

## APPLICATION FORM FOR RENTED ACCOMMODATION

(As part of our normal administration procedure on prospective tenants, all references are taken up and checked. Please note that we will not process an application for more than three unrelated individuals. Families will be processed as one application)

ADDRESS OF PROPERTY APPLIED FOR:		
Please note that the date of	ART DATE://///	will also be your rent payment date
MONTHLY RENT FOR ABO	VE PROPERTY £	
HAVE YOU INCLUDED?:	BANK STATEMENTS ID AND PROOF OF ADDRESS ADMIN FEE GUARANTOR DETAILS (IF REQUIRED)	

PLEASE NOTE THAT IF THIS INFORMATION IS NOT PROVIDED, YOUR APPLICATION WILL NOT BE PROCESSED.

PLEASE NOTE THAT DUE TO PROCESSING COSTS WE ARE UNFORTUNATELY UNABLE TO ACCEPT ANY PAYMENTS BY CREDIT CARD.

Please note that unless we are advised to the contrary, all postal correspondence regarding your application will be sent to the address of Applicant 1.

APPLICANT 1:	FOR OFFICE USE ONLY: Credit Score Check carried out on:/			
	LANDLORD APPROVED AF	PPLICATION	N ON://	
TITLE: (Mr/Mrs/etc.)				
· '				
CURRENT ADDRESS:POSTCODE:	IS THIS P		NTED? YES / NO	
	COMMODATION, PLEASE COULD YOU CONFIRM YOU ARE SELLING YOUR PROPERTY, PLEASE CON			
	DUR PREVIOUS ADDRESS AND PERIOD OF OCCUPA			
FROM(MONTH / YEAR)	TO (MONTH / YEAR)		L/L APPROVED	
E-MAIL:	DO YOU HAVE ANY CRIMINAL CONVICTIONS? IF YES, PLEASE STATE	YES/NO		
WORK TEL NO:	DO YOU HAVE ANY COUNTY COURT			
MOBILE TEL NO:	JUDGEMENTS, INDIVIDUAL VOLUNTARY	YES/NO		
	ARRANGEMENTS OR ADVERSE CREDIT?			
PASSPORT NUMBER:	IF YES, PLEASE PROVIDE FURTHER DETAILS			
DATE OF ISSUE:	AT THE END OF THIS SECTION			
PLACE OF ISSUE:			-	
HOW LONG HAVE YOU LIVED IN THE UK? SINCE BIRTH □				
IN NOT SINCE BIRTH, PLEASE GIVE DATE OF				
COMMENCEMENT OF RESIDENCY:				
DATE OF BIRTH:				
DO YOU REQUIRE HOUSING BENEFIT?	YES/NO			
DO YOU HAVE PETS?	YES/NO			
IF YES PLEASE LIST				

DO YOU SMOKE?	YES/NO		
OCCUPATION:	delete as necessary) ED(delete as		
CURRENT EMPLOYER REFERENCE (IF SELF EMPLOYED PLEASE PROVIDE YOUR ACCOUNTANTS DETAILS)		CURRENT LANDLORD REFERENCE	* PLEASE INDICATE IF YOU OWN YOUR PROPERTY AND ARE CURRENTLY IN THE PROCESS OF SELLING
NAME:		NAME:	
ADDRESS (include Company Name): POSTCODE: EMAIL:		ADDRESS:  POSTCODE: EMAIL:	
PHONE NUMBER:		PHONE NUMBER:	
CHILDREN  Please list the names in full anwill be living at the property	d the ages of all individuals who will who is over the age of 18 must be	be residing at the property, <b>who</b> a <b>listed as an applicant</b> :	are under 18 years of age – anyone who
NAME:	AGE: AGE: AGE: AGE:	······································	Years / Months) Years / Months)

PLEASE PROVIDE BELOW ANY FURTHER DETAILS WHICH MAY BE RELEVANT TO APPLICANT 1:

Please note that unless we are advised to the contrary, all postal correspondence regarding your application will be sent to the address of Applicant 1.

APPLICANT 2:		FOR OFFICE USE ONLY: Credit Score Check carried out on:/				
			LANDLORD APPROVED A	PPLICATION	N ON://	
TITLE: (Mr/Mrs/etc.)						
FORENAME(S):						
SURNAME:						
CURRENT ADDRESS:						
POSTCODE:			IS THIS P	ROPERTY REI	NTED? YES / NO	
		•	ASE COULD YOU CONFIRM YOUR CIR IG YOUR PROPERTY, PLEASE CONFII			
			YEARSMONTHS S ADDRESS AND PERIOD OF OCCUPA	ATION		
FROM	(MONTH / YEAR)	TO	(MONTH / YEAR)			
E MANU.		DO VOLLI	ANT ANN ORIMINAL CONVICTIONICS	\/E0/N0	L/L APPROVED	
E-MAIL:			AVE ANY CRIMINAL CONVICTIONS?	YES/NO		
		,	EASE STATE		_	
WORK TEL NO:			AVE ANY COUNTY COURT			
MOBILE TEL NO:			NTS, INDIVIDUAL VOLUNTARY	YES/NO		
			MENTS OR ADVERSE CREDIT?			
PASSPORT NUMBER:		IF YES, PL	EASE PROVIDE FURTHER DETAILS			
DATE OF ISSUE:		AT THE EN	ND OF THIS SECTION			
PLACE OF ISSUE:						
HOW LONG HAVE YOU LI	VED IN THE UK?					
SINCE BIRTH						
IN NOT SINCE BIRTH, PLE	EASE GIVE DATE OF					
COMMENCEMENT OF RE	SIDENCY:					
DATE OF BIRTH:						
DO YOU REQUIRE HOUSI	NG BENEFIT?	YES/NO				
DO YOU HAVE PETS?		YES/NO				
IF YES PLEASE LIST						
DO YOU SMOKE?		YES/NO			_	

OCCUPATION:			
FULL TIME / PART TIME (			
EMPLOYED / SELF EMPLO			
necessary)	(		
LENGTH OF TIME AT THIS			
EMPLOYER			
CURRENT EMPLOYER		CURRENT LANDLORD	* PLEASE INDICATE IF YOU OWN
REFERENCE		REFERENCE	YOUR PROPERTY AND ARE
(IF SELF EMPLOYED			CURRENTLY IN THE PROCESS OF
PLEASE PROVIDE YOUR			SELLING
ACCOUNTANTS DETAILS)			
NAME:		. NAME:	
TVAIVIE.		. IVAIVIE.	
ADDRESS (include		. ADDRESS:	
Company Name):			
POSTCODE:		POSTCODE:	
EMAIL:		EMAIL:	
PHONE NUMBER:		PHONE NUMBER:	
CHILDREN			
Please list the names in full ar will be living at the property	nd the ages of all individuals who wil who is over the age of 18 must be	l be residing at the property, whe listed as an applicant:	o are under 18 years of age – anyone who
NAME:	AGE:		. (Years / Months)
NAME:	AGE:		. (Years / Months)
NAME:	AGE:		. (Years / Months)
NAME:	AGE:		. (Years / Months)

PLEASE PROVIDE BELOW ANY FURTHER DETAILS WHICH MAY BE RELEVANT TO APPLICANT 2:

Please note that unless we are advised to the contrary, all postal correspondence regarding your application will be sent to the address of Applicant 1.

APPLICANT 3:		FOR OFFICE USE ONLY: Credit Score Check carried out on:/			
			LANDLORD APPROVED AI	PPLICATION	N ON://
TITLE: (Mr/Mrs/etc.)					
FORENAME(S):					
SURNAME:					
CURRENT ADDRESS:					
POSTCODE:			IS THIS P	ROPERTY REN	NTED? YES / NO
		•	EASE COULD YOU CONFIRM YOUR CIR ING YOUR PROPERTY, PLEASE CONFIF		
			YEARSMONTHS US ADDRESS AND PERIOD OF OCCUPA	TION	
FROM	(MONTH / YEAR)	TO	(MONTH / YEAR)		. // ADDDOV/50
E-MAIL:		DO VOLL	HAVE ANY CRIMINAL CONVICTIONS?	YES/NO	L/L APPROVED
E-IVIAIL				TES/NO	
WORK TEL NO.		•	PLEASE STATE		
WORK TEL NO:			HAVE ANY COUNTY COURT	\/F0/N0	
MOBILE TEL NO:			IENTS, INDIVIDUAL VOLUNTARY	YES/NO	
D. 4.00D.0.D.T. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			GEMENTS OR ADVERSE CREDIT?		
PASSPORT NUMBER:		•	PLEASE PROVIDE FURTHER DETAILS		
		ALIHE	END OF THIS SECTION		
PLACE OF ISSUE:					
HOW LONG HAVE YOU LIV	VED IN THE UK?				
SINCE BIRTH					
IN NOT SINCE BIRTH, PLE					
COMMENCEMENT OF RES	SIDENCY:				
DATE OF BIRTH:					
DO YOU REQUIRE HOUSI	NG BENEFIT?	YES/NO			
DO YOU HAVE PETS?		YES/NO			
IF YES PLEASE LIST					
DO YOU SMOKE?		YES/NO			_

OCCUPATION:			
FULL TIME / PART TIME (			
EMPLOYED / SELF EMPLO			
necessary)	(		
LENGTH OF TIME AT THIS			
EMPLOYER			
CURRENT EMPLOYER		CURRENT LANDLORD	* PLEASE INDICATE IF YOU OWN
REFERENCE		REFERENCE	YOUR PROPERTY AND ARE
(IF SELF EMPLOYED			CURRENTLY IN THE PROCESS OF
PLEASE PROVIDE YOUR			SELLING
ACCOUNTANTS DETAILS)			
NAME:		NAME:	
ADDRESS (include		ADDRESS:	
Company Name):			
POSTCODE:		POSTCODE:	
EMAIL:		EMAIL:	
PHONE NUMBER:		PHONE NUMBER:	
CHILDREN			
Please list the names in full ar will be living at the property	nd the ages of all individuals who wi who is over the age of 18 must b	Il be residing at the property, whe listed as an applicant:	o are under 18 years of age – anyone who
NAME:	AGE	<u> </u>	. (Years / Months)
NAME:	AGE	·	. (Years / Months)
NAME:	AGE	·	. (Years / Months)
NAME:	AGE	i:	. (Years / Months)

PLEASE PROVIDE BELOW ANY FURTHER DETAILS WHICH MAY BE RELEVANT TO APPLICANT 3:

GUARANTOR: (If requi	red)	FOR OFFICE USE ONLY: Credit Score Check carried out on:/
LANDLORD APPROVED		
TITLE: (Mr/Mrs/etc.) FORENAME(S): SURNAME: CURRENT ADDRESS: POSTCODE:		
LENGTH OF TIME AT CURRE HOME TEL NO:		(YEARS/MONTHS)
GUARANTOR MUST SIGN TO UNDERGO OUR AFTER TO UNDERGO OUR AFTER TO UNDERGO OUR AFTER THE TO UNDERGO OUR TO PROVIDE PURPOSES. I UNDERSTANDE FINANCIAL RECORDS WILL COMPLETE.	GN BELOW TO CON FORDABILITY CHECON FOR ANDREW GRANGER & ANDREW GRANGER & THAT THE APPLICATION BE RETURNED / DESTR	ER & CO TO CARRY OUT A CREDIT CHECK AND ANY OTHER REFERENCES AS IT INTERESTED PARTIES.  CO WITH 3 MONTH'S CURRENT BANK STATEMENTS FOR REFERENCING ON CANNOT BE PROCESSED WITHOUT THIS INFORMATION AND THAT ANY OYED BY ANDREW GRANGER & CO AFTER THE REFERENCING PROCESS IS
*Signed :GUARANTOR (if applicable)		Dated :

## PLEASE READ THE INFORMATION BELOW AND SIGN TO CONFIRM YOUR UNDERSTANDING. PLEASE NOTE THAT WE CANNOT PROCESS YOUR APPLICATION WITHOUT YOUR SIGNED CONSENT TO OUR TERMS AND CONDITIONS.

PLEASE NOTE THAT ALL PERSONS AGED 18 YEARS AND OVER WILL BE NAMED ON THE TENANCY AGREEMENT. PLEASE COMPLETE THIS FORM IN AS MUCH DETAIL AS POSSIBLE SO THAT WE HAVE SUFFICIENT INFORMATION TO CONSIDER YOUR APPLICATION ON BEHALF OF OUR CLIENT. PLEASE RETURN THE FORM TO THE LETTINGS DEPARTMENT AT THE ADDRESS LISTED ABOVE.

WE WILL CHARGE AN ADMINISTRATION FEE OF £234.00 INCLUSIVE OF VAT (£195.00 + VAT), IF A SECOND PERSON INTENDS TO RESIDE AT THE PROPERTY THEN A FURTHER APPLICATION FEE OF £60.00 INCLUSIVE OF VAT (£50.00 + VAT) WILL BE REQUIRED. IF THE LANDLORD ALLOWS A NEW TENANT TO MOVE INTO THE PROPERTY AFTER THE TENANCY HAS BEGUN, A SEPARATE APPLICATION FEE OF £117.00 INCLUSIVE OF VAT (£97.50 + VAT) WILL BE REQUIRED. PLEASE ENCLOSE YOUR PAYMENT WITH THIS APPLICATION FORM. AN APPLICATION WILL NOT BE PROCESSED UNLESS THE FEE IS RECEIVED. SHOULD ANY APPLICATION BE ACCEPTED AND REQUIRE A GUARANTOR, THEN AN ADDITIONAL FEE OF £60.00 INCLUSIVE OF VAT (£50.00 + VAT) WILL BE REQUIRED.

\* PLEASE NOTE THAT SHOULD YOUR APPLICATION NOT BE ACCEPTED THEN ANY IDENTIFICATION AND YOUR ADMINISTRATION FEES WILL BE RETURNED IF YOUR APPLICATION IS ACCEPTED AND SUBSEQUENTLY DECLINED DUE TO UNSATISFACTORY REFERENCING (INCLUDING ANY UNDISCLOSED COUNTY COURT JUDGEMENTS) THEN THE ADMINISTRATION FEE WILL NOT BE REFUNDED

I CONFIRM THAT I HAVE READ THE DETAILS CONTAINED IN THE TENANT INFORMATION SHEET.

I HEREBY GIVE PERMISSION FOR ANDREW GRANGER & CO TO CARRY OUT A CREDIT CHECK AND ANY OTHER REFERENCES AS REQUIRED AND SHARE THIS INFORMATION WITH ANY INTERESTED PARTIES.

IN PARTICULAR, ANDREW GRANGER & CO HAVE TEAMED UP WITH TENANT SHOP LIMITED TO STREAMLINE YOUR REGISTRATION PROCESS. PLEASE READ AND COMPLETE THE ATTACHED REGISTRATION FORM AND RETURN IT TO US ALONG WITH YOUR APPLICATION FORM.

TENANT SHOP LIMITED IS FULLY COMPLIANT WITH THE DATA PROTECTION ACT 1998 AND A REGISTERED MEMBER OF THE INFORMATION COMMISSIONERS OFFICE WITH REGISTRATION NUMBER Z305733X AND WILL ONLY USE YOUR INFORMATION FOR THE PURPOSES SET OUT ABOVE. PLEASE NOTE THAT ANDREW GRANGER & CO MAY RECEIVE A COMMISSION IN RESPECT OF ANY SUCCESSFUL REFERRAL OR INTRODUCTION.

I AM HAPPY FOR TENANT SHOP TO CONTACT ME AS SPECIFIED ABOVE.

*Signed :	APPLICANT 1	Dated :
*Signed :	APPLICANT 2	Dated :
*Signed :	APPLICANT 3	Dated :

PLEASE REFER TO THE CHECKLIST ON PAGE 1 AND ENSURE YOU HAVE ENCLOSED ALL OF THE APPROPRIATE INFORMATION

For Office Use Only:	
*Signed :AGENT: I HEREBY CONFIRM THAT I HAVE SEEN AND	
AGENT: I HEREBY CONFIRM THAT I HAVE SEEN AND	VERIFIED THE APPLICANT(S) IDENTIFICATION
Credit Referencing Score:	
Right to Rent Status:	
Application Approved by:	
Date:	

tp/planning/DfG/application form for rented accommodation August 2017