



6 Minories, Birmingham, B4 6AG
0121 236 3666 www.stewartoliver.com

PLEASE PRINT CLEARLY IN BLOCK CAPITALS

TENANCY APPLICATION

PROPERTY BEING APPLIED FOR: _____

TITLE MR/MRS/MISS/OTHER: _____ SURNAME(S) _____

FIRST NAME(S): _____

DATE OF BIRTH: _____

PRESENT ADDRESS: _____

_____ POST CODE: _____ DATES FROM: _____ TO: _____

TEL NOS: MOBILE) _____

E-MAIL: (PERSONAL): _____

IMPORTANT NOTE: All applicants will be required to present their passport to our office as proof of identity and nationality. Copies of the original will not be accepted.

IF THIS APPLICATION IS TO FORM PART OF A JOINT APPLICATION PLEASE STATE YOUR RELATIONSHIP TO THE OTHER APPLICANTS _____

RESIDENTIAL STATUS:

HOUSE OWNER / PRIVATE TENANT / COUNCIL TENANT / LIVING WITH RELATIVES / LODGER

IF YOU ARE A TENANT: NAME OF LANDLORD OR LETTING AGENT: _____

ADDRESS: _____

TEL: _____ FAX: _____ EMAIL: _____

EMPLOYMENT STATUS:

EMPLOYED / SELF EMPLOYED / RETIRED / UN-EMPLOYED / STUDENT / INDEPENDENT MEANS

APPROXIMATE NET MONTHLY INCOME: £ _____

IF YOU ARE EMPLOYED: NAME OF EMPLOYER: _____

ADDRESS FOR REFERENCE: _____

TEL: _____ FAX: _____ E-MAIL: _____

NAME FROM WHOM REFERENCE SHOULD BE SOUGHT: _____

YOUR PERIOD OF EMPLOYMENT IN CURRENT JOB: _____

POSITION HELD: _____ PAY ROLL/EMPLOYEE REF No _____

PART TIME OR FULL TIME: _____ PERMANENT OR TEMPORARY: _____



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IF YOU ARE SELF-EMPLOYED: TRADING NAME _____

NATURE OF BUSINESS _____ DATE STARTED TRADING _____

NAME OF YOUR ACCOUNTANT: _____

ADDRESS: _____

TEL: _____ FAX: _____ E-MAIL: _____

Guarantor (If necessary)

NAME: _____

TEL: _____ E-MAIL: _____

HOW IS THIS PERSON KNOWN TO YOU?: _____

HAVE YOU EVER BEEN BANKRUPT OR INSOLVENT?: YES/NO

HAS A COUNTY COURT JUDGEMENT EVER BEEN REGISTERED AGAINST YOU?: YES/NO

HAVE YOU EVER APPLIED FOR A INDIVIDUAL VOLUNTARY AGREEMENT? YES/NO

HAVE YOU EVER BEEN SUBJECT TO A DEBT MANAGEMENT PLAN YES/NO

HAVE YOU EVER BEEN EVICTED FROM A PROPERTY YES/NO

IF YES TO ANY OF THE ABOVE, PLEASE GIVE DETAILS:

DO YOU HAVE ANY CONVICTIONS (OTHER THAN DRIVING OFFENCES) ? YES/NO

IF YES, PLEASE GIVE DETAILS _____

DO YOU HAVE CHILDREN?: YES/NO AGE(S): _____ SEX(S): _____

DO YOU HAVE PETS?: YES/NO

TYPES: _____

ARE YOU A SMOKER? YES/NO

HOW DID YOU HEAR OF US? (please choose)

NEWSPAPER / WEBSITE/ RECOMMENDATION / FRIEND / YELLOW PAGES / KNEW OF US/ OTHER

If WEBSITE which one? _____

PRE MOVE-IN

NOTE: Under NO circumstances whatsoever will Stewart Oliver be able to release keys at the commencement of a tenancy unless we are in receipt of **the first months rent** and the **security deposit**. The security deposit will be the equivalent of five weeks rent. Payment can be made by UK debit card or bank transfer. Bank details for a direct transfer are available on request. **We will not accept payment by cash, credit card or cheque.**

As part of the application I authorise the Agent to:

- carry out credit searches and reference checks and to contact employers, banks, referees, guarantors and credit reference agencies as appropriate.
- use the information obtained with third parties to assess credit ratings, make insurance decisions, for fraud prevention and tracing / debt collection.
- handle all information obtained in strictest confidence and in accordance with the principles of the Data Protection Act 1998.



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I understand that I can request the details of any credit reference agencies used so that I can verify with them the information provided.

I understand that if I default on my tenancy obligations, this information may be released (per Section 35 of the Data Protection Act 1998) to authorised debt recovery agencies and could affect any future applications I make for tenancies, credit and insurance.

It is imperative that all parties are present at the signing of the lease and they must bring the original copies of any identification supplied as part of this application. If all parties are not present with original ID we cannot move you into the property.

NOTE: It is the tenants responsibility to ensure that they have adequate contents insurance under a Tenants Specialist Policy. Please ask if you need insurance recommendations.

I hereby declare that all my answers are true to the best of my knowledge and agree that the above statements shall form the basis of the Tenancy Agreement.

Completing this form does not commit the prospective tenant or landlord to a tenancy.

SIGNED: _____ DATE: _____

PRINT NAME: _____

HOLDING DEPOSITS

SUBJECT TO CONTRACT

The in-going tenant will be responsible for a Holding Deposit equivalent to ONE WEEKS RENT. The application will not be processed until this fee has been received. Payment can be made by debit card online or over the telephone or bank transfer. Should the application be withdrawn by the applicant, or if they fail Right To Rent checks or provide false or misleading information leading to the rejection of their application then the holding deposit will be retained in full by Stewart Oliver. Tenants will also be expected to sign the Tenancy Agreement within a reasonable period (normally 7 days unless otherwise agreed) and failure to do so will also result in the Tenant forfeiting their holding deposit.

I understand these Terms and Conditions in relation to the Holding Deposit.

SIGNED: _____ DATE: _____

PRINT NAME: _____