

# FULLY COMPREHENSIVE ASSESSMENT TENANT APPLICATION FORM



Sections 1, 2 and 12 should be completed by the letting agent/landlord, all other sections should be completed by the tenant. To ensure accuracy please complete in **BLACK INK** and **BLOCK CAPITAL LETTERS**.

## 1. LETTING AGENT/LANDLORD DETAILS (either complete your registration number or complete all other fields)

<input type="checkbox"/> Letting agent	<input type="checkbox"/> Landlord	Registration number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Full name	<input type="text"/>								
Company name (where applicable)	<input type="text"/>								
Telephone number	<input type="text"/>				Branch	<input type="text"/>			

## 2. TENANCY DETAILS

Rental address	<input type="text"/>								Postcode	<input type="text"/>
Total rent for the property	£	<input type="text"/>	per calendar month	Rent payable by prospective tenant	£	<input type="text"/>	per calendar month			
Total number of tenants	<input type="text"/>			Number of tenants to be assessed*	<input type="text"/>					
Names of other tenants	<input type="text"/>									
Tenancy start date	<input type="text"/>			Length of tenancy	<input type="text"/>		Years	<input type="text"/>		
Is an upfront deposit payable?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		If yes, please provide details	£ <input type="text"/>					
Is the property?	<input type="checkbox"/> Unfurnished	<input type="checkbox"/> Part-furnished		<input type="checkbox"/> Fully-furnished						
Type of let?*	<input type="checkbox"/> Tenant find only	<input type="checkbox"/> Fully managed		Term of embedded insurance?*	<input type="checkbox"/> 6 months	<input type="checkbox"/> 12 months				

\* A separate application form will need to be completed for each tenant.  
\*\* Only required when insurance is included within the reference package.

## 3. PERSONAL DETAILS (to be completed by the prospective tenant)

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	Other (please specify)	<input type="text"/>				
First name(s)	<input type="text"/>			Surname	<input type="text"/>				
Maiden name	<input type="text"/>			Date of birth	<input type="text"/>				
Home telephone number	<input type="text"/>			Mobile telephone number	<input type="text"/>				
Email	<input type="text"/>								

## 4. TENANT'S ADDRESS DETAILS

Current address***	<input type="text"/>						Postcode	<input type="text"/>
Status at current address	<input type="checkbox"/> Tenant (private)	<input type="checkbox"/> Tenant (council)	<input type="checkbox"/> Owner	<input type="checkbox"/> Living with friends/family	Time at address	<input type="text"/>	<input type="text"/>	<input type="text"/>
Previous address***	<input type="text"/>						Postcode	<input type="text"/>
Status at previous address	<input type="checkbox"/> Tenant (private)	<input type="checkbox"/> Tenant (council)	<input type="checkbox"/> Owner	<input type="checkbox"/> Living with friends/family	Time at address	<input type="text"/>	<input type="text"/>	<input type="text"/>
Previous address 2***	<input type="text"/>						Postcode	<input type="text"/>
Status at previous address 2	<input type="checkbox"/> Tenant (private)	<input type="checkbox"/> Tenant (council)	<input type="checkbox"/> Owner	<input type="checkbox"/> Living with friends/family	Time at address	<input type="text"/>	<input type="text"/>	<input type="text"/>

\*\*\* To provide an accurate assessment, please provide details of all addresses you have lived at in the last 3 years. Please continue in the additional supporting information section if necessary.

## 5. INCOME DETAILS (please provide full details to ensure a quick response)

Status	<input type="checkbox"/> Employed	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Not employed	<input type="checkbox"/> Retired	<input type="checkbox"/> Student
	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Casual	<input type="checkbox"/> Temporary	
Job title	<input type="text"/>		Business trading name if self-employed	<input type="text"/>	
Employer's/accountant's name and address	<input type="text"/>				
	Postcode				
Payroll number	<input type="text"/>	Contact name for employer reference	<input type="text"/>		
Email contact for employer reference	<input type="text"/>	Fax number for employer reference	<input type="text"/>		
Telephone number for employer reference	<input type="text"/>	Your work telephone number	<input type="text"/>		
Gross annual salary	£ <input type="text"/>	Department	<input type="text"/>		
Time in job	<input type="text"/>	Years	<input type="text"/>	Months	
	If less than 6 months, please supply previous employer details, including time in employment, in the additional supporting information section				
Are you in receipt of any other income?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
If yes, please provide details of source and annual amounts	<input type="text"/>				

## 6. EXISTING LANDLORD OR MORTGAGE LENDER DETAILS

Company/individual name	<input type="text"/>		
Address	<input type="text"/>		
	Postcode		
Email address for rent/mortgage reference	<input type="text"/>		
Telephone number for rent/mortgage reference	<input type="text"/>	Fax number for rent/mortgage reference	<input type="text"/>
Amount of rent/mortgage paid	£ <input type="text"/>	per calendar month	
Reason for tenancy/mortgage ending	<input type="text"/>		

## 7. FINANCIAL HISTORY

Have you ever had a judgment or debt recorded against you or your business partner, been declared bankrupt/sequestered or failed to maintain payments under any mortgage or other credit agreement?

Yes

No

If yes, please provide details

## 8. BANK DETAILS

Name of bank	<input type="text"/>							
Branch sort code	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>
Account 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"/>
Account name	<input type="text"/>							

## 9. ADDITIONAL SUPPORTING INFORMATION

Please use this section to provide any additional information you feel is relevant to your application.

Please continue on a separate sheet if necessary

## 10. SUBMISSION REQUIREMENTS

Documentation should relate to prospective tenant  
Please tick box and enclose

- |  |   |
|--|---|
| <input type="checkbox"/> 2 forms of identification****<br>(1 showing signature and 1 confirming current address) | <input type="checkbox"/> Accounts or latest SA302<br>(if self-employed) |
| <input type="checkbox"/> Most recent mortgage statement<br>(if current/previous address was mortgaged)           | <input type="checkbox"/> Most recent original payslip                   |
| <input type="checkbox"/> 3 months' bank statements   |   |

\*\*\*\* This documentation is mandatory

## 11. TENANT VERIFICATION DECLARATION

The information that I have given in this application form is true, accurate and not misleading, to the best of my knowledge. I consent to this information being verified by fair and lawful means, which I understand may involve contacting referees (including my existing/previous employer, landlord or accountant) and licensed credit reference agencies for the purpose of assessing my tenancy application during the tenancy selection process. If fraud is identified during the verification process, the information and decision will be retained for future use on systems used by Redbrick and The Paragon Group of Companies.

I consent to Redbrick searching information held by the credit reference agencies and understand that a record of this search will be kept and shared with the letting agent, and/or landlord, and/or any intermediary. The information may also be accessed again if I apply for/guarantee a tenancy in the future.

I understand that you may also use credit scoring or other automated decision-making systems when assessing this application.

I consent to the information contained in my application form being used by Redbrick, other members of The Paragon Group of Companies or your selected third party partners to notify me of other products and services, which may be of interest to me.

My preferred method of contact is:     Telephone     Post     Email

I understand that I have a right at any time to stop you or your partners from contacting me for these purposes by writing to you at the address below.

The information will be processed in accordance with the Data Protection Act 1998. Redbrick Tenant Assessment is a trading style of Redbrick Real Estate Services Limited, a member of The Paragon Group of Companies.

Signature of prospective tenant	Print name	Date
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## 12. PROSPECTIVE LANDLORD DETAILS (to be completed by the letting agent/landlord)

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms	Other (please specify)	<input style="width: 95%;" type="text"/>
First name(s)	<input style="width: 95%;" type="text"/>	Surname	<input style="width: 95%;" type="text"/>
Company name (where applicable)	<input style="width: 95%;" type="text"/>		
Contact address	<input style="width: 95%;" type="text"/>		
	Postcode		
Email	<input style="width: 95%;" type="text"/>		
Telephone number	<input style="width: 95%;" type="text"/>	Fax number	<input style="width: 95%;" type="text"/>

# ADDITIONAL INFORMATION

Your letting agent may require additional information to prepare for your tenancy agreement. Please complete the sections below if requested to do so.

## PERSONAL REFERENCE DETAILS

Please provide the name and contact details of someone who can provide a personal reference should an employer and previous landlord/lender reference be unavailable.

This person should not be a member of your family.

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

## ADDITIONAL PERSONAL INFORMATION

Marital status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced/ separated	Other (please specify)	<input type="text"/>
National Insurance number	<input type="text"/>				
Passport number	<input type="text"/>				
Name(s) and date(s) of birth of any dependants	<input type="text"/>				
Name of next of kin	<input type="text"/>				
Address	<input type="text"/>				Postcode
Telephone number	<input type="text"/>				
Are you a smoker?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
Do you intend to keep pets at the property?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
If yes, please provide details of type of pet(s), breed of pet(s) and name of pet(s)	<input type="text"/>				

**Note to letting agent - please retain this page for your own records**