

LETTING & PROPERTY MANAGEMENT

Beechwood, Hibaldstow, Brigg, North Lincolnshire DN20 9EF

Tel: 01652 654269 Fax: 01652 651281 email: office@angelapowell.co.uk www.angelapowell.co.uk

Please provide the following documents for

Application for Tenancy

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 an 'Setting up Fee' of £120.00 inc VAT per applicant. This fee is to cover the costs of processing your tenancy request and once paid is non-refundable should any of the information provided prove to be false. Each individual tenant must complete an 'Application For Tenancy' and pay the application fee as appropriate. NB: Where a guarantor is required, this may attract an additional charge.

If your application is successful you will have to pay the first months rent and a security deposit before the commencement of a tenancy. This deposit will be held by us as stakeholders. The deposit will not be returned until your tenancy is 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

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:

Tenancy Start Date:

Name of Applicant(s):

Property you wish to apply for:

Current Address	(Bank statements & Utility Bill)
FOR OFFI	CE USE ONLY
Set up Fee Paid:	Please tick box.
Deposit: £	Rent: £ pcm
Furniture Rental: £	Tenancy length 6 / 12
Pets: YES / NO	State what
Guarantor: YES / NO	
Bond cert: Single / Jo	oint / Company
ID documents provided	d: DOB&NI
Employment ref sent:	Ref received:
Credit Check:	Landlord Ref:

Application for Tenancy: Tenants Details (1st Applicant)

About You	About You Tenants Details (1 st Applicant)						
Title:]	Other (please specify N	/laiden Name):			
Forename:	Surname:						
Current Address	S:						
			Postcode:				
Years at addres (If you have lived at please complete the	this address for le		Nationality:				
Home Tel:	, i revious ruures.	see dedicti selew).	Work Tel:				
Mobile:			Email:				
DOB:			NI No:				
Date you require	e tenancy to sta	art:	Agreed Rental Figure	e: £ pcn	n		
Which tenants r	ame do you wi	sh the Deposit Certific	cate to be registered in:	Single / Joint /	Company (please circle)		
Current Occup	ancy Status:	Owner Private	e Tenant	ncil Tenant	Living with relatives		
Current Marita	Status:	Married Divor	ced Single	SSeparated	Widowed Living together		
Current Emplo	yment:	Employed Self E	mployed Retired	Independe	nt Means Unemployed		
Previous Addresses							
Address:							
			Postcode:		Years:		
Address:							
			Postcode:	Years:			
Children	Please list an	yone under the age of 18 w	who will be living with you (If c	over 18 a separate fo	orm must be filled in)		
Forenam	e	Surname	Date of Bir	th	Relationship		
How many peop	ole will occupy t	the property?					
			Yes / No				
	Do you or anyone living with you smoke? Do you have any pets?			If so number	If so number, type and breed:		
If you own a car	please give re	egistration number(s)					

Bank								
Bank Name:	•		Account No:					
Address:								
			Sort Code:					
Postcode:			Account Name:					
Telephone N	lo.							
-								
Other Forms of Income	S							
Please list al	l other forms of inc	ome received:			Per week			
Child benefit			Current Housing Benefit					
						=		
Income Supp	oort		Unemployment benefit					
Maintenance	Payments		Pension					
atoriario								
Disability Allo	owance		Any other income	y other income				
Will you be c	laiming Housing B	enefit for this property?	Yes / No (please delete	e as applicable	e)			
			g a claim is no guarantee that your tenancy agreement) yo					
require you to	appoint a Guarantor	who owns their own property	v. (Please contact us for a Gu	uarantor App	lication Form)			
Please state	the reasons why	you are moving:						
What term a	re you looking to	stay in the property?						
Credit Histor	rv							
	,							
	er had any CCJ's							
or adverse of	credit history	Yes / No						
	se list all CCJ's you		Have you ever been	Yes in arrears	Amount	No		
	nd registered agains satisfied or not.	st	with your rent?					
Date	Amount	Company	Have you had a mort	tgage?				
Date	Amount		If YES have you eve					
			in arrears with your					
			Do you have an und Bankruptcy	lischarged				
			Have you ever appli	ed for an				
	olicant ever been		IVA or debt managen					
	f a criminal offend	;er tes/NO						
If so give de	etails:							

References		
	Current Land	dlord/Letting Agents
Name:		
Address:		
Postcode:		Current rent paid:
Tel No:		Mobile No:
Fax No:		Email:
	Current Empl	loyer (1 st Applicant)
Company Name:		
Contact Name:		Their Position:
Address:		
Postcode:		
Tel No:		Email:
Gross Salary £	per annum	Payment day:
·		
Start Date:		Your position held:
		Is the position permanent? YES / NO
Self Employed Applicant	s please fill in the follo	wing section:
Current Business Trading I	Name:	
Annual Income:	Γ	Date Business Established:
	Ac	countant
Company Name:		
Contact name:		
Address:		
Postcode:		
Tel No:		Mobile No:
Fax No:		Email:
	Ne	ext of Kin/Closest Relative
Full Name:		
Address:		
Postcode:		Relationship:
Tel No:		**(Excluding spouse/partner or anyone living with you)**
Mobile No:		Email:

About You		Te	nants De	etails (2 nd Applicant)		
Title:			Other	(please specify Maiden Name):		
Forename:		Surname:				
Current Addre	ess:					
			Posto	code:		
Years at addr	ess: I at this address for lest the 'Previous Address	ss than 3 years,	Nationa	llity:		
Home Tel:	the Trevious Address	ses section below).	Work	Tel:		
Mobile:			Email	l:		
DOB:			NI No:			
Date you requ	uire tenancy to sta	art:	Agreed	Rental Figure: £ pcm	1	
Current Occi	upancy Status:	Owner Privat	te Tenant	Council Tenant	Living with relatives	
Current Mari	tal Status:	☐ Married ☐ Divor	rced 🗌	Single ☐ SSeparated	Widowed ☐ Living together ☐	
Current Emp	oloyment: E	Employed Self E	Employed	Retired Independer	nt Means Unemployed	
Previous Addresses						
Address:						
			Postcode	9:	Years:	
Address:						
			Postcode	9:	Years:	
Credit History	,					
Have you eve or adverse c	er had any CCJ's redit history	s Yes / No				
may have had	e list all CCJ's you d registered again satisfied or not.			Have you ever been in arrea with your rent?	es Amount No	
Date	Date Amount Company			Have you had a mortgage? If YES have you ever been		
				in arrears with your paymen Do you have an undischarge		
				Bankruptcy Have you ever applied for a		
convicted of	licant ever been a criminal offen			IVA or debt management pla		
If so give det	alls:					

References			
	Current Land	dlord/Letting Agents	
Name:			
Address:			
Postcode:		Current rent paid:	
Tel No:		Mobile No:	
Fax No:		Email:	
	Current Empl	loyer (2 nd Applicant)	
Company Name:			
Contact Name:		Their Position:	
Address:			
Postcode:			
Tel No:		Email:	
Gross Salary £	per annum	Payment day:	
•	<u> </u>	•	
Start Date:		Your position held:	
		Is the position permanent? YES / NO	
		Is the position permanent? YES / NO	
Will your employment char	nge before your proposed	d tenancy starts: YES / NO	
Self Employed Applicant	s please fill in the follow	wing section:	
Current Business Trading	Name:		
Annual Income:	Γ	Date Business Established:	
	AC	countant	
Company Name:			
Contact name:			
Address:			
Postcode:			
Tel No:		Mobile No:	
Fax No:		Email:	
	N	ext of Kin/Closest Relative	
	IN C	ext of Kill/Closest Relative	
Full Name:			
Address:			
Postcode:		Relationship:	
Tel No:		**(Excluding spouse/partner or anyone living with you)	**
Mobile No:		Email:	

		Add	itional Informa	tion			
Use this space to provide any additional information you feel we may require:							
Declaration.	7	This section m	nust be comple	eted by the tenant(s)			
WE CANNOT PROCEED V	<u>VITH THIS APPI</u>	LICATION IF YO	U DO NOT SIGN	BELOW.			
I/we hereby confirm to bjections to the information of the information						ge, true and l	/we have no
I/we understand that appointed agent and/o							
I/we agree that Ange which will keep a recletting agent, but that copy of any informati such default may be re	ord of that se I/we may requon on provided.	earch. I/We a uest the name I/we also cor	lso understande e and address nfirm that, in t	d that no details of the of the credit reference he event of my/our of	ne search will ce agency to defaulting on	l be given to i whom I/we ma the rental agi	me/us by the ay apply for a reement, any
I/We hereby authoris application.	e the above	named bank	or building so	ociety to respond to	status enquiri	es made in re	spect of this
I/we hereby acknowl agree to the informat tenancy should this ap	ion provided	being stored	on computer.				
Once the set up fee proceed with the appli						me if I/we do	o not wish to
Signature: 1 st Applicant				Signature: 2 nd Applicant			
· 							
Print Name				Print Name			
Dated:				Dated:			