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TENANCY APPLICATION FORM

PLEASE NOTE: Any person over the age of 18 must complete a form for processing. Please ask for extra copies if required.

(Mr/MRS/Miss or other) _____ Your Full Name _____

Current Address _____

Post Code _____

Telephone _____ Email _____

Date of Birth _____

Current/Previous Landlord _____

Address _____ Postcode _____

Telephone _____

Your Employer _____ Address _____

Telephone _____ Job Title _____ Date Started _____

Gross Annual Salary£ _____ Line Manager's Name _____

Previous Address for last Three years

Mandatory Fields please supply all relevant information

Next of Kin _____

Address _____ PostCode _____

Telephone _____ Relationship to applicant _____

Guarantor _____ Telephone _____

Address _____ PostCode _____

Occupation _____ Salary(approx) _____ Homeowner: Yes/no

Signed: _____ Dated: _____ Print Name: _____

Visa Credit Card Visa Debit Card Visa Electron Switch MasterCard Maestro

Card Details: Long Number _____ Valid From __/__/__ Expiry Date __/__/__ Security code: ___

Name as appears on Card _____

Signed: _____ Date: _____