

Agent's Name:				Proposed Move Date	e: dd mm yyyy	
Postcode:				Tenancy Period:	6 Months 12 Months	
Rental Address: (Applying for)				Share of the Rent:	%	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Full Tenant Profile:	OR Credit Search Only	
Postcode:				Applicant or Guaran	tor (A or G)	
Total Monthly Rent:						
Please complete this You must complete a					nd contact details are correct.	
	eferees you have pr	ovided on th	nis applic	cation check their emails	and spam folders for our	
verification link.					Step 1	
				al Dataila	<u>.</u>	
		Pe	rson	al Details		
Title Mr/Mrs/Etc:				Maiden Name:		
Forename:				(If applicable) Gender:	Male Female	
Middle Name(s):				Date of Birth:	dd mm yyyy	
In FULL Surname:				Marital Status:		
Contact Details						
Home Phone:				Mobile:		
Work Phone:						
Email:						
ID Verification De	tail					
Photo ID Provided	to Letting Agent:	000	T 00DE		ACCOUNT NUMBER	
Please provide you for verification	ır bank details	SOR	T CODE		ACCOUNT NUMBER	
Do you have any a		ory ie CCJ	s/Bankr	ruptcies	Yes No	
Other Information	n (not applicable	to guarant	tors)			
How many childre	n do you have?			Are you a smoker?	Yes No	
How many over th	e age of 18?			Do you have pets?	Yes No C	



Step 2

	Current Accommodati	ion (where you	u live now)	
Address:		Cour	nty: code:		
Town or City:		Move	ed in Date:	dd mm	уууу
Current Accomm	odation Status - (Of where you live	now)			
Currently Renting:		(Fill in Section A)			
Currently Living v	vith friends & family:	(Fill in Section B)			
Currently a Homeowner:		(Fill in Section C)			
					-
					Section A
Currently Renting	g / Rented in the last 6 months				
Landlord:	or Agent:		ng Agent		
Agent/Landlord		Nam	e:		
Address:		Fax:			
Postcode:					
Agent / Landlord	Contact Details:				
Title-Mr/Mrs/Etc:		Phor	ne:		
Forename:		Mob	ile:		
Surname:					
Email:					
	In the unlikely event this contact does not have a varesult in delays.	alid emai	l address you must	provide a valid fax number,	failure to do so will
Total Monthly Dani	t: £	Dloc	se name		
Total Monthly Ren			se name r tenant(s):		
Joint Tenancy?:	Yes No No				



Section B

			Occilon B
Currently Living	with Family or Friends		
Title:		Phone:	
Forename:		Mobile:	
Surname:			
Email:			
Relationship to you: ie Mother			
			Section C
Currently a Home	eowner		
Please provide proof of your home ownership. Buildings Insurance Policy			
Mortgage stateme	nt:	Land registry title	extract:
Solicitor's complet	ion certificate	Already provided t	to Letting Agent:
	equire@uktenantdata.com or faxend the document to UKtenanto		in to your agent and ask them to
			Section D
Previous Addres	s if less than 3 years		
Address:		Postcode:	
		Moved in Date:	dd mm yyyy
	NOW GO	DIRECTLY TO STEP 3	
	Next of	Kin Information	Step 3
Note to A	Applicant: This must be a perso	n you will not be living with	n at the address applied for.
Title:		Phone:	
Forename:		Mobile:	
Surname:		Relationship:	
Address:		Years known:	
		Postcode:	
Email:			
I consent to the requires immediate		n in the event of an emerg	ency or in the event that a situation



	Income Stat	us Information	Step 4
Employed:		(Fill in Section Aa)
Self Employed/ Di	rector of own company:	(Fill in Section Bb)
Unemployed & Other Means of Income: (Fill in Section Cc)			
National Insurance	e Number:		Section Aa
Employed Your Employer/Acco	untant may need your signed authority to 0845 180 0872)	o release your employment infor	mation. (If this is the case please
Employed by: (ie Company Name)		Department: (If applicable)	
Address:		Phone:	
		Fax:	
Postcode:			
Employer Contac	ct Details: (the person who can officially o	confirm your employment and salar	ry)
Title-Mr/Mrs/Etc:		Phone:	
Forename:		Mobile:	
Surname:		Fax:	
Email:			
	In the unlikely event this contact does not have a result in delays.	valid email address you must provide a	valid fax number, failure to do so will
Job Details:			
Job Title:		Annual Salary: (your pay per year before tax &	£
Start Date:	dd mm yyyy	NI is deducted) Annual Bonus:	£
Full Time:	Part Time: Permanent:	Temporary:	Length of contract (in Months)
			Section Bb
Self Employed /	Director of own company Your Bu	ısiness Details:	
Business Name:		Annual Bonus	£
Years Trading:	Start dd mm yyyy	Business Type:	
Annual Income: (Salary/Drawings/Divider	£	Job Title:	
Accountant's Name	, ,	Accountant's	
Phone:		Address:	
Fax:		Postcode:	
Email:			

If you have additional means of income other than above, fill in Section Cc also.



			Section Cc				
Other Means of income							
State Pension MONTHLY:	£	Investment Income MONTHLY:	£				
Private Pension MONTHLY:	£	Interest on Savings MONTHLY:	£				
Unemployed & Additional Mean	s of Income						
Family Tax Credit MONTHLY:	£	Income Support MONTHLY:	£				
Housing Benefit MONTHLY:	£	Disability Living Allowance	£				
Other Income MONTHLY:	£	MONTHLY:					
Other Income Description:							
		ling and selection, this information will be used to estab se enquiries will include carrying out a credit report to c					
adverse data, ID verification, confirmation of will be shared with third party credit reference information to establish future performance. Integrity and to confirm the information supplied to Ukter ease of future use of the site. The information applicant. The updating of the tenant / guaral (Arrears/Property Dilapidation) and for the pusupply of credible evidence supporting an apprelating to an individual or a company are subject to the supply of credible evidence supporting an apprelating to an individual or a company are subject to the supply of credible evidence supporting an apprelating to an individual or a company are subject.	registration on the e agencies. We will we will make contailed by you is factual nantdata (Ifaqs Ltd) n can be updated bother file will be for the poisse of applying plication for an NOO ject to the Data Professe will be agent to the Data Professe of applying the poisse of a	Electoral Roll Register, undeclared addresses and prevall contact current / previous landlords and managing age tot with your employer or accountant for the purpose of all and correct. These enquiries will be made by fax, employ will be processed and stored on a secure server, and by Uktenantdata, the managing agent, private landlord, the purpose of scoring or registering tenancy performant 'Notices of Correction' (NOC) to a tenant file. The NOC C. (Notice of Correction) All storage, use and transmissing tection Act. You can obtain a copy of all the details held liston Office Village, Cuerden Way, Bamber Bridge, Prestored	vious aliases. Any findings ents to verify and process verifying your financial ail, letter, telephone, SMS used for the purpose and user, account holder or ice, including delinquency, as are only applied on the on of personal information by applying, with the £10.00				
As part of our service we, or our third party p If you do not wish to be contacted please tick		time to time contact you with updates and product infor	mation relevant to you.				
I understand that should I, or the tenant(s) I a information will be recorded and stored within $% \left\{ 1,2,,n\right\}$		e served with a Section 8 or Section 21 Notice during th atabase for a period of 6 years.	e tenancy period, the				
By signing this application, I agree to all the terms and conditions, I consent to UKtenantdata making enquiries to verify my information and give my consent for my employer/accountant/ current/previous letting agent/landlord/each referee I have provided, to release information requested by UKtenantdata in order for them to assess my suitability as a tenant/guarantor. This information can be viewed by registered users of UKtenantdata's service to establish my future performance as a prospective tenant/guarantor.							
of which I have supplied within this application	n. In the absence o	with me, I consent to the letting agent making contact wit of direct communication with me, I authorise the letting y next of kin aware of this arrangement and can confirn	agent to serve any notices				
Please note! Should your application be declined or you fail to proceed with the letting of the property, your application fee will be forfeit.							
NAME IN BLOCK CAPITALS:							
Applicant Signature:	Applicant Signature:						
Todav's Date:	dd mm	VVVV					