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Application Form



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Business Partner **EQUIFAX**

TENANT SCREENING APPLICATION

FAX BACK TO: 01793 300292



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BUSINESS PARTNER **EQUIFAX**

☎ 01793 847014
📠 01793 300292
✉ info@tenantscreening.co.uk

**119 Commercial Road
SWINDON
SN1 5PL**

1 – LANDLORD / AGENT DETAILS

Agent/Landlord Name			Date		
Street Address					
Phone No		E-mail Address		Mobile No	

2 – PRODUCT REQUIRED

Instant ID and Credit Check	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Referencing Only	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Full Tenant Profile	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Full Tenant Profile + Right to Rent	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Full Tenant Profile Express	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Full Tenant Profile Express + Right to Rent	YES <input type="checkbox"/>	NO <input type="checkbox"/>

3 – PROPERTY DETAILS

PROPERTY TYPE	Terraced <input type="checkbox"/>	Semi-Detached <input type="checkbox"/>	Detached <input type="checkbox"/>	Flat <input type="checkbox"/>	Room <input type="checkbox"/>
Street Address					
Town/City			County		Postcode
Property Rent (PCM)	£	Tenancy Start Date	/	/20	No. Of Bedrooms

4 – TENANT INFORMATION (MINIMUM 3 YEAR HISTORY REQUIRED)

Surname		First Name		Title	D.O.B		
Street Address			Town/City				
County		Postcode		Mobile No			
Home Phone No		E-mail Address					
Status(Own/Rent/Relatives)		National Insurance No		Time at address	Years Months		
Are you a Smoker?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you registered Disabled?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you have pets?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Any Debt Problems (IVA/CCJ/Bankruptcy)		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you have a criminal record?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, give details:			

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5 – PREVIOUS ADDRESS

Street Address			
Town/City	County	Postcode	
Phone No	E-mail Address		
Status(Own/Rent/Relatives)	Time at address	Years	Months

6 – CURRENT LANDLORD (IF APPLICABLE)

Surname	First Name	Initial	Date		
Street Address					
Town/City	County	Postcode			
Phone No	E-mail Address				
Property Rent (PCM)	£	Tenancy Start Date	/ /20	Tenancy End Date	/ /20

7 – PREVIOUS LANDLORD (IF APPLICABLE)

Surname	First Name	Initial	Date		
Street Address					
Town/City	County	Postcode			
Phone No	E-mail Address				
Property Rent (PCM)	£	Tenancy Start Date	/ /20	Tenancy End Date	/ /20

8 - CURRENT EMPLOYMENT

Company	Phone No ()	
Address	Supervisor	
Job Title	Current Salary £	Start Date
Fax Number	E-mail	
Payroll Number	Employee Number	
From	To	Reason for Leaving

9 – BANK DETAILS (REQUIRED FOR BANK ACCOUNT VALIDATION ON FULL TENANT PROFILE)

Account Holder Name	
Sort Code	Account Number

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ADDITIONAL NOTES & COMMENTS

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I have no objection to this information being verified by fair and lawful means, which will involve contacting the referees supplied. I understand that the results of Tenant Screening's findings will be forwarded to the appointed Letting Agent and/or Landlord and may be accessed again should I apply for a tenancy agreement in the future. I agree that Tenant Screening Ltd will perform a tenant verification search of my credit file to verify my identity and provide a background check of me as an individual. This check is performed with a licensed credit reference agency and a footprint will be left in my file. (NB This footprint will not affect an applicant's ability to raise credit.) I understand that if any information within this application is found to be untrue it is grounds for termination of the tenancy under the 1996 Housing Act. I understand that completing this application does not commit the landlord or tenant to a tenancy.

I agree that the information I provide on this form and that is obtained from other relevant sources will be used to process my application for a tenancy. If I succeed in this application and take up the tenancy I understand that the information will be used in the administration of that tenancy agreement, both internally and via external agencies, e.g handling references. In the event that I remain in this property past the initial tenancy agreement period, I understand that it may be necessary to perform subsequent credit and money laundering searches. I hereby authorise my employer/accountant/pension administrator to provide details of my earnings and dates of employment to TenantScreening.co.uk for the purposes of completing this reference.

I agree for my personal data to be collected and processed by Tenant Screening and I accept that this may include the use of cookies.

**GUARANTOR
Signature**

Date

**Applicant
Signature**

Date

Should this applicant require a Guarantor please ensure that they sign both this and the Guarantor Screening Form