

AVJ HOMES

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TENANT APPLICATION

24 HOUR SERVICE Fax by 10:00 hrs

48 HOUR SERVICE Fax by 15:00 hrs

AMI REF NO : []

DUE TO THE CONFIDENTIAL NATURE OF THE INFORMATION SUPPLIED & REQUIRED, WE REGRET THAT NO EXPLANATION WILL BE GIVEN IF WE WERE UNABLE TO RECOMMEND A TENANCY. HOWEVER YOU MAY REQUEST THE NAME OF THE CREDIT REFERENCE AGENCY SEARCHED. AN ADMINISTRATION CHARGE OF £10 WILL BE APPLIED TO THIS SERVICE. IF REFERENCES PROVE UNSATISFACTORY OR FOR ANY REASON YOU WITHDRAW YOUR APPLICATION THIS CHARGE WILL NOT BE REFUNDED IN WHOLE OR IN PART.

THIS FORM MUST BE COMPLETED IN BLACK INK, IN BLOCK CAPITALS. ALL EMAILS SUPPLIED WILL GREATLY SPEED UP THE APPLICATION

1. PROPOSED RENTAL ACCOMMODATION DETAILS

Rental address: _____ Postcode: _____

Total rent: _____ PCM Share of rent: _____ PCM Rental period _____ Date to move in: _____
6 or 12 Months

If this is a joint tenancy please list all other tenants below. Total number of tenants including you :

Tenant 1: Mr/Mrs/Ms _____ Age: _____ Tenant 2: Mr/Mrs/Ms _____ Age: _____

Tenant 3: Mr/Mrs/Ms _____ Age: _____ Tenant 4: Mr/Mrs/Ms _____ Age: _____

2. PERSONAL INFORMATION (Part of this information is required for a credit check and to obtain references)

Property owner Private tenant With parents Council tenant With friends Other - Please specify

Applicant's full name: Mr/Mrs/Ms

Current address: _____ Postcode: _____

Home tel: _____ Mobile: _____ Email: _____

Date of birth: _____ NI No: _____ Driving licence no: _____ Smoker: Yes/No

Length of time resided here: _____ Do you have any pets: Yes/No If yes give details: _____

Marital status: Married Single Divorced Separated Do you have any children: Yes/No If yes please give details below:

Name: Mr/Mrs/Ms _____ Age: _____ Name: Mr/Mrs/Ms _____ Age: _____

Name: Mr/Mrs/Ms _____ Age: _____ Name: Mr/Mrs/Ms _____ Age: _____

Do you have any additional income? Yes/No If yes give details: _____

3. PREVIOUS ADDRESS (Part of this information is also required for a credit check)

Address: _____ Postcode: _____

Resided here from: _____ to _____ Reason for leaving: _____

4. CREDIT HISTORY (This information is used by us to recommend you for rental)

Are you aware of any CCJ's or Bankruptcy orders? Yes/No If yes give details: _____

5. NEXT OF KIN (Not a spouse)

Name: Mr/Mrs/Ms _____ Tel: _____

Address: _____ Postcode: _____

6. CURRENT RENTAL INFORMATION (This information is used by us to recommend you for rental)

Landlord / Agent name: _____ Tel: _____

Address: _____ Postcode: _____

Fax: _____ E-mail: _____ www: _____

Tenancy from: _____ to _____ Rent being paid: _____ Reason for leaving: _____

7. ADDITIONAL DOCUMENTS (One document each from section A, B (Please provide N.I card copy separately) & C are mandatory - 4 in total. Tick the ones you will be sending)

A. Address Verification Proof

- Gas / Electricity Bill
- Bank / Building Society Statement
- Telephone bill

B. Identity Proof & N.I NUMBER

- Passport (photo section)
- Photo Driving Licence (photo licence)
- Photocopy of National Insurance Card

C. Proof of Income

- Payslips
- P-60, P-45, P-35
- Stmt of Accounts (Self Assessment)

NOTE : IN CASE IF THE APPLICANT IS ENTITLED TO RECEIVE ANY PENSION OR SCHOLARSHIP OR HAVE GOT ANY OTHER ADDITIONAL INCOME, WE RECOMMEND TO PROVIDE ALL THE NECESSARY DOCUMENTS ALONG WITH THE APPLICATION.

8. EMPLOYMENT DETAILS (To obtain a reference from someone who can confirm your salary and other details)

Company name:		Year established:
Trading address:		Postcode:
Name of contact: Mr/Mrs/Ms		Job title:
Contacts tel:	Contacts fax:	Email:
Your job title:	Present salary:	Date started:
Your tel:	Your email:	Your Staff/Payroll No:
Are you: Full time <input type="checkbox"/> or Part time <input type="checkbox"/> & Permanent <input type="checkbox"/> or Temporary <input type="checkbox"/> If temporary what is the length of your contract: mths.		
Are your current job circumstances due to change? Yes/No If yes give details:		

9. SELF EMPLOYMENT DETAILS (if you have been trading less than 1 year we will obtain a **BANK REFERENCE**)

Is your company: Limited <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Trader entity <input type="checkbox"/> If limited – Company Registration No:		
Company name:		Year established:
Trading address:		Postcode:
Tel:	Fax:	Email:

10. ACCOUNTANT DETAILS (We will be obtaining a reference from your accountant – please provide up to date details)

Company name:		Accountant's name: Mr/Mrs/Ms
Trading address:		Postcode:
Tel:	Fax:	Email:

11. TRADE REFEREE DETAILS (Details of at least 1 supplier is required for all self employed applicants)

Company name:		Contact: Mr/Mrs/Ms
Address:		Postcode:
Tel:	Fax:	Email:

12. BANK OR BUILDING SOCIETY DETAILS (These details will be used for pensioners and self employed applicants)

Bank / Building society:		Contact: Mr/Mrs/Ms
Address:		Postcode:
Account holder's name: Mr/Mrs/Ms		Account opened date:
Account number:	Sort code: - -	Type of account: CURRENT / SAVINGS / BUSINESS

13. CHARACTER REFEREE (Please provide details of someone who is not related to you)

Name: Mr/Mrs/Ms		Tel:
Address:		Postcode:

14. RESIDENTIAL STATUS (If the Applicant is NOT a EU National, Please provide the copy of RESIDENCE PERMIT/VISA)

Your nationality:	Which country's passport do you hold:
Length of time resided in UK:	Do you have a valid work permit: Yes/No Please give details:

15. DECLARATION

I CONFIRM THAT THE INFORMATION PROVIDED BY ME ON THIS FORM IS TRUE & CORRECT & THAT I HAVE NO OBJECTIONS IN ALLOWING **AUSTIN MYER INTERNATIONAL LTD**, 430 LEGACY CENTRE, FELTHAM, MIDDLESEX, TW13 6DH, TO VERIFY THIS INFORMATION BY THE USE OF A CREDIT REFERENCE AGENCY. I AUTHORISE **AUSTIN MYER INTERNATIONAL LTD** TO USE MEANS OUTSIDE THE EEC TO PROCESS THE INFORMATION PROVIDED BY ME ON THIS FORM. IN THE FUTURE I WOULD WELCOME OFFERS FOR OTHER SERVICES. YES NO .

I AUTHORISE **AUSTIN MYER INTERNATIONAL LTD** TO TAKE UP ANY OF THE FOLLOWING: EMPLOYER REFERENCE, ACCOUNTANT REFERENCE, TRADE REFERENCE, BANK STATUS ENQUIRY, RENTAL REFERENCE, PENSION REFERENCE, AND STUDENT VERIFICATION REFERENCE.

Printed name:	Signature:
Date:	