

(2009)

APPLICATION TERMS - RESIDENTIAL LETTINGS

N.B. ALL APPLICANTS MUST BE 18 YEARS OF AGE OR OVER

THIS PAGE TO BE RETAINED BY THE APPLICANT

All completed applications are to be submitted with **TENANCY APPLICATION FEE(S)** (No application will proceed without payment of the Tenancy Application Fee) and one of the following documents to permit compliance with the Money Laundering Regulations.

Verification Section One - EVIDENCE OF NAME

- Current Full Signed Passport
- Resident Permit issued to EU nationals by Home Office
- National Identity Card / Passport (overseas clients)
- Current UK / EU Photo Driving Licence (1) (including paper counterpart)
- UK Armed Services ID Card
- State Pension or Benefits Book / Notification Letter (1)
- Police / Other Government department ID Card

Verification Section Two - EVIDENCE OF ADDRESS

- Current Local Authority Council Tax or Business Rates Bill
- Local Authority rent card or tenancy agreement
- Bank / Building Society / National Savings statement
- Utility Bill (not mobile phone) No older than 3 months
- Current UK / EU Photo Driving Licence (1) (including paper counterpart)
- State Pension or Benefits Book / Notification Letter (1)

Notes: (1) These items may be used to give evidence of address or identity but not both

ORIGINALS OF IDENTIFICATION DOCUMENTATION REQUIRED

Plus one of the following:

- **Signed, completed Bank Authorisation Form included within application form**
- **Social Security Payment Book**
- **Bank or Building Society Pass Book**

Where applications are submitted by post, please ensure that they are sent via a form of guaranteed delivery, for your own security. Should the application procedure, as detailed, not be adhered to, or should identification not be satisfactorily established, the application cannot proceed further.

EMPLOYED APPLICANTS: Once identification has been established, as outlined above, references will be sought from your Bank, current Landlord where applicable, Employer (or Accountant in the case of Self-employed Applicants) and a check with a Credit Reference Agency will be undertaken.

HOUSING BENEFIT APPLICANTS: Once identification has been established, as outlined above, references will be sought from your current Landlord where applicable, two Character Referees and a check with a Credit Reference Agency will be undertaken.

TENANCY TERMS:

The rent is to be paid either in weekly or calendar monthly units (frequency to be determined by Wilkins Hammond) in advance by **STANDING ORDER.**

At the start of the tenancy, the following are to be paid upon signing the Tenancy agreement:

- Four weeks or one calendar months rent in advance
- Security bond against tenancy obligations, as specified

IF YOUR RENT IS PAID EITHER IN FULL OR PART BY HOUSING BENEFIT:

- You remain responsible for payment of the rent in full
- Your payment of four weeks rent in advance will be held until the tenancy has expired
- Housing Benefit payments must be made directly from the Council to Wilkins Hammond Property Management
- All benefits are paid in arrears and there may be a delay in refunding the advance at the end of the tenancy.

PLEASE ASK FOR FURTHER INFORMATION IF REQUIRED

PLEASE NOTE THE FOLLOWING IMPORTANT INFORMATION

- **A CHARGE OF £90.00** INCLUSIVE OF VAT IS PAYABLE FOR THE FIRST EMPLOYED APPLICANT NOMINATED IN RESPECT OF ADMINISTRATION COSTS.
NO APPLICATION CAN BE PROCESSED WITHOUT PAYMENT
- **A CHARGE OF £60.00 IS PAYABLE FOR EACH ADDITIONAL APPLICANT NOMINATED** IN RESPECT OF ADMINISTRATION COSTS.
NO APPLICATION CAN BE PROCESSED WITHOUT PAYMENT
- ALL APPLICANTS MUST BE 18 YEARS OLD OR OVER
- NO PETS WITHOUT PRIOR LANDLORD AUTHORISATION
- PLEASE ALLOW TWO WEEKS FOR OBTAINING COMPUTER CREDIT SEARCHES, BANK REFERENCES, FORMER LANDLORD IF APPLICABLE, & EMPLOYER REFERENCE/ACCOUNTANT REFERENCE (IF SELF-EMPLOYED)
- UNSATISFIED C.C.J.'s NOT PREVIOUSLY NOTIFIED MAY PREVENT THE APPLICATION PROCEEDING FURTHER
- ADMINISTRATION CHARGES ARE NON-REFUNDABLE SHOULD STATUS ENQUIRIES PRODUCE UNSATISFACTORY RESPONSES.
- ADMINISTRATION CHARGES ARE NON-REFUNDABLE IF YOU WITHDRAW YOUR APPLICATION.
- REFUNDS OF ADMINISTRATION CHARGES WILL ONLY BE GRANTED SHOULD THE PROPERTY BE WITHDRAWN BY THE LANDLORD PRIOR TO SIGNING THE TENANCY AGREEMENT AND IF SUITABLE ALTERNATIVE ACCOMMODATION CANNOT BE OFFERED BY US.
- ALL INFORMATION SUPPLIED WILL BE HELD IN STRICT CONFIDENCE

APPLICATION FOR RENTED PROPERTY

FROM: WILKINS HAMMOND PROPERTY MANAGEMENT, DEVON HOUSE, 28 GLUMANGATE, CHESTERFIELD, DERBYSHIRE, S40 1TX. TELEPHONE: 01246 232853



PROPERTY TO LET

RENT: £				PER WEEK/MONTH	SECURITY BOND:	£
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PERSONAL DETAILS

TITLE	Mr/Mrs/Miss/Other	(PLEASE SPECIFY)
FIRST NAME (S)		
LAST NAME		
ANY OTHER NAMES YOU HAVE BEEN KNOWN BY		
MARITAL STATUS:	SINGLE/ MARRIED/ DIVORCED/ SEPARATED/ OTHER.....	(PLEASE STATE)
DATE OF BIRTH?	SMOKER?	YES <input type="checkbox"/> NO <input type="checkbox"/>
DO YOU HAVE ANY CHILDREN UNDER 18 LIVING WITH YOU?	YES <input type="checkbox"/> NO <input type="checkbox"/>	IF YES, HOW MANY?
ARE YOU INTENDING TO LIVE IN THE PROPERTY AS A SINGLE ADULT OR WITH ANOTHER ADULT?	(PLEASE SPECIFY)	
PETS?	YES <input type="checkbox"/> NO <input type="checkbox"/>	IF YES, PLEASE SPECIFY
NATIONAL INSURANCE NO:		
DO YOU HAVE ANY CRIMINAL CONVICTIONS OR PROSECUTIONS PENDING (Other than minor motoring offences)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

CONTACT DETAILS

HOME:	MOBILE:
WORK:	E-MAIL:

YOUR PRESENT ADDRESS

HOW LONG HAVE YOU LIVED AT THIS ADDRESS:		YEARS	MONTHS
WAS THIS PROPERTY:	OWNED / RENTED / PARENTS' / OTHER (Please state)		
LANDLORD NAME			
LANDLORD ADDRESS			POST CODE

IF YOU ARE NOT REGISTERED ON THE ELECTORAL ROLL THIS MAY DELAY YOUR APPLICATION

YOUR PREVIOUS ADDRESS

IF YOU HAVE NOT OCCUPIED YOUR PRESENT ADDRESS FOR MORE THAN 8 YEARS

		POST CODE
HOW LONG DID YOU LIVE AT THIS ADDRESS:	YEARS	MONTHS
WAS THIS PROPERTY:	OWNED / RENTED / PARENTS' / OTHER (Please state)	
LANDLORD NAME		
LANDLORD ADDRESS		POST CODE

IF YOU WERE NOT REGISTERED ON THE ELECTORAL ROLL THIS MAY DELAY YOUR APPLICATION

IF YOU DID NOT OCCUPY YOUR PREVIOUS ADDRESS UNTIL AFTER 2000 PLEASE SUPPLY DETAILS FOR THE PROPERTY YOU LIVED AT BEFORE

		POST CODE
HOW LONG DID YOU LIVE AT THIS ADDRESS:	YEARS	MONTHS
WAS THIS PROPERTY:	OWNED / RENTED / PARENTS' / OTHER (Please state)	
LANDLORD NAME		
LANDLORD ADDRESS		POST CODE

IF YOU WERE NOT REGISTERED ON THE ELECTORAL ROLL THIS MAY DELAY YOUR APPLICATION

FINANCIAL INFORMATION

DO YOU HAVE A CREDIT CARD?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If YES with which company?
DO YOU HAVE A BANK ACCOUNT?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If YES with which Bank?
WHAT TYPE OF ACCOUNT DO YOU HAVE?	SAVINGS / CURRENT / OTHER.....(PLEASE SPECIFY) (YOU MAY BE ASKED TO PROVIDE BANK STATEMENTS TO SUPPORT YOUR APPLICATION)	
WHAT IS YOUR CURRENT INCOME	£	PER WEEK / FORTNIGHT / MONTH / YEAR (YOU MAY BE ASKED TO PROVIDE PROOF OF INCOME TO SUPPORT YOUR APPLICATION)
ARE YOU RECEIVING BENEFITS?	YES <input type="checkbox"/> NO <input type="checkbox"/>	IF YES WHICH BENEFITS? (YOU MAY BE ASKED TO PROVIDE PROOF OF BENEFITS TO SUPPORT YOUR APPLICATION)

EMPLOYMENT DETAILS

ARE YOU CURRENTLY EMPLOYED?

YES

NO

WHAT IS YOUR OCCUPATION:

WHAT TYPE OF EMPLOYMENT DO YOU HAVE?

FULL TIME / PART-TIME / PERMANENT / TEMPORARY

OTHER Please specify

EMPLOYER'S NAME:

EMPLOYER'S ADDRESS:

POST
CODE

SELF-EMPLOYMENT DETAILS

ARE YOU SELF-EMPLOYED?

YES

NO

WHAT IS THE NAME OF YOUR BUSINESS?

WHAT IS THE NATURE OF YOUR BUSINESS?

BUSINESS ADDRESS:

POST
CODE

ACCOUNTANT DETAILS

ACCOUNTANT'S NAME:

(If self-employed please supply Accountant Details)

ACCOUNTANTS ADDRESS:

(self-employed please supply Accountant Details)

POST
CODE

CHARACTER REFEREES

PLEASE SUPPLY THE NAME AND ADDRESS OF SOMEONE WHO IS WILLING TO PROVIDE A CHARACTER REFERENCE. THIS PERSON MUST BE PROFESSIONAL, EMPLOYED OR SELF-EMPLOYED AND NOT RELATED TO YOU

CHARACTER REFEREE (1)

CHARACTER REFEREE (1)
ADDRESS

POST
CODE

CHARACTER REFEREE (2)

CHARACTER REFEREE (2)
ADDRESS

POST
CODE

IF YOU WISH TO SUPPLY ANY ADDITIONAL INFORMATION WHICH MAY SUPPORT YOUR APPLICATION, PLEASE PROVIDE THIS HERE

DECLARATION

I CONFIRM THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE AND COMPLETE

SIGNED DATE

We request that you provide your authorisation on the next page to enable us to make enquiries in respect of this application. Any information received during the course of our enquiries is confidential and will only be passed to the Landlord of the property for which you are applying.

CONSENT

I (PLEASE PRINT YOUR FULL NAME)

Consent to information being supplied in support of my application for rented accommodation

IN RESPONSE TO AN ENQUIRY FROM: **WILKINS HAMMOND PROPERTY MANAGEMENT**

ADDRESS: **"DEVON HOUSE", 28 GLUMANGATE, CHESTERFIELD, DERBYSHIRE, S40 1TX.**

☎: 01246 232853	FAX: 01246 211917	✉ enquiries@wilkins-hammond.com
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SIGNED DATE

✂.....

CONSENT

I (PLEASE PRINT YOUR FULL NAME)

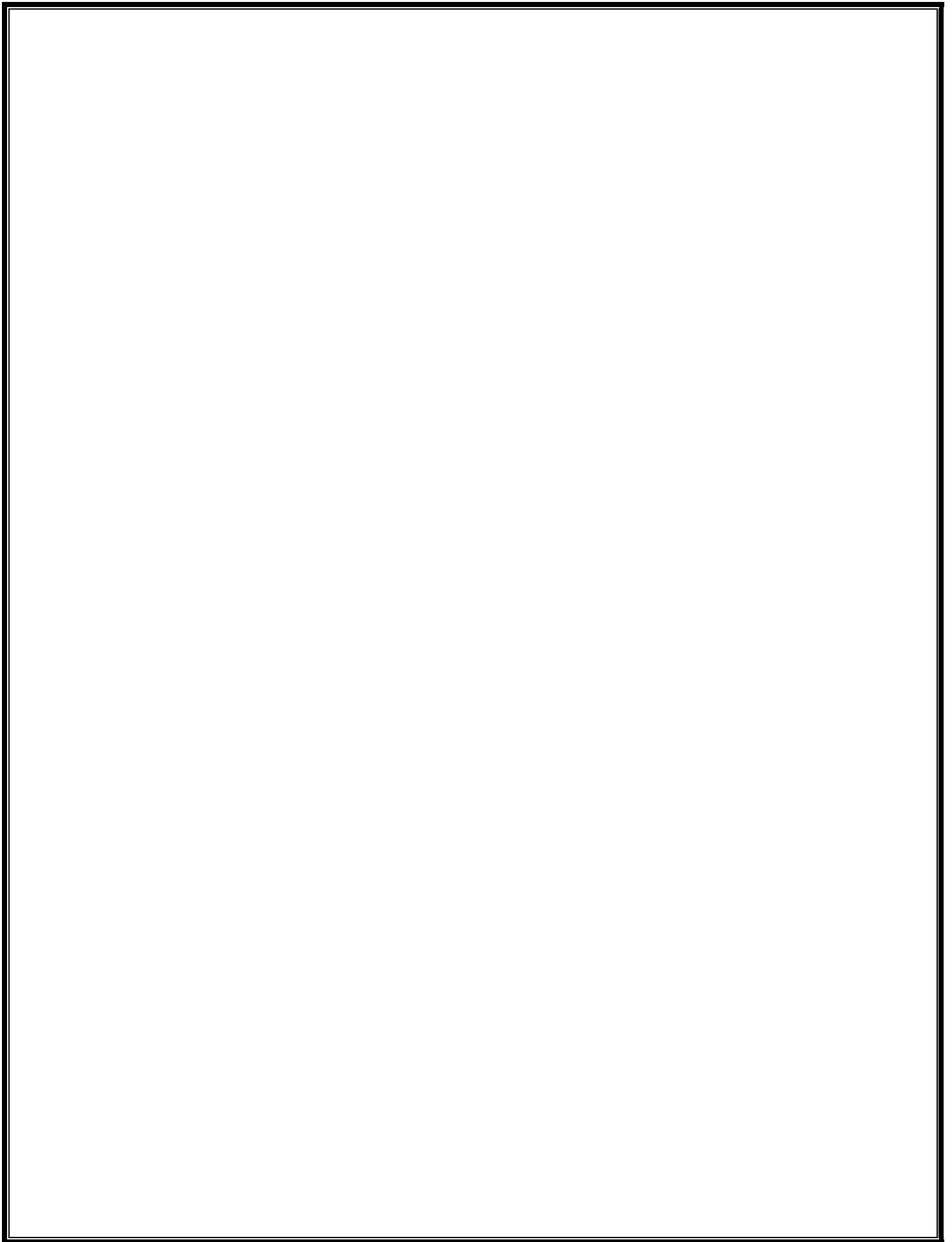
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SIGNED DATE



COMBINED ENQUIRY & CONSENT FORM

ENQUIRY TO:	The Manager	
BANK/BUILDING SOCIETY NAME:		
BRANCH:		
ADDRESS:		POST CODE
SORT CODE:		

ENQUIRY FROM:	WILKINS HAMMOND PROPERTY MANAGEMENT	
ADDRESS:	"DEVON HOUSE", 28 GLUMANGATE, CHESTERFIELD, DERBYSHIRE, S40 1TX. ☎: 01246 232853 Fax: 01246 211917	
<i>To be completed by the originator of the Status Enquiry (Wilkins Hammond):</i>	OUR CHEQUE FOR THE AMOUNT O F YOUR FEE IS ENCLOSED £ _____	

INFORMATION REQUESTED

We request your opinion as to the means and standing of:		
CUSTOMER ACCOUNT NAME:		
ACCOUNT NUMBER: (for identification purposes only)		
CUSTOMER ADDRESS:		POST CODE
AND THEIR TRUSTWORTHINESS IN THE WAY OF ABILITY TO PAY RENT UPON RESIDENTIAL ACCOMMODATION TO THE EXTENT OF:	£	PER WEEK /CALENDAR MONTH

TO BE COMPLETED BY THE PERSON WHO IS SUBJECT TO THE ENQUIRY

Consent:	
SUBJECT'S FULL NAME:	I/We
SUBJECT'S BANK/BUILDING SOCIETY:	Consent to
FULL NAME AND ADDRESS OF ENQUIRER:	Providing a reference on me/us to WILKINS HAMMOND , PROPERTY MANAGEMENT, "DEVON HOUSE", 28 GLUMANGATE, CHESTERFIELD, S40 1TX

SIGNED:	DATE:
SIGNED:	DATE:

A copy of the reply to this enquiry can be made available on request