



Keable Homes Ltd
Sales & Lettings

**SUITE 1, WATLING CHAMBERS
214 WATLING STREET
CANNOCK
WS11 0BD**

TEL: 01543 468847

www.keablehomes.co.uk

APPLICATION FOR TENANCY

This form must be completed and signed before any application for tenancy can be formally considered. Applicants are reminded that in addition to the reference information requested herein they must also provide proof of identification and proof of residence.

Keable Homes Ltd charge a Holding/Application Fee. This fee is to cover the cost of processing your tenancy request and the preparation of the Tenancy Agreement and associated documents. The required fees are outlined in the Terms of Application enclosed and, once paid, are non-refundable. Each individual tenant must complete an 'Application for Tenancy'.

If your application is successful you will have to pay a deposit. This deposit will be held by Keable Homes Ltd as stakeholders. The deposit will not be returned until your tenancy is ended and only then provided your rent is paid in full and on the proviso that the household bills are paid (we will require proof) and the property is returned in a satisfactory condition. NB: Before the deposit is refunded we will also consult with the Landlord.

Property _____

Property you wish to apply for: _____

MAIN FEATURES OF AN APPLICATION CONSIDERED ACCEPTABLE:-

An applicant must

- * Be 21 years of age or over
- * Be in a permanent job for a minimum of 6 months
- * Have a gross income of at least two and a half times the stated rent
- * Provide ID and proof of address for all applicants (including recent utility bill, driving license and passport) – **WE CANNOT PROCESS THIS APPLICATION WITHOUT ID**
- * **AGREE TO A FULL FINANCIAL CREDIT CHECK – This considers your money management, credit limits, CCJ's etc.**

TERMS OF APPLICATION

1. All tenancies will be for an initial period of 6 months.
2. All applications must be in writing on the application forms supplied. Forms which are incomplete cannot be processed.
3. All applicants should be in full time employment.
4. All applicants are required to consent to Employers, Personal and Credit References being carried out.
5. It will be assumed that applicants have inspected the property in question and are satisfied as to its general condition.
6. An application fee of £222 including VAT will be made to cover the referencing and processing of the application. The total fee is payable at the time of submitting the application forms. This charge covers the cost of referencing and also includes the preparation of the Tenancy Agreement, associated documents and other administration. **The charge is non-refundable.**
7. **Should you be a couple or two people sharing that have NOT resided at the same address the application fee will be £318 including VAT as you will have to be referenced separately.**
8. The payment of the deposit (the agreed rent figure plus ten pounds) and the first month's rent is due upon signing of the Tenancy Agreement in cash, bankers draft or card payment. Credit cards carry a 2% charge.
9. All rents must be paid by standing order on the 1st of every month.
10. The Landlords agent will return the deposit upon a satisfactory final inspection at the end of the tenancy. The deposit cannot be considered at the final month's rent and must not be used for this purpose.
11. Properties must be vacated in the same condition as they were at the beginning of the tenancy. This includes the garden if applicable. All or some of the deposit may be retained to rectify any damage, cleaning or gardening to be done.
12. All services (water, electricity, gas and council tax) will be transferred into the tenant's name.
13. No repairs, alterations or decorations can be carried out without prior written consent from the Landlord.
14. The Tenant's must take out liability insurance which can also cover the Tenants & Landlords contents against accidental damage.

Tenancy Deposit Scheme

All tenancy deposits now must be protected and registered. You must provide an address where you can be contacted **after you vacate** the property you intend to rent.

We cannot produce the Tenancy Agreement without this address, therefore please enter the post tenancy address in the space provided below. (e.g. parents address)

POST TENANCY
ADDRESS.....
.....
.....

Do you have any criminal convictions? Yes No

If yes please give
details.....
.....
.....

Who is the person providing the deposit? Tenant Other

If other please give
details.....
.....
.....

Will this property be you're only or principle home? YES No

Tenants Insurance – Your responsibility

Keable Homes Ltd work in partnership with Let Alliance who will provide you with a no obligation quote for tenant liability insurance upon completion of your reference application. Alternatively you can provide Keable Homes Ltd with a copy of your current policy details prior to move in.

INDIVIDUAL APPLICATION

AGENT NAME: Keable Webb

AGENT CODE: 600255

SECTION 1 – TO BE COMPLETED BY THE LETTING AGENT

References: Express Ultimate
 Is Global Reference Required? Express Global Ultimate Global
 Do you require Evict? Yes No

(For RG complete below)

Product required
 R/G Period: 6 months 12 months
 R/G Type: Per Tenant Per Property

Address line 1:
 Address line 2:
 Address line 3:
 Postcode:
 Tenancy term:

Tenancy details
 Monthly Rental: £..... Rent share for applicant £.....
 No. of tenants being referenced:
 Proposed tenancy start date:
 (Can be altered later if necessary)

Is the Property Let Only Fully Managed

SECTION 2 – TENANTS PERSONAL DETAILS

Title:
 Forename:
 Middle Name(s):
 Surname:

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 referencing and insurance
 solutions for letting agents

Head Office
 Let Alliance Limited,
 Dodlestone House,
 Bell Meadow Business Park,
 Park Lane,
 Pulford, Chester,
 CH4 9EP

T: 01244 421261

London Office
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 3 Lombard Street,
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Date of birth:/...../.....

Marital Status: Married Divorced Not Married Civil Partnership

Mobile number

Contact details: Contact number

E-mail address

If you have ever been known by another name please confirm it here

SECTION 2 – TENANTS PERSONAL DETAILS (continued)

You must provide three years address history

Present address

Address line 1:

Address line 2:

Address line 3:

Postcode:

Time at this address: Yrsmths

Address Status (circle): Owner Rented Accommodation
Living with Parents/Friends Other:

Previous address 1:

Address line 1:

Address line 2:

Address line 3:

Postcode:

Time at this address:Yrsmths

Please Complete if you have been at your current address less than 6 months

Address Status (circle): Owner Rented Accommodation

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Living with Parents/Friends Other:

Previous address 2:

Address line 1:

Address line 2:

Address line 3:

Postcode:

Time at this address:Yrsmths

(If more space required, please use reverse of form)

SECTION 3 – LANDLORD / LETTING AGENT DETAILS

Name of Landlord / Letting Agent:
(where you are living at present or if not renting, the details of your last Landlord or Agent)

Please Note :
Failure to provide adequate contact details could delay your application

Number:

Email:

Fax:

Address line 1:

Address line 2:

City: Postcode:

Tenant Credit Information (if applicable)

ADVERSE CREDIT

Do you have any current/historic or pending adverse credit? Yes / No

If Yes, give details.....

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IT IS IMPERATIVE THAT YOU DECLARE ANY ADVERSE CREDIT, WHETHER IT IS SATISFIED OR UNSATISFIED. FAILURE COULD HAVE A DETRIMENTAL AFFECT ON YOUR APPLICATION.

Do you have any CCJs or Court Decrees? Yes / No

If Yes, give details.....

Have you ever been declared bankrupt or any IVA's, etc.? Yes / No

If Yes, give details.....

SECTION 4 – EMPLOYMENT DETAILS

Current Employment Status Please circle one: Employed Unemployed Self Employed Independent Means Contract Worker Temp Worker Student Retired

NOTE: If Self-Employed, a Director of your own Company, Retired or Independent Means, go to Section 5

Name of company:

If company Director, Company Number:

Position Gross Salary

Shift Allowance Overtime

Bonus Car Allowance

Name of company: London Weighting

If Company Director, Company Number: Payroll No..... Start Date...../...../..... Full Time / Part Time (circle)

Address line 1:

Address line 2:

Address line 3:

Postcode:

Contact name:

Email:

Contact Number:

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Fax number:

Contact Position:

Is your current position going to change in the near future Yes / No

If yes, please complete as below:

Future employment details
(if current position is due to change in the near future)

**Future
Employment
Status**

Please circle one: Employed Unemployed Self Employed Retired
Contract Worker Temp Worker Student Independent Means

Name of company:

Position Gross Salary

Shift Allowance Overtime

Bonus Car Allowance

London Weighting

Payroll No..... Start Date...../...../..... Payroll No.....

Address line 1:

Address line 2:

Address line 3:

Postcode:

Position which you will hold:

Contact name:

Email:

Contact Number:

Fax:

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Do you have any other source of income?

Additional Income (proof will be required)

Tax Credits	£.....	Disability Benefit	£.....
Child Maintenance	£.....	Housing Benefit	£.....
Carers Allowance	£.....	Fosterers Allowance	£.....
Child Benefit	£.....	Employment Support Allowance	£.....
Guardian Allowance	£.....		
Additional Income 1	£.....	Additional Income 1	£.....
Description		Description	

SECTION 5 – ACCOUNTANT / PENSION PROVIDER

Self-Employment/Retired/Independent Means Start Date /...../.....

Annual Income - £..... Will accountant be verifying income? Yes / No

Does the applicant have a private pension Yes / No How many?

Have finalized accounts been prepared? (circle) Yes – by accountant Yes – Self Assessment No

Accountant / Pension Company details

Name of Accountant:

Name of Pension Company:

Pension No..... Pension amount £.....

Address line 1:

Address line 2:

Address line 3:

Postcode:

Contact name:

Email:

Contact number: Fax number:

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NATIONAL INSURANCE NUMBER:

Please provide your NI number

Nationality

OTHER OCCUPANTS: Details of other people who will be staying in the property

Number of adults: Number of children:

Are any of the occupants Smokers? Yes / No

Do you have any pets? Yes / No

If yes to these questions, please provide details:

EMERGENCY CONTACT: (This must not be a cohabiting tenant)

Next of Kin name:

Contact telephone number:

e-mail address:

Home address:

Relationship to tenant:

SECTION 6 – DECLARATION

I hereby certify that the information provided is true and accurate and give permission for this information to be verified by third parties and disclosed as detailed above for the purpose of:

- Performing a credit search by a third party agency
- Contacting my current, previous employers and referees to confirm the details provided
- Fraud prevention, credit assessment and insurance decisions

I understand that the results of these searches, **and any documentation shared with Let Alliance**, will be provided to the Letting Agent and accessed again in the event of a default in my rental payments.

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 to authorised debt recovery agencies and could affect any future applications I make for tenancies, credit and insurance.

I understand that providing false information may lead to early termination of any subsequent tenancy agreement. I am happy for Let Alliance to contact me in respect to this application if required. I have read and agree to be bound by the above terms.

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Let Alliance will hold your details securely and will contact you with information, products and services directly related to your reference and tenancy. Let Alliance will never pass the details of applicants to third parties.

Please tick here if you would like one of our Let Alliance Insurance Team to contact you to provide a quote for our specialist Contents Insurance and/or Liability Insurance, therefore providing you with peace of mind that your valuables and the landlords fixtures and fittings are protected.

Please tick here if you would like our preferred partner 'TenTel' to contact you in order to offer you a broadband and/or telephone service designed specifically for tenants.

Signature: Date:

PLEASE RETURN THIS APPLICATION FORM TO YOUR LETTING AGENT SHOULD YOU HAVE ANY QUESTIONS REGARDING YOUR APPLICATION PLEASE DO NOT HESITATE TO CONTACT US ON 01244 421 261 OR EMAIL US AT TENANT@LETALLIANCE.CO.UK

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