

Tenant Participation Community Panel Representative Nomination Form

Information about you

Title	First Name	Surname	
			Please tick one box only <input checked="" type="checkbox"/> Basildon Council Tenant <input type="checkbox"/>
Address			
Signed		Date	
Telephone No.		Basildon Home owner <input type="checkbox"/>	

Your Sponsors (sponsors should be Council tenants or leaseholders)

Sponsor 1			Sponsor 2		
Title	First Name	Surname	Title	First Name	Surname
Address		Please tick one box only <input checked="" type="checkbox"/>	Address		Please tick one box only <input checked="" type="checkbox"/>
		Tenant <input type="checkbox"/>			Tenant <input type="checkbox"/>
Signed		Leaseholder <input type="checkbox"/>	Signed		Leaseholder <input type="checkbox"/>
Sponsor 3			Sponsor 4		
Title	First Name	Surname	Title	First Name	Surname
Address		Please tick one box only <input checked="" type="checkbox"/>	Address		Please tick one box only <input checked="" type="checkbox"/>
		Tenant <input type="checkbox"/>			Tenant <input type="checkbox"/>
Signed		Leaseholder <input type="checkbox"/>	Signed		Leaseholder <input type="checkbox"/>

Please write a brief explanation about yourself on the reverse of this form.

Return to: Tenant Participation Team
St Georges Community Housing
5-8 Dunton Court
Aston Road
Laindon
Essex SS15 6NX

Alternatively, take the form to your local Area Housing Office or your next Community Panel meeting.

