Angela Powell

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Bill)

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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 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.

Identification purposes with this application
Picture ID (Passport or Driving Licence)
Current Address (Bank statements & Utility

Please provide the following documents for

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								
1 st Applicant								
ID documents provided: D O B & NI								
Employment ref sent: Ref received:								
Credit Check: Landlord Ref:								
2 nd Applicant								
ID documents provided: D O B & NI								
Employment ref sent: Ref received:								
Credit Check: Landlord Ref:								

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:	
	1/2019

About YouApplication for Tenancy:About YouTenants Details (1st Applicant)									
Title:			O	her (please specify Mai	iden Name):				
Forename:	rename: Surname:								
Current Address	:								
			Po	ostcode:					
Years at address (If you have lived at please complete the	this address for les		Natic	nality:					
Home Tel:			W	ork Tel:					
Mobile:			Er	nail:					
DOB:			NI N	o:					
Date you require	e tenancy to sta	art:	Ag	reed Rental Figure:	£	pcm			
Which tenants n	ame do you wi	sh the Deposit Certific	cate to	be registered in: S	ingle / Jo	int / Company (please circle)			
Current Occup	-	Owner Private	_		il Tenant	Living with relatives			
Current Marital	Status:	Married Divor	ced L	Single Se	eparated]	Widowed 🗌 Living together	r 📋		
Current Employ	y ment: E	Employed 🗌 Self E	mplo	ved 🗌 Retired	Indepe	ndent Means Unemployed			
Previous Addresses									
Address:									
			Postcode: Years:			Years:			
Address:									
			Post	code:		Years:			
Children	Please list any	yone under the age of 18 w	/ho will	be living with you (If ove	er 18 a separ	ate form must be filled in)			
Forenam	e	Surname		Date of Birth		Relationship			
How many peop	le will occupv t	he property?							
Do you or anyor				Yes / No					
Do you have any				Yes / No	If so num	nber, type and breed:			

	103/110	
		Please attach/email photograph of pet(s)
If you own a car, please give registration number(s)		

Bank	

Bank Name:	Account No:						
Address:						1	
	Sort Code:						
Postcode:	Account Name:				1		
Telephone No:							

Other Forms of Income			
Please list all other form	ns of income received:		Per week
Child benefit		Current Housing Benefit	
Income Support		Unemployment benefit	
Maintenance Payments	;	Pension	
Disability Allowance		Any other income	
Will you be claiming Ho	ousing Benefit for this property	Y? Yes / No (please delete as ap	oplicable)

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)

Please state the reasons why you are moving:								
What term are you looking to stay in the property?								
Credit History	V							
Have you eve or adverse c	er had any CCJ's redit history	Yes / No						
			Yes	Amount No				
If YES , please list all CCJ's you may have had registered against you whether satisfied or not.		Have you ever been in arrears with your rent?						
			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 convicted of a criminal offence? Yes / No			IVA or debt management plan?					
If so give det	ails:							

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				
Will your employment change before your proposed tenancy starts: YES / NO						
Will your employment	change before your proposed	d tenancy starts: YES / NO				
	change before your proposed cants please fill in the follo					
	cants please fill in the follo					
Self Employed Appli	cants please fill in the follo					
Self Employed Applie Current Business Trac	cants please fill in the follo	wing section:				
Self Employed Applic Current Business Trac Annual Income:	cants please fill in the follo	wing section: Date Business Established:				
Self Employed Applie Current Business Trac	cants please fill in the follo	wing section: Date Business Established:				
Self Employed Applie Current Business Trac Annual Income: Company Name:	cants please fill in the follo	wing section: Date Business Established:				
Self Employed Applic Current Business Trac Annual Income: Company Name: Contact name:	cants please fill in the follo	wing section: Date Business Established:				
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Self Employed Applie Current Business Trac Annual Income: Company Name: Contact name: Address: Postcode:	cants please fill in the follo	wing section: Date Business Established: Accountant				
Self Employed Applie Current Business Trac Annual Income: Company Name: Contact name: Address: Postcode: Tel No:	cants please fill in the follo	wing section: Date Business Established: Accountant Mobile No: Email:				
Self Employed Applie Current Business Trac Annual Income: Company Name: Contact name: Address: Postcode: Tel No:	cants please fill in the follo	wing section: Date Business Established: Accountant Mobile No:				
Self Employed Applie Current Business Trac Annual Income: Company Name: Contact name: Address: Postcode: Tel No:	cants please fill in the follo	wing section: Date Business Established: Accountant Mobile No: Email: t of Kin/Closest Relative				
Self Employed Applie Current Business Trac Annual Income: Company Name: Contact name: Address: Postcode: Tel No: Fax No:	cants please fill in the follo	wing section: Date Business Established: Accountant Mobile No: Email: t of Kin/Closest Relative				

Postcode:	Relationship:
Tel No:	**(Excluding spouse/partner or anyone living with you)**
Mobile No:	Email:

About You

Tenants Details (2nd Applicant)

Title:			Othe	r (please specify Maiden Name):	
Forename:			Surn	ame:	
Current Address	:				
			Poste	code:	
Years at address (If you have lived at please complete the	this address for les		Nationa	ality:	
Home Tel:			Work	< Tel:	
Mobile:			Ema	il:	
DOB:			NI No:		
Date you require	e tenancy to sta	rt:	Agreed	d Rental Figure: £ pcm	1
Current Occup	ancy Status:	Owner Derivat	te Tenant	Council Tenant	Living with relatives
Current Marital	Status:	Married Divor	ced 🗌	Single SSeparated	Widowed 🗌 Living together 🗌
Current Employ	y ment: E	mployed 🗌 Self E	Employed	Retired Independer	nt Means Unemployed
Previous Addresses					
Address:					
			Postcod	e:	Years:
Address:					
			Postcod	e:	Years:
Credit History					
Have you ever or adverse crec		Yes / No			
If YES, please lis may have had re you whether sati	egistered agains			Have you ever been in arrea with your rent?	ars Amount No
Date	Amount	Company		Have you had a mortgage? If YES have you ever been in arrears with your paymen	ıts
				Do you have an undischarge Bankruptcy	ed
Has any applica convicted of a d If so give detail	criminal offend	ce? Yes/No		Have you ever applied for a IVA or debt management pla	

References

Nomo					
Name:					
Address:					
Postcode:		Current rent paid:	Current rent paid:		
Tel No:		Mobile No:			
Fax No:		Email:			
	Current Em	ployer (2 nd 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		
		le the position pormanent.	1207110		
Will your employment	change before your propos	ed tenancy starts:	YES / NO		
Self Employed Appli	cants please fill in the foll	owing section:			
Current Business Trac	ding Name:				
Annual Income:		Date Business Established:			
		Date Business Established: Accountant			
Annual Income:					
Annual Income: Company Name:					
Annual Income: Company Name: Contact name:					
Annual Income: Company Name: Contact name:					
Annual Income: Company Name: Contact name: Address:					
Annual Income: Company Name: Contact name: Address: Postcode:		Accountant			
Annual Income: Company Name: Contact name: Address: Postcode: Tel No:		Accountant			

(This will be used for your Post Tenancy Contact)					
Full Name:					
Address:					
Postcode:	Relationship:				
Tel No:	**(Excluding spouse/partner or anyone living with you)**				
Mobile No:	Email:				

Additional Information

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

Declaration.

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 :-

- 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.

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: 1 st Applicant	Signature: 2 nd Applicant		
Print Name	Print Name		
Dated:	Dated:		



Additional Information

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