

Tarrants Property Services Ltd

Let Us Let You

4 Bevan Street East, Lowestoft, Suffolk, NR32 2AA
Telephone: 01502-573177 Email: info@letusletyou.co.uk

Tenant Application Form

| Address Of Property | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Rent Per Calendar Month £ | Holding Deposit £ | Total Deposit £ |
| All applications must be competed IN FUL must be the original document, copies cal Once all the above is in place we will give UNABLE TO RECEIVE CASH PAYMENTS INTO We only have 10 days to seek references It is recommended you forewarn any references as soon as possible. | nnot be accepted. you our bank details for transferring TO OUR OFFICE), cease advertising th and carry out credit checks. brees that we will be contacting them | the holding deposit online, (WE ARE e property and process your Application for a reference and to ask them to replace |
| If your referees do not respond swiftly or Holding Deposit. We will recommence ac | | days we are legally obliged to retuild yo |
| First Applicant | rectioning the property at this point. | |
| Full Name: Mr/Mrs/Miss/Ms | | |
| | | |
| Current Address: | | |
| | | Postcode: |
| Landline: | Mobile: | Date of Birth: |
| Email Address: | | |
| How Long Have You Been At This Address: | | |
| Are You Currently Employed Sel | If Employed Unemployed | Other |
| If Other, Please Specify: | | |
| National Insurance No: | Length of employment: | |
| Income: £ PA/PCM/PW Fred | quency paid: | |
| Are You Currently ☐ A Homeowner ☐ | In Rented Accommodation Livin | g At Home Or With Friends |
| Are You: ☐ Single ☐ | Married or Living With A Partner | |
| Please provide names and ages of all people necessary) FULL NAME | who will be living in the property includi | ing children. (use separate sheet if |
| 1 | 3.112 6.1 | |
| 2 | | |
| 3 | | |
| 4 | | |
| | | |



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| Do You, Or Anyone Living With You, Have Any County Court Judgements (CCJ's) Against You: Yes No | | |
|------------------------------------------------------------------------------------------------------------------|--|--|
| Have You, Or Anyone Living With You, Been Made Bankrupt Or Subject To Any Insolvency Arrangements Or Agreements: | | |
| ☐ Yes ☐ No | | |
| Have You, Or Anyone Living With You, Ever Been Evicted From Rented Accommodation: Yes No | | |
| Will You Be Claiming Housing Benefit Or Local Housing Allowance: Yes No | | |
| Do you smoke: | | |
| Do you have any pets, if so please state cat or dog (type) | | |
| Is there anything you need us to consider or be made aware of in relation to this application? Yes/no | | |
| Bank Details: Name of Bank: | | |
| Name on account | | |
| Sort code: Account Number: | | |
| | | |
| Landlord Reference — Is your current Landlord related to you yes/no if yes, in what way | | |
| Name of Landlord: | | |
| Address of Landlord: | | |
| Postcode: Telephone No: | | |
| Name of Contact: Email address: | | |
| Employer Reference — Is your Employer related to you yes/no if yes, in what way | | |
| Name of Employer: | | |
| Address of Employer: | | |
| Address of Employer. | | |
| Postcode: Telephone Number: | | |
| Name of Contact: Email Address: | | |
| | | |
| Accountant Reference (if self employed) Your Company Name: | | |
| Name of Accountant: | | |
| Address of Accountant: | | |
| Postcode: Telephone Number: | | |
| Name of Contact: Email Address: | | |

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Items required:

| Proof of Identity | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Passport: ☐ Yes ☐ No if you do not have a passport than a Driving Licence With Picture: ☐ Yes ☐ no plus a birth certificate or HMRC/DWP letter/certificates | | |
| If not a National of the UK - evidence that you are allowed to rent in the UK is required | | |
| Other: | | |
| Proof Of Current Address (please supply copy of) | | |
| Utility Bill: ☐ Yes ☐ No Bank Statement: ☐ Yes ☐ No Other: ☐ Yes ☐ No Please Specify: | | |
| Proof of Ability to Pay Rent please provide copies of 3 months bank statements and wage slips | | |
| Next of Kin (in case of emergency) Name: | | |
| Address | | |
| Relationship Tel No | | |
| Declaration & Authorisation To Disclose Information | | |
| I confirm that to the best of my knowledge and belief the above details are true and correct at the time of completion. | | |
| I hereby authorise Tarrants Property Services Ltd to seek references from those named above and to make whatever further enquiries and credit checks are deemed necessary to confirm the details I have provided. I understand I can request the names of any credit reference agency used by Tarrants Property Services Ltd so that I may verify the information held about myself, but also that should I default on the Tenancy Agreement I enter into, the information contained in this application may be released to authorised credit recovery agencies. The information disclosed on this form will be shared with the property Landlord. | | |
| Signed: Dated: | | |
| Name In Full: Mr/Mrs/Miss/Ms: | | |
| Current Address In Full: | | |

Postcode: _