



## Tenancy Application Form

Please complete in BLOCK CAPITALS and return to 9 Margaret's Buildings, Bath, BA1 2LP with proof of Residency

### PERSONAL DETAILS

Address of property to be rented:

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Post code: \_\_\_\_\_

Title: Mr / Mrs / Miss / Ms / Dr      Marital Status: Married / Single / Divorced / Co-habiting /  
Separated / Widowed

First names: \_\_\_\_\_ Surname: \_\_\_\_\_

Maiden/Other name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Over 18 yrs? \_\_\_\_\_

Mobile No: \_\_\_\_\_ Business / Home Tel: \_\_\_\_\_

Email Address: \_\_\_\_\_

Is this a joint tenancy: YES / NO      Are they contributing to the rent: YES / NO

If YES, names of other tenants:

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Total Rent per month: £ \_\_\_\_\_ Applicants share per month: £ \_\_\_\_\_

Rental Period: \_\_\_\_\_ Commencement date: \_\_\_\_\_

No. of dependents: \_\_\_\_\_ No. Male: \_\_\_\_\_ Age(s): \_\_\_\_\_ No. Female: \_\_\_\_\_ Age(s): \_\_\_\_\_

Pets: NO / YES (Please Specify) \_\_\_\_\_ Smoker / Non Smoker

Current Address: Owner / Rented / With Parents / Other (Please Specify)

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Post Code:-----

No. of years at present address:----- From----- To-----

Previous address (s) If current address is less than 3 years:

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Post Code:-----

Dates: From----- To-----

Are you aware of any adverse credit history? YES / NO

If YES please give details:

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#### REFERENCES

Employer's name:

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Address:

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----- Post code:-----

Contact name:----- Position:-----

Tel No:----- Fax No / Email:-----

Position held by Employee:----- Length of service:-----

Annual Salary: Basic £----- OTE £-----

#### If self employed please provide detail of Accountant

Name:-----

Address:

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Post code:----- Tel No:----- Fax No:-----

Annual earnings: £-----

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Present Agent / Landlord (if applicable) Name: \_\_\_\_\_

Tel No: \_\_\_\_\_ Fax No / Email: \_\_\_\_\_

Address:  
\_\_\_\_\_

Post code: \_\_\_\_\_ Rent payable: £ \_\_\_\_\_ Length of tenancy: \_\_\_\_\_

Was the rent paid regularly and on time? YES / NO

Were there or are there likely to be any claims for damages at the end of the tenancy? YES / NO

*I agree for Endsleigh Insurance Services to contact me with a no obligation quote for tenant's contents insurance, which is required as per the tenancy agreement.*

#### BANK DETAILS

Bank / Building Society details Name: \_\_\_\_\_

Address:  
\_\_\_\_\_

Sort Code: \_\_\_\_\_ Account / Roll No: \_\_\_\_\_

Time with bank: \_\_\_\_\_ Years \_\_\_\_\_ Months No of credit cards held: \_\_\_\_\_

#### NEXT OF KIN DETAILS

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Tel No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Address:  
\_\_\_\_\_

Post code: \_\_\_\_\_

Due to the confidential nature of the information supplied and required, we regret that no explanation will be given if we are unable to recommend a tenancy. This reference will be subject to the terms of Grounds 17 of the Housing Act 1996. In considering your application we will search your record at a credit reference agency. The results of our findings may be forwarded to the Landlord for approval.

I confirm that the information supplied is to the best of my knowledge and belief, true and have no objection to this information being verified by whatever means deemed necessary.

I understand that this will include contact being made with my current Landlord and Employer if relevant. By signing this declaration I agree that the information being requested by Dovetail Properties may be released to them for the purpose of my reference check.

Signed: \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_

National Insurance No: \_\_\_\_\_

**Dovetail Properties**  
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