by Housing Plus Group and to be contacted in the event of an emergency relating to the individual(s) listed above.

Contact details

Address:

Relationship to tenant(s):

Telephone: Mobile:

Email:

Signed: Dated:

Once complete, please return your form to:

Shropshire: askshropshire@homesplus.co.uk

South Staffordshire: asksouthstaffs@homesplus.co.uk

Stafford: askstafford@homesplus.co.uk

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