



Tenancy Application Form

Address of the property you are applying for

Please give the full names of all adult tenants moving into the property

First Name	Middle Name	Surname	Share of Rent

Please confirm the lead tenant during the application process (this person shall receive the deposit back at the end of the tenancy)

Personal details

Mr/Mrs/Miss/Ms/Other

Male/Female

Date of Birth

First name

Middle name

Surname

Nationality

If you are a Non EU resident, do you have a visa to stay in this country YES / NO

When does it expire?

Marital Status

Are you a smoker?

Do you have pets? Yes/No (if yes please state types and pet names)

Daytime telephone number

Evening telephone number

Mobile telephone number

Email address

Do you have any CCJ's and IVA or Bankruptcy orders, current or pending? YES/ NO (if Yes give details)

Please name the children living in the property and their dates of birth

	/	/
	/	/
	/	/
	/	/

Current Address

House Number/Name

Flat Number/Name

Street

Town

District

Postcode

Owner Rented Living with parents Council tenant Other

Previous Address

House Number/Name			
Flat Number/Name			
Street			
Town			
District		Postcode	
Owner	Rented	Living with parents	Council tenant Other

Employment details

Employment status Self-Employed Employed Unemployed Student Retired Payment in Advance

Profession

Are you employed full time or part time? How many hours are you contracted to?

Are you on a zero hours contract? YES/ NO Are you within a probation period? YES/ NO

If you are self employed, how long have you been self employed for?

If you are self employed, will your accountant be able to verify your income? YES/ NO

If you are self employed and do not have an accountant, have you filed a tax return in the last 12 months? YES/ NO

Are you on a temporary or fixed term contract? YES/ NO Employment start date

Annual Income (Before Tax) £ Payroll/Pension no

Are you in receipt of any benefits? YES/NO If yes, please state

Are your circumstances likely to change? YES/ NO
 If yes, please give further details

Additional Income (if applicable)
 If you have any additional income, please advise how much per annum £

Source of additional income

Employer Details

If you are employed, self employed, or retired, give details, of your employer, accountant or pension provider (alternatively you may provide proof of pension) below, and authorise them to reply to the enquiries which will be made to verify this information. Please complete all boxes including contact details for referee.

Employer/Accountant/Pension Provider			
Office / House Name			
Street number / Name			
Town			
Country		Postcode	
Contact Name		Contact Job Title	
Daytime telephone		Mobile telephone	
Fax Number			
Email address			

Landlords Details

Please complete this section if you indicated that you are or have lived in rented accommodation. Please complete all boxes.

Landlord/Agent Name			
Office/House Name			
Street number/Name			
Town			
Country		Postcode	

Contact Name		Contact Job Title	
Daytime telephone		Mobile telephone	

Email address

Have you given notice to your current landlord YES/ NO

Do you have any rent arrears YES/ NO If yes give details

Is there any reason your landlord may not give a good reference YES/ NO if yes give details

Bank/Building society details

Name of Bank					
Address					
Account in the name of					
How long with this branch		Sort Code		Account number	

Next of Kin

Name			
House number/ Name			
Street			
Town			
County		Postcode	
Daytime telephone		Mobile telephone	
Relationship			
Email address			

Email

Please note that if you have provided an email address we will send all correspondence to this email. Please tick if you would prefer not to receive correspondence via email.

Applicants Consent

The information, which I have given in my application form, is true to the best of my knowledge. I consent to this information being verified by fair and lawful means, which I understand will involve contacting referees and licensed credit reference agencies. I understand that if I provide false or untrue information on this application form the agent is entitled to retain my holding deposit of one weeks rent.

Please tick box

I consent to Ark Residential Letting searching information held by a credit reference agency and agree that Ark Residential Letting and the credit referencing agency will keep a record of the search and the results of the search. Such information may be used by other companies for the purpose of assessing other applications from me or for debt tracing and fraud prevention.

Please tick box

I give consent for Ark Residential to forward my contact details to The Lettings Hub insurance company only to arrange a quote for contents insurance.

Please tick box

I understand the information supplied by me and the resulting verified information will be forwarded to the letting agency and/or to the prospective landlord. The information may also be accessed again should I agree to act as a guarantor in the future.

Please tick box

I understand that if my application is unsuccessful the information provided will be removed from the database and will not be used by Ark Residential or passed on to any third parties. I also understand that if my application is successful this data will be used only for specified and lawful purposes in the maintenance of my tenancy.

Please tick box

I understand that Utilitease will contact me by telephone or text to cover my legal responsibilities with regards to utility services in my new home and they will advise me who my provider is.

Please tick box

I would like Uilitease to provide options available to me when it comes to setting up new or existing utility services

Please tick box

I agree that information supplied by me and the results of the assessment process will be held in accordance with the Company's privacy policy under the general data protection regulation (GDPR). I understand that I have the right to ask for a copy of the information held on me and I have the right to request that the information held be amended if it is found to be incorrect

I understand that if my application is successful the one weeks holding deposit will be used as part payment towards my first months rent.

Please sign and date the form

Signature _____ Date ____/____/____

Confidentiality Note

The information contained within this application is intended for the use of Ark Residential Letting. If the reader of this form is not the intended recipient, you are hereby advised any dissemination, distribution or copy of this application is strictly prohibited.