

Full Applicant Premier Applicant **GUARANTOR PROPERTY RESERVATION FORM**

COMPANY NAME

ACCOUNT NUMBER

CONTACT NAME

ALL PARTS OF THIS APPLICATION SHOULD BE FULLY COMPLETED AS FAILURE TO DO SO MAY AFFECT YOUR APPLICATION

GUARANTOR FOR

Private and Confidential**Property Details**Address: Rent p.c.m. per tenant: £ Rental Period: Intended occupation date: **About the guarantor**Mr Mrs Miss Ms (Please provide any previous names)First Names: Surname: Date of Birth: National Insurance No: Address: Town: County: Postcode: Telephone No: Time at this address: years Months Are you the owner of the property? YES NO Do you pay a mortgage on this property? YES NO Please state the monthly payment for your mortgage/rent/etc. £ (If no, state whether council tenant, private tenant or living with parents etc.) **Previous address (if less than seven years at the above)**Address: Town: County:

Postcode: _____ Time at this address: years _____ months _____

State whether council tenant, private tenant or living with parents etc.:

Your relationship to the applicant? _____
(Mother/Father etc.)

Are you married/divorced/single etc.? _____ Number of dependants? _____

Do you have any County Court Judgements/poor credit history? YES NO
(If yes, please give details on a separate sheet)

Your present employer

(If self-employed give Accountant's name & tel. no. And state Accountant please)

Company: _____

Address: _____

Town: _____ County: _____

Telephone No: _____ Fax No: _____

Position: _____ Salary: _____

Employment Commencement Date: _____ Payroll No: _____

Contact Name: _____ Position: _____

Your previous employer (if less than three years at the above)

Company: _____

Address: _____

Town: _____ County: _____

Postcode: _____ Telephone No: _____

Position: _____ Period Of Employment: _____

Contact Name: _____ Position: _____

Next of Kin (this must be a relative)

Name: _____

Relationship: _____

Address: _____

Town: _____ County: _____ Post Code: _____

aytime Telephone No.: Evening Telephone No:

Character referee

Name:

Relationship (relatives not accepted):

Address:

Town: County:

Daytime Telephone No: Evening Telephone No:

Bank/building society details

Bank Name:

Address:

Town: County:

Telephone No: A/c No: Sort Code:

A/c Type: A/c Name:

IMPORTANT - The application will not be processed unless the declaration below is signed
TERMS AND CONDITIONS OF CHECK SEARCH ASSESSMENT

1. I agree that all parties on this form can be contacted and that these parties can provide all information they are asked for and also that this information may then be shared with a prospective landlord and / or their agent.
2. I authorise that Check Search Housing Ltd may confirm my bank/building society details given above are correct.
3. I understand that checks will be made with County Court registers and if any unsatisfied County Court Judgements or adverse credit is registered against me the reservation may be cancelled and the deposit may be forfeited.
4. All information is only used to make an assessment for credit/insurance, property rental decisions.
5. To the best of my knowledge and belief the information I have given on this form is correct and complete.
I understand that if any unsatisfactory references are obtained or that if I give any false or misleading information that this may affect my assessment. The reservation could be cancelled and the deposit may be forfeited.
6. I confirm that should the tenant default on their rent payments I may be liable for any outstanding payments due.
7. I agree that Check Search Housing Ltd may search the files of a credit reference agency, which will keep a record of that search. Details of how I conduct the account may also be disclosed to the agency. This information may be used by other lenders in assessing applications from me and my household and for occasional debt tracing and fraud prevention.

Signed:

Dated: