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Documentation Checklist

Documentation required	Please tick
Complete application form	
Deposit	
First month's rent	
Reference fee	
Copy of identification (passport/licence)	
Copy of recent utility bill (gas, electric or telephone) or bank statement	
with current address	
Signed guarantee form (if applicable)	
Signed guarantee identification (if applicable)	
To speed up your application process	
Employer reference	
Current landlord reference	

PRIVATE & CONFIDENTIAL APPLICATION TO RENT A RESIDENTIAL PROPERTY (SUBJECT TO TENANCY AND REFERENCES)

Subject Property					
Address of rental property:					
Number of tenants:					
Proposed move-in date:					
Applicant Information					
Name:	NI no:				
Passport no:	Licence no:				
Date of birth:	Phone:				

Single:	ingle: Married: Divorced: Living with partner:												
Current a	Current address: Email:												
City:					County: Po			Post	code:	code:			
Own: T	Tenant:	Lodger: F	riends/F	amily:	mily: Monthly payment or rent:				How long?				
Reason fo	or leaving	:											
Previous	address:												
City:				County:					Post	code:			
Reason fo	or leaving	:		Monthly	payment	or rent:					How long?		
Smoker?		P	ets?		Bankrupt	tcy?		Evictions?			Cour	t decree?	
County co	ourt judgı	ments?										_	
If yes to	any of the	e above, plea	se give	details be	elow?								
Emplo	ymen	t Inform	ation										
Occupation	on:												
Current e	employer:						Name of N	Manager:					
Employer	r address:									How long	j ?		
Phone:				E	-mail:					Fax:			
City:				County:						Post cod	e:		
Position:				Hourly	Salary	(Please ci	rcle)		Annı	ual income	e:		
Start date	e:												
Full-time:	:	Part-time:		Contracto	or:	Self-emplo	oyed:	Retired:		Stude	nt:	Unemployed:	
If you	are se	elf-emplo	oyed,	please	e supp	ly us wi	ith you	ır accou	ınta	nt's de	etails		
Name:													
Address:												_	
Telephon	ie:												
Detail	s of P	revious L	.andl	ord/Ma	anagin	g Agen	t						
Name:													
Address:									Phor	ne:			
Address of rental property:													
Dates of tenancy with this landlord:													
Emergency Contact													
Name of a person not residing with you:													
Address:												-	
City:			Count	y:			Post code	e:			Phone:		
Relations	ship:		•			•				•			
Co-applicant Information													
Name:													
Date of b	oirth:			N	II no:					Phone:			
Current a	address:											-	
City:				County:						Post	code:	-	
Own	Rent	(Please circl	e)	Monthly payment or rent:				How long?					
Previous address:													
City:				County:				Post code:					
Owned	Rented	(Please circ	le)	Monthly payment or rent:			How	How long?					
Co-applicant Employment Information													
Current employer:													
Employer										Ном	long?		
Phone:				E	-mail:				F	ax:			

City:	County:		Post code:				
Position:	Hourly Salary	(Please circle)	Annual income:				
Bank Details							
Bank name:							
Bank address:							
Bank account name:		-					
Account no. :		Sort code:					
Children Sharing Property		T					
How many children will be living with you?		Are you in ownersh	ip of a Life/Critical Illness Policy? Yes/No				
Please state their ages?							
Agreed rental: £							
Length of tenancy required (m	ionths):						
Further requirements:							
the end of the tenancy and then we required to compensate the landstenants part.							
Costs upon taking tenancy of	a property:						
First Month's rent in advance		£					
Rental deposit (one month's rent)		£					
Referencing fee (per application)		£40.00					
Paid on application subn	nission						
Total	-	£					
N.B. The deposit will be held in tenancy a £50.00 arrangement will be deducted from this deposit will be deducted from this deposit will be deducted from the deposit will be held in tenancy a £50.00 arrangement will be deducted from the deposit will be held in tenancy a £50.00 arrangement will be deducted from this deposit will be deducted from the deposit will be held in tenancy a £50.00 arrangement will be deducted from this deposit will be deducted from this deposit will be deducted from this deposit will be deducted from the deducte	t fee along wit oosit. ant ave given is corre	h costs for loss o ect, I agree to the	of rent/advertising expenses				
the referees stated. I understand	the terms set ou	t as above.					
Signature		Date					