Rental Application Form

CHRIS MORGAN PROPERTY

APPLICANT 1:	APPLICANT 2: (WHERE APPLICABLE)
NAME:	NAME:
SURNAME:	SURNAME:
FIRST NAME/S:	FIRST NAME/S:
DATE OF BIRTH:	DATE OF BIRTH:
MARITAL STATUS:	MARITAL STATUS:
NUMBER OF DEPENDANTS:	NUMBER OF DEPENDANTS:
LANDLINE TELE/EMAIL ADDRESS:	LANDLINE TELE/EMAIL ADDRESS:
MOBILE TELEPHONE:	MOBILE TELEPHONE:
ADDRESS:	ADDRESS:
TIME AT ADDRESS:	TIME AT ADDRESS:
PREVIOUS ADDRESS (IF ABOVE LESS THAN 3 YEARS):	PREVIOUS ADDRESS(IF ABOVE LESS THAN 3 YRS):
HOUSING BENEFIT ASSISTED:	HOUSING BENEFIT ASSISTED:
EMPLOYMENT STATUS: (DELETE WERE APPROPRIATE)	EMPLOYMENT STATUS: (DELETE WERE APPROPRIATE)
IF SELF EMPLOYED NAME OF ACCOUNTANT:	IF SELF EMPLOYED NAME OF ACCOUNTANT:
PROFESSIONN	PROFESSION:
EMPLOYER:	EMPLOYER:

EMPLOYERS REFERENCE

PLEASE COMPLETE AND STAMP WITH COMPANY STAMP OR TYPE ON HEADED PAPER
NAME OF EMPLOYEE:
CONTACT NUMBER:
LENGTH OF SERVICE:
UNDER NOTICE OF TERMINATION? YES/NO
ANY ISSUES WITH EMPLOYEE? YES/NO
COMMENTS:
SIGNED BY:
PRINT:
POSITION:
DATE:
N.B. ALL REFERENCES ARE CONFIDENTIAL
PLEASE RETURN THIS TO OUR OFFICE BY POST, FAX OR EMAIL

PREVIOUS LANDLORD REFERENCE

NAME OF TENANT:
PROPERTY ADDRESS:
PERIOD OF TENANCY:
/ / TO / /
ARE RENTAL PAYMENTS UP TO DATE? YES/NO
WOULD YOU RECOMMEND THIS TENANT? YES/NO
PLEASE COMMENT:
NAME :
SIGNED:
DATE:
TELE NO.:
IF YOU WISH TO DISCUSS THIS APPLICATION WITH A MEMBER OF OUR STAFF PLEASE CONTACT OUR OFFICE ON ABOVE NUMBER
N.B. ALL REFERENCES ARE CONFIDENTIAL

PLEASE RETURN THIS TO OUR OFFICE BY POST, FAX OR EMAIL

FOR OFFICE USE ONLY:

RENTAL PROPERTIES ADDRESS:
MONTHLY RENT:
RENT INCLUDES RATES? YES/NO
APPLICATION REGISTRATION FEE RECEIVED? YES/NO/NA
REFERENCES CHECKED? YES/NO
CREDIT REPORT? YES/NO
STAFF SIGNATURE:
DATE: