Full Reference Application Form





Please return this form to Total Letting Agents Ltd. Asterisks (*) indicate a field is mandatory.

Agency Details				
Letting Agent Name *		Letting Agent ID *		
Total Letting Agents Ltd		476		
Property Details				
Abode *	Building/House Number *		Building/House Name *	
Address Line 1 *				
Address Line O.*				
Address Line 2 *				
Town *	County *		Postcode *	
Total Monthly Rent *				
Tenancy Details				
Start Date of Tenancy (dd/mm/yyyy) *	Length of Tenancy (month	s) *	Share of Rent *	
Applicant's Contact Details				
Title (e.g. Mr, Mrs, etc.) * First Name *		Middle Name *	Last Name *	
Previous Full Name (If your name has changed in the last	12 months)			
Date of Birth (dd/mm/yyyy) *	Telephone Number *		Mobile Number *	
Email Address *				
Email Address *				

Applicant's Details				
Marital Status *		Do you Smoke? *	Do you have Pets? *	Any recent Arrears or Adverse Credit? *
If you have had any red	cent arrears or adverse co	redit within the last 10 ye	ars, please provide deta	ils on the 'Additional Information' page.
Applicant's Curre	ent Address Detail	s		
Abode *		Building/House Number *		Building/House Name *
Address Line 1 *				
Address Line 2 *				
Town *		County *		Postcode *
What is your current re	sidency position? If 'Tena	ant', please complete the	section titled 'Landlord	/ Agency Details' below.
Tenant	Owner	Live with Parents	Family / Friends	
Landlord / Agend	cy Details of your (Current Address		
Abode *		Building/House Number *		Building/House Name *
Address Line 1 *				
Address Line 2 *				
Town *		County *		Postcode *
Name of Landlord / Letting	g Agent *	Contact Email Address *		Contact Telephone Number *
Title (e.g. Mr, Mrs, etc.)	Contact First Name *		Contact Last Name *	

Source of Income				
Employed (PAYE) Self-Employed	Investments / Savings	Benefits	Other	
Employer / Accountant Name *		Annual Income Amount *		
Position / Role		Time With Employer		
Title (e.g. Mr, Mrs, etc.) Contact First Name *		Contact Last Name *		
Primary Contact Number *	Secondary Contact Numb	\	Contact Email *	
Fillidly Contact Number	Secondary Contact Name	ie!	Contact Liman	
Comments / Further Information (if you have further inco	me sources, please specify thes	se on the next sheet)		
Identification			<u></u>	
National Insurance Number *	Identification Type (e.g. pas	ssport, driving license, etc)	Identification Number *	
Bank Account Number *		Bank Account Sort Code	*	
The following questions are asked by your letting	າ agent. Total Letting Age	ents Ltd. Your agent has c	chosen to ask these questions beyond what we	
require as standard. Rent4sure Ltd cannot be he	eld responsible for the co	ntents or nature of these	further questions.	
Next Of Kin				
Must not be a Partner or Spouse Full name *		Relationship to applicant *	·	
		-		
Full postal address including postcode *				
Tull postal address including postode				
Telephone number & email address *				

Authorisation

I confirm that the information provided in this application form is true, accurate and complete. I understand that the information that I have submitted will be used in order to assess my suitability to be granted a tenancy agreement, or to be named on the tenancy agreement as a Guarantor, and I give my consent to the information that I have provided being shared with third parties for this purpose. I understand and agree that current or former employers, landlords and letting agents may be asked to provide additional information about me or to verify information that I have provided, calls for which are recorded for training and monitoring purposes. I further agree that the information that I have provided will be submitted to credit reference agencies in order that a credit check can be conducted. I expressly acknowledge that Rent4sure Limited is not entitled to disclose a copy of my credit report to me but that I may obtain a copy of the report by applying to the relevant credit reference agency directly. I understand that I may be refused a tenancy, or may be found unsuitable to act as a Guarantor, as a result of the searches and references obtained by Rent4sure Limited and I agree that I shall not seek to hold Rent4sure Limited liable for such refusal nor shall I seek to bring any claim against Rent4sure Limited for any loss or damage suffered by me as a result of such refusal. I understand that information which I provide or which is collected about me may be retained on file or stored electronically in accordance with the provisions of the Data Protection Act 1998. I do / do not want Rent4sure Limited passing my contact details to third parties including Intasure Limited, RGA Underwriting Limited, Arc Legal Assistance Limited and Global 4 Communications in order that Rent4sure Limited, or a third party, may contact me by e-mail or telephone about products and services which may be of interest to me, such as Tenants Liability Insurance or broadband/media services.

Rent4sure Limited is a data controller under the Data Protection Act 1998. Rent4sure Limited's full privacy policy and a data protection fact sheet are available at www.rent4sure.co.uk.

Applicant's Name *	Applicant's Signature *	Date (dd/mm/yyyy) *

ou need to provide any previous addresses, names, credit history or other credentials please describe them below.	dditional Informatio					
	you need to provide any pr	evious addresses, name	es, credit history or othe	r credentials please desc	ribe them below.	

Optional Page

You only need to send this extra page in if you choose to provide any further information..

Supplementary Orders (For use by Total Letting Agents Ltd only)					
Rent Protection					
6 Months 1 Month Excess	6 Months Nil Excess	12 Months 1 Month Excess	12 Months Nil Excess		
Legal Expenses In	surance				
6 Months	12 Months				
Know Your Customer					
A Know Your Custome	r Report that verifies the	identity and background	about an applicant		
Add Know Your Customer					

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