



Issue Date: ___/___/___

Application fee paid:



NATALIE CLARKE RESIDENTIAL – COMPANY ASSESSMENT
APPLICATION FORM

THE TENANCY AGREEMENTS MUST BE SIGNED BY ALL PARTIES WITHIN 5 DAYS OF BEING ACCEPTED TO RENT THE PROPERTY. FAILURE TO DO SO WILL RESULT IN THE PROPERTY BEING READVERTISED.

Terms & Conditions:

We require the following from a potential tenant.

Please note your application will not be accepted unless it is completed in full (no exceptions).

- 1. **Application form** completed in full.
- 2. **Signed Guarantor form & copy of their identification** – e.g. Passport/ Driving License.
These forms can only be signed by a Northern Ireland based homeowner. Alternatively a double deposit would be acceptable.
- 3. **Copy of photographic identification** - e.g. drivers license or passport.
- 4. **Copy of Student Card** - if applicable.
- 5. **Proof of Address** - e.g. bank statement / utility bill.
- 6. **Proof of employment** - e.g. most recent 3 payslips.
- 7. **Bank statement** – Most recent statement.
- 8. **A *'Holding Deposit' of one month's rent** - Please ensure that you and all your co-tenants are happy with the property before you pay this fee as it is **non-refundable**, even if no application form has been submitted. Upon written acceptance of your application form, this holding deposit will become your security deposit and will automatically be lodged with the Tenancy Deposit Scheme (TDS) within 14 days as per legislation.

*The only condition a 'Holding Deposit' is refundable is if you are declined as applicants for the property.

If you have been accepted as a tenant, we will advise you and ask you for the following:

- 9. **One month's rent** – paid in advance – payable upon acceptance.
- 10. **Signed lease** within 5 days of you being accepted to rent the property.

Failure to carry out points 9&10 will result in the property being readvertised to rent and your holding deposit will not be refunded.

I have read and understood the above:

Applicants signature:_____

Print:_____

Date:_____

COMPANY/BUSINESS ASSESMENT APPLICATION FORM
Please print clearly as illegible forms cannot be considered.

(A) PROPERTY DETAILS:

Property Address:	
Proposed Rent (pcm):	£
Preferred Move in date:	
Furnishing Arrangement:	Furnished / Unfurnished / Other:

If your application is successful the property is let as seen, however if you have specific requirements please note them below as the landlord may not agree to any changes once your application has been approved.

(B) COMPANY DETAILS: To be completed by the applicant company (mandatory for all assessments) Please complete ALL boxes

Full Company Name	
House No / Name	
Flat No / Name	
Street	
Town	
County	
Postcode	
Daytime Telephone	
Email Address	
Website Address	

Company Type

Public Ltd	Private Ltd	Partnership	Sole Trader	Proprietor	LLP	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If Private Ltd or PLC please provide registration Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Approximate date of company transformation:

(C) COMPANY CONTACT DETAILS:

Mr/Mrs/Miss/Ms	
First Name	
Surname	
Email Address	
Job Title	

(D) DETAILS OF ACCOUNTANT OR AUDITOR (please authorise your accountant/ auditor to provide a reference)

Practice Name	
Office/House Name	
Street No /Name	
Town	
County	
Postcode	
Contact Name	
Daytime Telephone	Ext
Email Address	

(E) TRADE REFERENCES (1)

Name	
Office/House Name	
Street No /Name	
Town	
County	
Postcode	
Contact Name	
Daytime Telephone	Ext
Email Address	

TRADE REFERENCES (2)

Name	
Office/House Name	
Street No /Name	
Town	
County	
Postcode	
Contact Name	
Daytime Telephone	Ext
Email Address	

APPLICANT INFORMATION:

TITLE (Mr. / Mrs. / Ms):		First Name:	
Middle Name:		Surname:	
Date of Birth (dd/mm/yy)		Marital Status:	
National Insurance No:		Maiden Name:	
Sex:		No. of Dependents	
Phone no (Home):		Mobile:	
Phone no. (Work / Daytime)		Email:	

How many children will be sharing with you:			
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Lead Tenant: Please nominate a ***‘lead tenant’**

TITLE (Mr. / Mrs. / Ms):		First Name:	
Surname:		Email:	

*If the Tenant comprises more than one person, the landlord or their agent shall nominate one of the tenants to be the "Lead Tenant" for the purposes of dealing with the landlord/agent in respect of any of the issues that arise during the Tenancy, including, but not limited to, the Deposit.

The Lead tenants is responsible for starting or agreeing the repayment of the deposit process at the end of the tenancy, and all tenants should familiarize themselves with the guidance document *'How TDS Northern Ireland deals with tenancies involving more than one tenant or landlord'* available from www.tdsnorthernireland.com

Further information:

Do you or any intended occupiers smoke:	Yes / No
Do you have any pets? If Yes, what;	Yes / No
Number of Children that are living with you?	
Please give full names, date of birth and occupation of all person including yourself and any children who will occupy the premises:	

(E) EMPLOYMENT INFORMATION:

Status (Circle One); Employed Self Employed On Contract Retired Student Unemployed	
Length of employment:	
Type of Employment:	Full Time Permanent / Part Time Permanent
Employer name & Address:	
Job role / Title:	Salary or Weekly pay (£)
Payment date:	Contract hours per week:
Is your employment to change in the near future: If Yes, please specify.	
If you have additional income please specify how much:	
<u>PREVIOUS EMPLOYMENT DETAILS (If employed in current job for less than 3 years)</u>	
Company Name & Address:	
Address	Telephone Number:
Commencement Date	Departure Date:

Your current address – We require 5 years previous address history. Please use additional paper if necessary

House No:	
Street Name:	County:
City / Town:	Postcode
Status (Circle One) Owner / Rented / Living with Parents / Council tenant / Other:	
How long have you lived at that address:	
Reason for leaving that property:	
If rented state the date the tenancy began and ended & month rent:	Began: / / Ended: £
Name of Landlord / Managing Agent	
Address:	
Telephone Number:	E-mail:

Previous address to above:

House No:	
Street Name:	County:
City / Town:	Postcode
Status (Circle One) Owner / Rented / Living with Parents / Council tenant / Other:	
How long have you lived at that address:	
Reason for leaving that property:	
If rented stated the date the tenancy began and ended & month rent:	Began: / / Ended: £
Name of Landlord / Managing Agent	
Address:	
Telephone Number:	E-mail:

(J) Guarantor Details (One approved Guarantor per tenant who is a Northern Ireland homeowner. Alternatively a larger deposit may be requested which is usually three month's rent in lieu of a Guarantor)

Name of Guarantor:		
Guarantor's Address:		
Guarantor's Telephone No:		
Relationship to applicant:		
Occupation:		
Employer:		
Telephone Number: / Mobile:		
E-mail Address		
NI Homeowner:	Yes:	No:
How long has guarantor lived at present address:		

(K) Referee's Details

Preferably a previous landlord or current or former employer.

Name of Referee:		
Referee's Address:		
Telephone Number:		
Occupation:		
How long has the referee known the applicant:		

THIS APPLICATION IS STRICTLY PRIVATE AND CONFIDENTIAL BETWEEN THE PARTIES INVOLVED.

SATISFACTORY REFERENCES MAY NOT NECESSARILY GUARANTEE THE APPLICANT THE TENANCY.

ALL TENANCIES ARE FOR A 12 MONTH PERIOD UNLESS OTHERWISE STATED.

PLEASE NOTE THAT ALL DEPOSITS ARE GIVEN TO THE LANDLORD AND NOT HELD BY NATALIE CLARKE RESIDENTIAL.

I confirm that all information supplied is true and will be the basis of any contract between Natalie Clarke Residential and myself and does not represent any offer between Natalie Clarke Residential and the prospective Tenant. I acknowledge and agree to Natalie Clarke Residential consulting with guarantors, references and employers as part of this application process. I understand that Natalie Clarke Residential may seek a bank or employers reference and may keep a reference and may keep a record of that reference on their files. The results of their findings will be passed to the Landlord / Managing Agent and if application is refused, for whatever reason, no explanation will be given. Please note that if accepted for the property and the property is managed by Natalie Clarke Residential there is a £50.00 check out fee.

I understand that any administration charges levied are strictly non-refundable in any event that I do not precede with the tenancy.

Strict confidence will be observed in the processing with this tenancy.

Applicants Signature: _____ Print: _____ Date: ____/____/____

GUARANTOR

In consideration of the acceptance by the within named Landlord at my request of the within named Tenant as tenant I HEREBY GUARANTEE the punctual payment of the rent reserved by the within written Tenancy Agreement or for the time being payable by the said Tenant in respect of the said premises (whether such rent be greater or less than that reserved by the said Agreement) and the due performance of the agreements by the Tenant and terms therein contained or the time being applicable to the Tenant's tenancy of the said premises. I HEREBY UNDERTAKE to be responsible to the Landlord and to the Landlord's successors in title as surety for the said tenant for the payment by him of the sums of money, costs, damages or expenses that may become due to the Landlord or to his successors in title by reason of the Tenant having become or being a tenant of the said premises or by reason of any default by the Tenant in carrying out any of his obligations as such tenant. I also guarantee any subsequent term in relation to this particular tenant in this particular property.

This guarantee shall not be revocable by notice and shall not be revoked by my death or by any forbearance or giving of time by the Landlord or his successors and shall continue to be applicable so long as the Tenant shall be Tenant of the said premises notwithstanding any change or changes in the nature or terms of his tenancy and shall extend to the obligations of the Tenant under any new or varied tenancy of the said premises in like manner as if such obligations had been contained in the within written Agreement.

Address of Property to be Rented-

Dated this _____ day of _____ 202__

Signed in the presence of- _____

Name of Guarantor-

Address of Guarantor-

Email address of Guarantor-

Mobile No. of Guarantor-

Home No. of Guarantor-

Signed Guarantor-
(Subject to Contract / Subject to Lease)

FOR OFFICIAL USE ONLY	
CHECKED GUARANTOR:	DATE:
CHECKED REFERENCE:	DATE:
APPLICATION FEE PAID	DATE:

