



TENANT APPLICATION

This form must be FULLY completed in BLOCK CAPITALS in INK.

Failure to comply with the above may cause delay.

We regret that no explanation will be given should we be unable to accept you as a tenant

Please state the names (Including all first names) of the applicant and all other occupiers of the property applied for.

(Mr / Mrs / Miss / Ms)

First Names

Surname

DOB

Maiden Name

Marital Status

Current address

Period at address Years Months

Tel

Child 1 Name and Age

Child 2 Name and Age

Child 3 Name and Age

Property address applied for:

Total rent per month for the property

Total rent per month for the applicant

Rental period (months)

Are you to pay the rent through?

Your own means: Housing benefit

Is this a joint tenancy application?

Proposed tenancies commencement date:

Tenants 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

If other please specify

Please provide previous addresses and dates of residency for the last 3 years (Please attach as separate sheet if required)

Previous address

Period at address Years Months

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

Company/accountant name

Address of HR/Payroll

Tel Fax

Email of HR/Payroll

Contact Name of HR/Payroll

Contact Position of HR/Payroll

Position Held of Applicant

Gross Monthly Salary of Applicant

Start Date

National Insurance Number

Payroll Number

SECONDARY EMPLOYMENT DETAILS

Company/Accountant names

Company/Accountant Address

Tel Fax

Email
Position held
Gross Monthly Salary
Start Date
Contact name
Contact position

Are you aware of any matters that may cause your employment to change in the near future?

Yes No

(If yes please give details on a separate sheet)

If you are self employed we will require 3 years of accounts

PAST EMPLOYMENT DETAILS

If you have been in your current employment for less than 3 years, please provide details of your previous employment including the commencement date. (Please attach a separate sheet if required)

Position Held

Salary per month

Start date Leaving date

Company Name

Company Address

Contact Name

Position

Tel Fax

Email

**DO YOU HAVE ANY OTHER SOURCE OF INCOME?
(Proof must be provided)**

Pension (per annum)

Investment income (per annum)

Other (Per week)

If other please specify:

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

Previous Landlord/Letting agent Name

Address

Tel Fax

Email

Previous rent amount paid

Do any of the named applicants/tenants own any pets?

Yes No

If yes, which type?

Do any of the named applicants/tenants smoke?

Yes No

Are any of the named applicants/tenants vehicle owners?

Yes No

Vehicle Registration

Drivers licence number

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

Bank name

Address

Name of Account Holder

Account Number

Sort Code

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 in the space below:

Holding Fees

1st Applicant - £150 + VAT

2nd and Subsequent Applicants £50 + VAT

THESE FEES ARE NON-REFUNDABLE

I hereby authorise Westpark to make any enquiries considered necessary to substantiate information supplied on this application. I authorise you or your assessment company to disclose any information about me and my account to any credit reference agency and/or any other tenancy database who may retain a record of such a search. This information is used to help me make credit, insurance, rental and property decisions and occasionally for fraud prevention or debtor tracing. I give my permission to take up all necessary references and that these may be shown to a landlord and/or their lender.

Signature of Tenant Date