

# Application to be an Approved Body



Please note that the Independent Case Examiner may seek to verify the information you provide below. If it is inaccurate, your application may be refused.

I apply on behalf of the *professional body, trade association or accreditation scheme* below for acceptance as an Approved Body for the purposes of the Tenancy Deposit Scheme

Organisation		
Head Office address <i>(please type address on one line)</i>		Postcode
Contact address if not at Head Office <i>(please type address on one line)</i>		Postcode
Phone	Email	Fax

The organisation has a total of  branch offices in England and Wales

I estimate that we have dealt with  deposit disputes in the last three years

Is your organisation recognised as a statutory regulator under any government scheme or legislation?

Yes  No

If yes, under which scheme or legislation?

What are you minimum entry standards? *(please list below)*

Do you have a pro-active compliance monitoring regime? *(for example: Annual reviews, random visits etc)*

Yes  No

If yes, please detail below

Do you have a comprehensive code of practice?

Yes  No

*If yes:*

How many complaints have there been against members in the last three years?

How many of these were upheld?

As a result, how many members were:  
disciplined

suspended

expelled

*If No, do you have defined service standards?*

Yes  No

Do you require your members to have the following insurance *(please tick as applicable)*

Client Money Protection Amount

£

Professional Indemnity Amount

£

Do you have rules for financial conduct?

Yes  No

*If yes, do these include:*

Annual financial reporting by members

Yes  No

Handling clients money

Yes  No

Keeping tenancy deposits in a specified client account

Yes  No

Do you offer training and qualifications to members?

Yes  No

Do you require members to undergo Continuous Professional Development?

Yes  No

Do you require members to have a written complaints procedure?

Yes  No

**For Accreditation Schemes:**

Is your scheme endorsed by Accreditation Network UK?

Yes  No

**Finally:**

Would your organisation be willing and able to accept all/some of the financial risk of your members' failure to submit disputed deposits when requested?

Yes  No

Would your organisation be will and able to undertake the collection of TDS subscriptions from its members on behalf of The Dispute Service Ltd?

Yes  No

**I agree on behalf of the organisation:**

- 1 We will be bound by the rules of the Tenancy Deposit Scheme as they apply to Approved Bodies
- 2 We will inform the Scheme Administrator promptly if we are proposing to discipline, suspend or expel any of our members

Title (Mr, Mrs, Ms, Dr)	Name	Position
Signed		
Day	Month	Year

**For the Scheme Administrator's use only**

Membership Ref No.

**Decision on application for membership of TDS**

Accepted

Rejected

Day

Month

Year