

# Referencing Individual Application

YOU MUST READ THE FOLLOWING INFORMATION **BEFORE** COMPLETING THIS APPLICATION  
MISSING OR INCOMPLETE INFORMATION **WILL** DELAY YOUR APPLICATION

Please use **BLACK INK** and **CAPITAL LETTERS** throughout the form.

What you must do to ensure that we can process your application quickly and efficiently:

1. Detail all requested telephone numbers **including full dialing codes**
2. Detail all requested addresses fully **including full post codes**
3. Provide **two proofs** of residency (**not more than 4 months old**) from the following:
  - Utility Bill
  - Mobile / Telephone Bill
  - Council Tax Bill
  - Credit Card Statement
- d) Provide **3 months** bank statements
- e) Provide **3 months** pay slips
- f) Provide **one form** of photographic identification, from either:  
Passport or driving licence
- g) Contact all referees to advise that we will be contacting them and if requested supply them with written authority

## SECTION 1 - TO BE COMPLETED BY YOUR LETTING AGENT.

(To clarify which property you are applying, you may insert the address.)

Credit Check <input type="checkbox"/>	Full Reference <input type="checkbox"/>	Assure 6 <input type="checkbox"/> 12 <input type="checkbox"/>	Advance 6 <input type="checkbox"/> 12 <input type="checkbox"/>	Apex <input type="checkbox"/>
<b>Property Address</b>	Post Code: <input type="text"/>			
Address:	<input type="text"/>			
Please list other applicants name(s) below:	Will this be the applicant's residence? Yes <input type="checkbox"/> No <input type="checkbox"/>			
1 <input type="text"/>	Will this property be let on an AST? Yes <input type="checkbox"/> No <input type="checkbox"/>			
2 <input type="text"/>	Total monthly rent: £ <input type="text"/> .00			
3 <input type="text"/>	Term (Months): <input type="text"/>			
4 <input type="text"/>	Start Date: (dd/mm/yyyy) <input type="text"/>			
	Number of tenants sharing: <input type="text"/>			
	This Applicants Share: <input type="text"/>			

## SECTION 2 - PERSONAL DETAILS

Couples where only **one** partner is working need only complete one form.

Please include details of the non working partner in section 11.

Title: <input type="text"/>	First Name: <input type="text"/>	Period at Current Address: <input type="text"/> yrs <input type="text"/> mths
Surname: <input type="text"/>		Owner <input type="checkbox"/> Council Tenant <input type="checkbox"/> Private Tenant <input type="checkbox"/>
Maiden Name: <input type="text"/>		With Family/Friends <input type="checkbox"/> Occupational Residence <input type="checkbox"/>
Current Address: <input type="text"/>		Telephone: <input type="text"/>
		Mobile: <input type="text"/>
		Email: <input type="text"/>
Post Code: <input type="text"/>	Date of Birth: <input type="text"/>	Reason for leaving: <input type="text"/>
Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/>		

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## SECTION 2 Continued

Are you aware of any adverse credit history e.g. have you had any CCJ's, bankruptcies, etc? Yes  No   
If yes, please detail below giving dates, amounts and any explanations. Continue on a separate sheet if required.

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Do you have any criminal convictions other than for driving related offences? Yes  No   
If yes, please detail below giving dates and any explanations. Continue on a separate sheet if required.

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## SECTION 3 - PREVIOUS ADDRESS

Please give all addresses for the **last three years**, on a separate sheet if required.  
If you have been resident outside the UK for the last 3 years please supply your last UK address.

<p><b>Previous Address</b> Post Code: <input type="text"/></p> <p>Address: <input type="text"/></p> <p>Date moved in: <input type="text"/> dd / mm / yyyy Date moved out: <input type="text"/> dd / mm / yyyy</p> <p>Owner <input type="checkbox"/> Council Tenant <input type="checkbox"/> Private Tenant <input type="checkbox"/> With Family/Friends <input type="checkbox"/> Occupational Residence <input type="checkbox"/></p> <p>If private tenant please supply Landlord/Agent name: <input type="text"/></p> <p>Landlord/Agent telephone No(s): <input type="text"/></p>	<p><b>Previous Address</b> Post Code: <input type="text"/></p> <p>Address: <input type="text"/></p> <p>Date moved in: <input type="text"/> dd / mm / yyyy Date moved out: <input type="text"/> dd / mm / yyyy</p> <p>Owner <input type="checkbox"/> Council Tenant <input type="checkbox"/> Private Tenant <input type="checkbox"/> With Family/Friends <input type="checkbox"/> Occupational Residence <input type="checkbox"/></p> <p>If private tenant please supply Landlord/Agent name: <input type="text"/></p> <p>Landlord/Agent telephone No(s): <input type="text"/></p>
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## SECTION 4 - INCOME DETAILS

If you are due to start new employment and you have given notice to your current employer please give your new employers's details here and state you current employer's details in Section 5.

<p>Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> On Contract <input type="checkbox"/> Temporary <input type="checkbox"/> Retired <input type="checkbox"/> Private Means <input type="checkbox"/> Unemployed <input type="checkbox"/> Student <input type="checkbox"/></p> <p>Company/Agency: <input type="text"/></p> <p>Contact Name: <input type="text"/></p> <p>Address: <input type="text"/></p> <p>Telephone: <input type="text"/></p> <p>Fax: <input type="text"/></p> <p><small>PLEASE NOTE :Mobile phone numbers are unacceptable</small></p>	<p>Please include regular commission/bonuses in the commission income box: we will count 50% of this figure towards your total income. If you earn commission only, state the actual amount earned over the last 12 months; we will count 80% of this figure towards your total income. In the additional income box include only regular benefits that you are likely to be still receiving in 12 months time. We may consider up to 50% of this figure towards your total income. Self employed applicants should state their taxable income for the previous year.</p> <p>Gross basic salary/Pension <input type="text"/> £ .00 per Annum Start Date: <input type="text"/> dd / mm / yyyy</p> <p>Commission Income Number <input type="text"/> £ .00 per annum Is this position permanent? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Position Held: <input type="text"/> Full time: <input type="checkbox"/> Part time: <input type="checkbox"/></p> <p>National Insurance Number: <input type="text"/></p>
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## SECTION 4 Continued

Will your employment change in the near future? Yes  No  If yes please provide details:

\_\_\_\_\_

\_\_\_\_\_

## SECTION 5 - PREVIOUS EMPLOYMENT DETAILS - If you have worked for your current employer for less than 12 months please provide details of your previous employer here. Please tick if not applicable

**Previous Employer:** \_\_\_\_\_

Address: \_\_\_\_\_

Start Date: \_\_\_\_\_ Leaving Date: \_\_\_\_\_

Post Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

## SECTION 6 - LANDLORD/LETTING AGENT DETAILS - If no current landlord, please include here details of any previous landlord during the last 12 months. Please tick if not applicable

**Agent/Landlord:** \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Post Code: \_\_\_\_\_ Fax: \_\_\_\_\_

## SECTION 7 - ACCOUNTABLE DETAILS - Only required for self employed applicants. Please authorise your accountant/auditor to provide us with a reference when we request it. Please tick if you do not have an accountant

We may need to see copies of your tax returns. Please tick if not applicable

**Accountant/Autitor:** \_\_\_\_\_

Address: \_\_\_\_\_ Contact: \_\_\_\_\_

Post Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

## SECTION 8 - BANK DETAILS - Current account only. Please tick if you don not have a Current Account

**Bank/Building Society:** \_\_\_\_\_

Address: \_\_\_\_\_ A/C Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Post Code: \_\_\_\_\_ A/C No: \_\_\_\_\_

## SECTION 9 - NEXT OF KIN - Excluding Spouse. To be completed in all cases.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

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## SECTION 10 - HOUSING BENEFIT/LOCAL HOUSING ALLOWANCE.

Only prospective tenants intending to claim Housing Benefit/LHA to pay either full or part of their rent need complete this section.

Will you be claiming HB/LHA? Yes <input type="checkbox"/> No <input type="checkbox"/>	Benefits Office: <input type="text"/>
Which benefits do you receive? _____ _____ _____	Address: <input type="text"/>
<b>All tenants wishing to claim benefits are reminded that submitting a claim is no guarantee that your rent will be paid either in part or full. Should HB/LHA not pay your full rent (as agreed in the Tenancy Agreement) you will have to pay the shortfall. You should apply for a pre-tenancy determination by a rent officer if you are at all concerned.</b>	Postcode: <input type="text"/>
	Telephone: <input type="text"/>
	<input type="text"/>

## SECTION 11 - ADDITIONAL OCCUPANTS/CHILDREN - please list the names of ALL prospective occupants over 18 NOT being referred to separately. Please also provided details of ALL children living at property.

Name & Relationship: <input type="text"/>	DOB: <input type="text"/>
If part of a couple/relationship please provide length of time lived together: <input type="text"/> years & <input type="text"/> months	
Name & Relationship: <input type="text"/>	DOB: <input type="text"/>
Name & Relationship: <input type="text"/>	DOB: <input type="text"/>
Name & Relationship: <input type="text"/>	DOB: <input type="text"/>
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Name & Relationship: <input type="text"/>	DOB: <input type="text"/>
Name & Relationship: <input type="text"/>	DOB: <input type="text"/>

## SECTION 12 - POST TENANCY ADDRESS.

Please provide an alternative address at which we may correspond with you after the end of the tenancy.

Name: <input type="text"/>	
Address: <input type="text"/>	Telephone: <input type="text"/>
	Postcode: <input type="text"/>

## SECTION 13 - RELEVANT PERSON. Please provide details of the person paying the deposit

Name: <input type="text"/>	
Address: <input type="text"/>	Telephone: <input type="text"/>
	Email: <input type="text"/>
	Postcode: <input type="text"/>

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## SECTION 14 - ADDITIONAL INFORMATION

Nationality: <input type="text"/>	Will this be your main residence? Yes <input type="checkbox"/> No <input type="checkbox"/>
Smokers? <input type="text"/>	Do you own or keep any animals or pets? Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you been continuously resident in the UK for the last 9 months? Yes <input type="checkbox"/> No <input type="checkbox"/>	List details if yes: _____
<p><b>Where there are joint tenants or a third party, the Lead Tenant will represent the interests of all joint tenants and any third party and will act on their behalf specifically in connection with the completion of the Joint Repayment Form, any Statutory Declaration or Dispute Form or any other relevant forms. It is the responsibility of the lead tenant to agree with the landlord the distribution of the deposit at the end of the tenancy between the landlord, the joint tenants who are party to any joint tenancy and any third party. The lead tenant will be responsible for providing repayment information for each tenant and the third party to enable the Deposit Protection Service (DPS) to provide confirmation notices to each tenant and third party.</b></p>	
Name of Lead Tenant: <input type="text"/>	Who will the deposit be returned to at the end of the tenancy? <input type="text"/>

## SECTION 15 - DECLARATION

I/We hereby confirm that the information provided by me/us is, to the best of my/our knowledge, true and that the results of the findings will be forwarded to the appointed letting agent and/or landlord and may be accessed again should I/We apply for a tenancy agreement in the future. I/We agree that LetsXL Limited (the Data Controller) may search the files of a credit reference agency which will keep a record of that search. I/We also agree that any search will be made on an 'opt in' basis. I/We also understand that no details of the search will be given to me/us by the letting agent and/or the landlord but I/we may request the name and address of the credit reference agency to whom I/We may apply for a copy of any information provided. I/We also confirm that, in the event of my/our defaulting on the rental agreement, any such default may be recorded with the credit reference agency and may affect any future application for credit I/we may make.

Applicants Signature:

Date:

**APPLICATION FEE - £150.00 plus VAT. Administration Fee is paid on application and secures the available property for a maximum time of two weeks. Should your references prove unsuitable or the information given on your application form is incorrect, or you cancel the Tenancy prior to taking the property then this amount will NOT be refunded. We will need an application form completing for each person over the age of 18 who will be living at the property. All completed application forms and supporting documentation must be supplied within five working days of the above being paid.**

It is common practice for employers, previous landlords and other referees to request written authorisation from you before they will release information to us. The following page is an authorisation letter which we ask you to complete by inserting your name, full address and signature. We will use this letter only when requested by your referees.