


TENANT APPLICATION FORM	Letting Agent: Greene & Co / West Hampstead			
	Telephone: 020 7328 3393			Fax: 020 7372 7950
	Negotiator:	No. Renting this Property:		
	Property Address:			

SEARCH TYPE? [you MUST tick ONE box - select carefully to avoid being overcharged]

STANDARD [Electoral Roll & Credit History check only]

DETAILED [FULL check which incorporates the above Standard Search]

To be completed by the TENANT

Title:	First Name:	Surname:	
Maiden or Previous Surname(s):			Date of Birth:
Marital Status:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	National Ins./SS No:
Daytime Contact Number:		Email:	

I wish to apply to rent the above property for a period of _____ months, commencing on _____ / _____ / _____.

I agree that the total rent for the property is £_____ per calendar month and that my share is £_____ pcm.

I declare that I am not bankrupt, am not paying off any previous rental debt or have any CCJ's above £100.00.

I agree to allow the letting agent/landlord to photocopy this form for their records.

I accept that no explanation can be given by Taylor Trent should I not be approved.

PRINT NAME: _____ SIGNATURE: _____

CURRENT ADDRESS:

Postcode:	Period here:	Years	Months
Current Status: I Rent <input type="checkbox"/> I Own <input type="checkbox"/> With Friends <input type="checkbox"/> With Parents <input type="checkbox"/> Council <input type="checkbox"/> Company Accommodation <input type="checkbox"/>			
Rent Paid (if applicable): £ _____ per month	Have you given the required notice? (circle one) Yes / No		
Rent is paid directly to whom? Letting Agent Name:	OR Landlord:		
Number:	Fax:	Email:	

PREVIOUS ADDRESS(ES) Where have you been residing for the past 3 years? Continue on a separate sheet if necessary

Postcode:	Period here:	Years	Months
Previous Status: Rented <input type="checkbox"/> Owned <input type="checkbox"/> With Friends <input type="checkbox"/> With Parents <input type="checkbox"/> Council <input type="checkbox"/> Company Acc. <input type="checkbox"/>			
Rent Paid (if applicable): £ _____ per month	Have you given the required notice? (circle one) Yes / No		
Rent was paid directly to whom? Letting Agent Name:	OR Landlord:		
Number:	Fax:	Email:	

If you are completing a STANDARD application ONLY, kindly proceed to the Declaration. Thank You.

Next of Kin (excluding spouse)	Name:	Place of Work:	
	Tel. Home:	Tel. Work:	Relationship:

EMPLOYMENT STATUS (tick one)	Employed <input type="checkbox"/>	Self-Employed <input type="checkbox"/>	Unemployed <input type="checkbox"/>	Retired <input type="checkbox"/>	Student <input type="checkbox"/>
	On Contract through an Agency <input type="checkbox"/>		Independent Means (proof required) <input type="checkbox"/>		Other <input type="checkbox"/>

****PLEASE notify ALL your referees that enquiries will be made to verify the information provided****

Job Title:		Annual Salary: £	
Start Date (day, month & year):		Permanent? Yes <input type="checkbox"/> No <input type="checkbox"/>	Full-time <input type="checkbox"/> OR Part-time <input type="checkbox"/>
Employee/Payroll No:		If SELF-EMPLOYED, your company name:	
(Please TICK) Employer <input type="checkbox"/> Recruitment Agency <input type="checkbox"/> Accountancy Firm <input type="checkbox"/> NAME:			
Who is <u>authorised</u> to verify your employment details? Name:			
Contact's Position:		Contact's Work Email:	
Contact's Number (NO MOBILES):		Fax:	

Please complete the next section if:

- you have been in your current position (or self-employed) for less than 6 months, and you were previously employed full-time with gap of no more than 4 months in between. Or,
- you are starting a new full-time position within the next 4 months.

Previous/Future Job Title:		Annual Salary: £	
Start Date (month & year):		End Date (month & year):	
(Please TICK) Employer <input type="checkbox"/> Recruitment Agency <input type="checkbox"/> Accountancy Firm <input type="checkbox"/> NAME:			
Who is <u>authorised</u> to verify the above details? Name & Position:			
Number:	Fax:	Email:	

I am SELF-EMPLOYED WITHOUT an Accountant and will fax 2 years of my most recent accounts with this form

Character Referee (<u>NOT</u> a relative or anyone else named on this form)		
Name:		Email:
Tel:	Fax:	Employer:

Bank / Building Society Name: (for letting agent/landlord information ONLY):		
Address:		Postcode:
Sort Code	Account Number	

I hereby confirm that the information provided by me is to the best of my knowledge and belief, true. I have no objections to the information being verified by whatever means are deemed necessary. I understand that the results of the findings will be forwarded to the appointed letting agent/landlord. I agree that Taylor Trent or their agents will search the files of a credit reference agency which will keep a record of that search. I also understand that no details of the search will be given to me by the letting agent/landlord. But that I may request the name and address of the credit agency to whom I may apply for a copy of any information provided.

I hereby authorise the above named employer(s) to disclose my salary details & for all other referees to respond to enquiries made by Taylor Trent in respect of this application.

Please Note:All information will be treated as strictly confidential. Data Protection Reg. No. Z5453455. Date: _____

PRINT NAME: _____ SIGNATURE: _____