



INDIVIDUAL APPLICATION

AGENT NAME: Trinity Property **AGENT CODE:** 100002

SECTION 1 – TO BE COMPLETED BY THE LETTING AGENT

Service required	Reference:	Express: <input type="checkbox"/>	Ultimate: <input type="checkbox"/>
	Rent Guarantee:	6 months: <input type="checkbox"/>	12 months: <input type="checkbox"/>
Rental property address	Landlord name:	.....
	Address line 1:	.....
	Address line 2:	.....
	Address line 3:	.....
	Postcode:	.....
	Initial tenancy term:	.....
Tenancy details	Proposed tenancy start date:	.....
	Is rent being paid in advance?	.....
	Total rental per calendar month:	(Yes / No)	
	Initial tenancy term	.....

SECTION 2 – TENANTS PERSONAL DETAILS

Personal Details	Title:	.....		
	Forename(s):	.....		
	Surname:	.....		
	Date of birth:	.....		
	Contact details:	Mobile number		
		Home number		
E-mail address		.....		

Employment status	Please select:	Employed	Self employed	Retired	Independent Means
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Present address

Address line 1:

Address line 2:

Address line 3:

Postcode:

Time at this address: yrsmths

Status: Homeowner Renting Living with Parents

Other:

Previous addresses (if you have lived at the above address for less than 3 years)

Previous address 1:

Postcode Time at this address:yrsmths

Previous address 2:

Postcode Time at this address:yrsmths

Adverse credit

CCJ's / Court decrees/ IVA's: Monetary value: £

If yes how many:

SECTION 3 – PREVIOUS LANDLORD / LETTING AGENT

Previous landlord / Letting agent details

Name previous landlord / Letting agent:

Address line 1:

Address line 2:

Address line 3:

Postcode:

Telephone number: Mobile number:

Fax number:

Email:

Tenancy start date: Current monthly rent:

SECTION 4 – EMPLOYMENT DETAILS

Current employment details

Name of company:

Address line 1:

Address line 2:

Address line 3:

Postcode:

Position held:

Name of your direct superior:

Telephone number: Fax number:

Email:

Salary: £..... NI number:

Payroll number: Start date:

Full time/ Part time Is the position likely to change? Yes / No

Previous employment details (if you have been in your current employment for less than 6 months)

Name of company:

Address line 1:

Address line 2:

Address line 3:

Postcode:

Position held:

Name of your superior:

Telephone number: Fax number:

Email:

Salary: NI number:

Start date: End date:

Full time/ Part time Is the position likely to change? Yes / No

Future employment details (if current position is due to change in the near future)

Name of company:

Address line 1:

Address line 2:

Address line 3:

Postcode:

Position you will hold:

Superior name:

Telephone number: Fax number:

Email:

Salary: Start date:

Full time/ Part time Is the position likely to change? Yes / No



Other income details
(Example: Tax Credits, savings, investments) which you would like to be taken into consideration

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SECTION 5 – IF SELF EMPLOYED/ SOLE TRADER/ RETIRED PLEASE GIVE DETAILS OF ACCOUNTANT / PENSION PROVIDER

Accountant details

Name of company:
Address line 1:
Address line 2:
Address line 3:
Postcode:
Position:
Contact name:
Telephone number: Fax number:
Email:
Annual income: NI number:
Payroll number: Start date:

Do you have any pets? Yes / No

If so, please details type and number:

Do you Smoke? Yes / No

Do you have any children? Yes / No

If so how many?



SECTION 6 – DECLARATION

I hereby certify that the information provided is true and accurate and give permission for this information to be verified by third parties and disclosed as detailed above for the purpose of:

- Performing a credit search by a third party agency
- Contacting my current, previous employers and referees to confirm the details provided
- Fraud prevention, credit assessment and insurance decisions

I understand that the results of these searches will be provided to the Letting Agent and accessed again in the event of a default in my rental payments.

Declaration

I understand that I can request the details of any credit reference agencies used so that I can verify with them the information provided.

I understand that if I default on my tenancy obligations, this information may be released to authorised debt recovery agencies and could affect any future applications I make for tenancies, credit and insurance.

I understand that providing false information may lead to early termination of any subsequent tenancy agreement.

I am happy for Let Alliance to contact me in respect to this application if required.

I have read and agree to be bound by the above terms.

Signature: Date:

Print name:

PLEASE RETURN THIS APPLICATION FORM TO TRINITY PROPERTY

**SHOULD YOU HAVE ANY QUESTIONS REGARDING YOUR APPLICATION
PLEASE DO NOT HESITATE TO CONTACT LET ALLIANCE ON 0845 6850475 OR TRINITY
PROPERTY ON 01384 213395**