



## STANDARD TENANCY APPLICATION FORM

Agency Name : THE LETTING SHOP  
Agency Number : 100787

A SEPARATE FORM MUST BE FULLY COMPLETED IN CAPITALS AND BLACK INK BY EACH APPLICANT AGED 18 YEARS AND OVER. PLEASE NOTE – FAILURE TO GIVE CORRECT AND DETAILED INFORMATION WILL RESULT IN A DELAY IN YOUR APPLICATION.

Please note: If no option is selected then a Comprehensive Reference will be undertaken.

Credit Check  Credit Check Plus  Comprehensive Ref  Comprehensive Ref Plus

### PROPOSED TENANCY DETAILS

Address	
Town	
Postcode	

Rental Period (please select)	6 / 12 Months	Total Rent per month (Property)	£	Total Rent per month (Applicant)	£
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Tenancy Start Date     /     /201     Name of Negotiator

Is the Tenancy Shared?    Yes     No

Is this a Student Property?    Yes     No  (If Yes a Guarantor will be required)

APPLICANTS WILL BE JOINTLY AND SEVERALLY LIABLE FOR THE TOTAL RENT PER MONTH FOR THE PROPERTY.

### TO BE COMPLETED BY TENANT

Title	First Name	Middle Name	Surname	Other names you have been known by
..				

### CONTACT DETAILS

Telephone:

Mobile:

E-mail Address:

Date of Birth:

National Insurance Number:

Married     Single     Separated     Divorced     Widowed     Living with partner



## ADDRESS DETAILS

**Current Address** (Please provide previous address and dates of residency in the last 6 years)

Address			
Post Code		Period at Address:	Yrs      Mths
Owner	<input type="checkbox"/>	Council Tenant	<input type="checkbox"/>
		Private Tenant	<input type="checkbox"/>
		Living with Friends/Relatives	<input type="checkbox"/>

### Landlord or Managing Agent Details for your current Address

Name			
Address			
Telephone (Day)		Fax Number	

### Previous Addresses

Address			
Post Code		Period at Address:	Yrs      Mths
Address			
Post Code		Period at Address:	Yrs      Mths

Have you ever had any County Court Judgements, Court Decree, Bankruptcy or Administration Orders?

Yes     No  (If yes, please detail on a separate sheet)

Have you had any criminal convictions?     Yes                       No

Have you got any pets?     Yes                       No

Do you smoke?     Yes     No

Will there be children living at the property? .....

## EMPLOYMENT/INCOME DETAILS

Employed     Self Employed     On Contract     Retired     Unemployed     Student

Name of Employer:			
Address of Employer:			
Applicant Work Telephone No:		App. Fax No:	
Applicants E:mail Address:		Position Held:	
Starting Date:		Salary:	
Reference Contact Name:		Emp. Tel No:	
Employer Fax No:		Emp. E:mail:	

