

***Application for Tenancy***

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| This form must be completed and signed before any application for tenancy can be formally considered. Applicants are reminded that in addition to the reference information requested herein, they **must** also provide proof of identification.  We charge a ‘Holding Deposit’ equivalent to  1 weeks rent, which is payable to secure the property and due immediately you submit an application.  If your application is successful you will have to pay the first months rent less the 1 weeks holding deposit and a security deposit equivalent to 5 weeks rent before the commencement of a tenancy. This deposit will be held by us as stakeholders unless the Landlords manages the property themselves.  The deposit will not be returned until your tenancy has ended, and only then, provided the obligations of your tenancy have been met in full, the final household bills are paid (we may require proof) and the property is returned in a satisfactory condition. NB: Before the deposit is refunded we will also have to consult with the landlord.  Housing Benefit Tenant: You must obtain a housing benefit claim form, which you must bring with you when you sign the tenancy agreement, should your application prove successful. If your rent is to be paid by housing benefit you will require a guarantor. This must be someone who has a full time job, a bank account and is in a position to cover your rent should the council reject your claim or not pay the rent in full. | **Please provide the following documents for Identification purposes with this application**  **Picture ID** (Passport or Driving Licence)  **Current Address** (Bank statements & Utility Bill)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **FOR OFFICE USE ONLY**  Holding Deposit £ \_\_\_\_\_\_\_ Paid: Please tick box.  Rent: £\_\_\_\_\_\_\_\_\_\_\_\_\_ pcm Deposit: £\_\_\_\_\_\_\_\_\_\_\_\_  Furniture Rental: £ \_\_\_\_\_\_\_\_\_\_ Tenancy length 6 / 12  Pets: YES / NO State what \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Pet Photo received Guarantor: YES / NO    Bond cert: Single / Joint / Company  -----------------------------------------------------------------------------  1st Applicant  ID documents provided: D O B & NI  Employment ref sent: Ref received:  Credit Check: Landlord Ref:    2nd Applicant  ID documents provided: D O B & NI  Employment ref sent: Ref received:  Credit Check: Landlord Ref:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Before you complete the details below, may we  first ask you to confirm where you heard of us and  why you have now contacted us: |  |

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| **Tenancy Start Date:** |  |
| **Name of Applicant(s):** | |
| **Property you wish to apply for:** | |

**1/2019**

**JUNE 2019**

*Application for Tenancy:*

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| ***About You*** | | ***Tenants Details (1st Applicant)*** | | | | | | | | |
| Title: | | | | | Other (please specify Maiden Name): | | | | | |
| Forename: | | | | | Surname: | | | | | |
| Current Address: | | | | | | | | | | |
|  | | | | | Postcode: | | | | | |
| Years at address: Nationality:  (If you have lived at this address for less than 3 years,  please complete the ‘Previous Addresses’ section below). | | | | | | | | | | |
| Home Tel: | | | | | Work Tel: | | | | | |
| Mobile: | | | | | Email: | | | | | |
| DOB: |  | |  |  | NI  No: |  |  |  |  |  |
| Date you require tenancy to start: Agreed Rental Figure: £ pcm  Which tenants name do you wish the Deposit Certificate to be registered in: Single / Joint / Company (please circle) | | | | | | | | | | |

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| ***Current Occupancy Status:*** | Owner  Private Tenant  Council Tenant |  | Living with relatives |  |

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| --- | --- | --- | --- | --- |
| ***Current Marital Status:*** | Married  Divorced | Single | Separated | Widowed  Living together |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Current Employment:*** Employed | | Self Employed | | Retired | Independent Means | | Unemployed | |
| ***Previous Addresses*** |  | |  | | |  | |
| Address: |  | |  | | |  | |
|  |  | | Postcode: | | | Years: | |
| Address: |  | |  | | |  | |
|  |  | | Postcode: | | | Years: | |

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| ***Children*** | Please list anyone under the age of 18 who will be living with you (If over 18 a separate form must be filled in) | | | |
| **Forename** | | **Surname** | **Date of Birth** | **Relationship** |
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| How many people will occupy the property? | | |  | |
| Do you or anyone living with you smoke? | | | Yes / No |  |
| Do you have any pets? |  | | Yes / No | If so number, type and breed:  Please attach/email photograph of pet(s) |
| If you own a car, please give registration number(s) | |  |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Bank*** | |  | | | | | | | | | | | |
| Bank Name: |  | | Account No: |  |  |  |  |  |  |  |  |  |
| Address: |  | |  |  | | | | | | | | |
|  | | | Sort Code: |  | | |  | | |  | | |
| Postcode: | | | Account Name: | | | | | | | | | |
| Telephone No: | | | | | | | | | | | | |

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| ***Other Forms***  ***of Income*** |  | |
| Please list all other forms of income received:  Child benefit Current Housing Benefit  Income Support Unemployment benefit  Maintenance Payments Pension  Disability Allowance Any other income | | Per week |
| Will you be claiming Housing Benefit for this property? **Yes / No** (please delete as applicable)  *All tenants wishing to claim benefit are reminded that submitting a claim is no guarantee that your rent will be paid either in part or full. Should Housing Benefit not pay your full rent (as agreed in your tenancy agreement)* ***you******will have to pay the shortfall****. We require you to appoint a Guarantor who owns their own property. (Please contact us for a Guarantor Application Form)* | | |

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| **Please state the reasons why you are moving:** |
|  |
| **What term are you looking to stay in the property?** |

***Credit History***

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| --- |
| **Have you ever had any CCJ’s**  **or adverse credit history Yes / No** |
| **Yes Amount No**  If **YES,** please list all CCJ’s you Have you ever been in arrears  may have had registered against with your rent?  you whether satisfied or not.  Have you had a mortgage?   |  |  |  |  | | --- | --- | --- | --- | | **Date** | **Amount** | **Company** | If YES have you ever been | |  |  |  | in arrears with your payments | |  |  |  | Do you have an undischarged  Bankruptcy | |  |  |  | Have you ever applied for an |   **Has any applicant ever been** IVA or debt management plan?  **convicted of a criminal offence?Yes / No**    **If so give details:** |

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| --- | --- | --- | --- | --- |
| ***References*** |  | | | |
|  | **Current Landlord/Letting Agents** | | |  |
| Name: |  | | | |
| Address: |  | | | |
|  |  | | | |
| Postcode: |  | Current rent paid: | | |
| Tel No: |  | Mobile No: | | |
| Fax No: |  | Email: | | |
| **Current Employer (1st Applicant)** | | | |  |
| Company Name: |  | | | |
| Contact Name: |  | | | Their Position: |
| Address: |  | | | |
|  |  | | | |
| Postcode: |  | |  | |
| Tel No: |  | | Email: | |
| Gross Salary £per annumPayment day: | | | | |
| **2nd Applican**  Start Date:**E** |  | | Your position held:  Is the position permanent?  **YES / NO** | |
| Will your employment change before your proposed tenancy starts: **YES / NO** | | | | |
| **Self Employed Applicants please fill in the following section:** | | | | |
| Current Business Trading Name: | | | | |
| Annual Income: Date Business Established: | | | | |
| **Accountant** | | | |  |
| Company Name: | **Current LandlordNext Of Kin** | | | |
| Contact name: |  | | | |
| Address: |  | | | |
|  |  | | | |
| Postcode: |  | |  | |
| Tel No: |  | | Mobile No: | |
| Fax No: |  | | Email: | |

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| **Next of Kin/Closest Relative**  **(This will be used for your Post Tenancy Contact)** | | |  |
| Full Name: | **Current LandlordNext Of Kin** | | |
| Address: |  | | |
|  |  | | |
| Postcode: |  | Relationship: | |
| Tel No: |  | \*\*(**Excluding spouse/partner or anyone living with you** )\*\* | |
| Mobile No: |  | Email: | |

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| ***About You*** | | ***Tenants Details (2nd Applicant)*** | | | | | | | | |
| Title: | | | | | Other (please specify Maiden Name): | | | | | |
| Forename: | | | | | Surname: | | | | | |
| Current Address: | | | | | | | | | | |
|  | | | | | Postcode: | | | | | |
| Years at address: Nationality:  (If you have lived at this address for less than 3 years,  please complete the ‘Previous Addresses’ section below). | | | | | | | | | | |
| Home Tel: | | | | | Work Tel: | | | | | |
| Mobile: | | | | | Email: | | | | | |
| DOB: |  | |  |  | NI  No: |  |  |  |  |  |
| Date you require tenancy to start: Agreed Rental Figure: £ pcm | | | | | | | | | | |

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| --- | --- | --- | --- | --- |
| ***Current Occupancy Status:*** | Owner  Private Tenant  Council Tenant |  | Living with relatives |  |

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| --- | --- | --- | --- | --- |
| ***Current Marital Status:*** | Married  Divorced | Single | SSeparated | Widowed  Living together |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Current Employment:*** Employed | | Self Employed | | Retired | Independent Means | | Unemployed | |
| ***Previous Addresses*** |  | |  | | |  | |
| Address: |  | |  | | |  | |
|  |  | | Postcode: | | | Years: | |
| Address: |  | |  | | |  | |
|  |  | | Postcode: | | | Years: | |

***Credit History***

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| --- |
| **Have you ever had any CCJ’s**  **or adverse credit history Yes / No** |
| **Yes Amount No**  If **YES,** please list all CCJ’s you Have you ever been in arrears  may have had registered against with your rent?  you whether satisfied or not.  Have you had a mortgage?   |  |  |  |  | | --- | --- | --- | --- | | **Date** | **Amount** | **Company** | If YES have you ever been | |  |  |  | in arrears with your payments | |  |  |  | Do you have an undischarged  Bankruptcy | |  |  |  | Have you ever applied for an |   **Has any applicant ever been** IVA or debt management plan?  **convicted of a criminal offence?Yes / No**  **If so give details:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***References*** |  | | | |
|  | **Current Landlord/Letting Agents** | | |  |
| Name: |  | | | |
| Address: |  | | | |
|  |  | | | |
| Postcode: |  | Current rent paid: | | |
| Tel No: |  | Mobile No: | | |
| Fax No: |  | Email: | | |
| **Current Employer (2nd Applicant)** | | | |  |
| Company Name: |  | | | |
| Contact Name: |  | | | Their Position: |
| Address: |  | | | |
|  |  | | | |
| Postcode: |  | |  | |
| Tel No: |  | | Email: | |
| Gross Salary £per annumPayment day: | | | | |
| **2nd Applican**  Start Date:**E** |  | | Your position held:  Is the position permanent?  **YES / NO** | |
| Will your employment change before your proposed tenancy starts: **YES / NO** | | | | |
| **Self Employed Applicants please fill in the following section:** | | | | |
| Current Business Trading Name: | | | | |
| Annual Income: Date Business Established: | | | | |
| **Accountant** | | | |  |
| Company Name: | **Current LandlordNext Of Kin** | | | |
| Contact name: |  | | | |
| Address: |  | | | |
|  |  | | | |
| Postcode: |  | |  | |
| Tel No: |  | | Mobile No: | |
| Fax No: |  | | Email: | |

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| --- | --- | --- | --- |
| **Next of Kin/Closest Relative**  **(This will be used for your Post Tenancy Contact)** | | |  |
| Full Name: | **Current LandlordNext Of Kin** | | |
| Address: |  | | |
|  |  | | |
| Postcode: |  | Relationship: | |
| Tel No: |  | \*\*(**Excluding spouse/partner or anyone living with you** )\*\* | |
| Mobile No: |  | Email: | |

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| Additional Information |  |
| Use the rear of the form to provide any additional information you feel we may require: | |

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| ***Data Protection*** |  |

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| In order to meet our legal obligations regarding Right to Rent legislation , to make sure that you are financially suitable for the property, and to prevent and detect fraud, we will share your data with the following :-  **Yes**   1. Credit Reference agencies 2. Agencies conducting Right to Rent checks. 3. Former landlords 4. The landlord of this property 5. Current employer 6. Fraud prevention agencies   **Please place a tick beside each of the above to show you consent to us using your data for this purpose.**  ***If you do not consent (which is your legal right) WE MAY NOT BE ABLE TO GRANT YOU A TENANCY***  The data will be kept for 12 months from the date of application and then destroyed.  **Please read the PRIVACY NOTICE on our website which explains this in more detail.** |

**Declaration.** This section must be completed by the tenant(s)

**WE CANNOT PROCEED WITH THIS APPLICATION IF YOU DO NOT SIGN BELOW.**

I/we hereby confirm that the information provided by me/us is, to the best of my/our knowledge, true and I/we have no objections to the information being verified by whatever means deemed necessary.

I/we understand that the results of the findings will be forwarded to an appointed credit referencing agency and to the appointed agent and/or the landlord and may be accessed again should I/we apply for a tenancy agreement in the future.

I/we agree that Angela Powell Property Management or their agents, may search the files of a credit reference agency which will keep a record of that search. I/We also understand that no details of the search will be given to me/us by the letting agent, but that I/we may request the name and address of the credit reference agency to whom I/we may apply for a copy of any information provided. I/we also confirm that, in the event of my/our defaulting on the rental agreement, any such default may be recorded with the credit reference agency and may affect any future application for credit I/we make.

I/We hereby authorise the above named bank or building society to respond to status enquiries made in respect of this application.

I/we hereby acknowledge that the information, provided above, will be used to assess an application for tenancy. I/We agree to the information provided being stored on computer. I/we confirm that we are in a position to proceed with the tenancy should this application prove successful.

Once the set up fee has been paid, I/we understand that this payment will not be returned to me if I/we do not wish to proceed with the application or I’m/we’re not accepted as a tenant for a different reason.

Signature: Signature:

1st Applicant 2nd Applicant

Print Name Print Name

|  |
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|  |

Dated: Dated:

|  |  |
| --- | --- |
| Additional Information |  |
| Use the part of the form to provide any additional information you feel we may require: | |
|  | |