

**FOR AGENTS USE ONLY**

2 Yrs Utility Bills attached/viewed  3 Yrs Utility Bills attached/viewed   
Agency No. ....  
Agent .....  
Contact .....  
Tel.....Fax.....  
Email.....

**LEASEGUARD**  
SPECIALIST INSURANCE AND SERVICES  
FOR LET PROPERTY



**TENANT  
APPLICATION**

Full Tenant Reference   
Credit Search Only

**Please complete BOTH SIDES of form fully in INK and in BLOCK CAPITALS  
or this may cause delays in processing your application**

State full name (including **all** first names) of this applicant and all other occupiers of the property.  
*(If married couple ensure both parties sign form)*

1. First Names.....  
(Mr/Mrs/Miss/Ms)  
Surname .....  
D.O.B. ....

2. First Names.....  
(Mr/Mrs/Miss/Ms)  
Surname .....  
D.O.B. ....

3. First Names.....  
(Mr/Mrs/Miss/Ms)  
Surname .....  
D.O.B. ....

4. First Names.....  
(Mr/Mrs/Miss/Ms)  
Surname .....  
D.O.B. ....

Maiden Name .....

Marital Status.....

Child 1 Name ..... Age .....

Child 2 Name ..... Age .....

Property Address applied for .....

..... Post Code .....

Total Rent per month for the Property £.....

Total Rent per month for the Applicant £.....

Rental Period.....months No. of Bedrooms.....

Are you to pay the rent through your own means or housing benefit? Own Means  Benefit

Is this a Joint Tenancy Application? Yes  No

Proposed Tenancy Commencement Date .....

**Applicants will be jointly and severally liable for the Total Rent per month for the property.**

Are you currently: Owner  Council Tenant  Private Tenant

With Parents  Other  (please specify) .....

Current Address.....  
..... Post Code .....

Period at Address .....years .....months  
Tel ..... Evenings.....  
Email..... Mobile.....

Please provide previous addresses and dates of residency for the last 3 years *(please attach a separate sheet if required)*.  
Previous Address.....  
..... Post Code .....

Period at Address .....years .....months

**YOUR EMPLOYMENT DURING THIS TENANCY**  
**(Please notify your employer/accountant contact that enquiries will be made to verify this information.)**

Employer/Accountant Name .....

Address.....  
.....

Employer/Accountant Contact Tel.....  
Employer/Accountant Contact Fax .....

Employer/Accountant Contact Email .....

Position Held.....

Gross Monthly Salary £..... Start Date.....

Employer/Accountant Contact Name & Position .....

.....

National Insurance Number .....

Payroll Number .....

**SECONDARY EMPLOYMENT DETAILS**

Employer/Accountant Name .....

Address.....  
.....

Employer/Accountant Contact Tel.....  
Employer/Accountant Contact Fax .....

Employer/Accountant Contact Email .....

Position Held.....

Gross Monthly Salary £..... Start Date.....

Employer/Accountant Contact Name & Position .....

Are you aware of any matters that may cause your employment/income to change in the near future? Yes  No   
*(If YES, please give details on a separate sheet)*

**If self-employed, provide 3 years accounts**

**PAST EMPLOYMENT DETAILS** - If you have been in your current employment for less than 3 years, please provide details of previous employment including commencement and leaving dates. *(Please attach a separate sheet if required).*

Position Held and Salary  £  :  p.m. Start Date    Leaving Date

Company

Address   
 Post Code

Contact Name  and their Position

Daytime Tel. No.  Fax No.

Email

**DO YOU HAVE ANY ADDITIONAL SOURCE OF INCOME? - Proof must be provided**

Pension £  :  p/a Investment Income £  :  p/a Other £  :  p/week

Please Specify

**EXISTING/PREVIOUS LETTING AGENT/LANDLORD if applicable.** *(Please give authority to your Agent to pass an opinion on you).*

Name

Address   
 Post Code

Daytime Tel. No.  Fax No.

Email  Previous Rent Paid £  :

Do any of the named applicants or proposed Tenants for this property have any pets? Yes  No  Type  Smokers? Yes  No

Are you a Vehicle owner? Yes  No  Vehicle Reg. No.  Drivers Licence No.

**BANK/BUILDING SOCIETY DETAILS (CURRENT ACCOUNT ONLY)**

Bank Name

Address   
 Post Code

Name of Account Holder

A/c No.  Sort Code  Tel. No.

How long have you held this bank account?

Do you have a Credit Card? Yes  No  If so, for how long?

Are you aware of any previous CCJ/or Bankruptcy? Yes  No  If YES, please give details below:

I/We hereby authorise Leaseguard Ltd to make any enquiries considered necessary to substantiate information supplied on this application. I/We authorise you or your assessment company to disclose any information about me/us and/or my company to any credit reference agency and/or any other tenancy database who may retain a record of such a search. The information is used to help me make credit, insurance, rental and property decisions and occasionally for fraud prevention or debtor tracing. Credit searches and other information which is provided to us and/or credit reference agencies, about you and those with whom you are linked financially and have associated records with, may be used by Leaseguard and other companies if credit decisions are made about you or other members of your household. I give my permission to take up all necessary references and these may be shown to a Landlord and/or their agent. The details you provide will be held by LEASEGUARD and may be used to keep you up to date on our products and services and those of other organisations we believe will be of interest to you. If you prefer not to receive this information, please tick this box.

**We regret that no explanation will be given should we be unable to accept you as a tenant**  
I confirm that the information supplied is to the best of my knowledge and belief, true.

Signature of Applicant 1 ..... Date .....

Signature of Applicant 2 ..... Date .....

*(Only applicable if married couple)*