TENANCY APPLICATION FORM Date Started Property Applying for Applicants Name E-mail Contact Tel no Date of Birth National Insurance Number **Current Address** How long have you lived at this address Home owner Y/N Years Months If less than 3 months previous address;

Landlords Details			
Name and Address			

Landlord De	tails Cont.		
Telephone n	umber		
F: 1 A dd-			
E-mail Addr	ess		
Are you in F	ull time emplo	oyment Y/N	Self Employed Y/N
Employer Na	ame and Addr	ess	
Employer Co	ontact no		
Employers E	E-mail address		
ъ .		C. P. COU. D. MAI	
Do you nave	e any Adverse	e Credit, CCJ's? Y/N	
If yes, please details	e give		
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	••••••		
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Do you have	e any Crimina	al Convictions in the last	5 years? Y/N
If yes please			
	•••••		

Children	Y/N	Ages	
Any Pets	Y/N		
Type		Bree	d

Are you a smoker or non Smoker?
ALL PROPERTIES MANAGED BY JAGUAR PROPERTY MANAGEMENT ARE NON SMOKING THIS INCLUDES E-CIGERETTES
I give permission for Jaguar Properties to carry out any Landlord / Employer Reference and Credit checks
Signed
Print Name
Print Name
Dated
NEXT OF KIN DETAILS.
Name
Address
Contact No

Age