

Full Applicant Premier Applicant

GUARANTOR PROPERTY RESERVATION FORM

COMPANY NAME

ACCOUNT NUMBER

CONTACT NAME

ALL PARTS OF THIS APPLICATION SHOULD BE FULLY COMPLETED AS FAILURE TO DO SO MAY AFFECT YOUR APPLICATION

GUARANTOR FOR

Private and Confidential

Property Details

Address: Rent p.c.m. per tenant: £

Rental Period: Intended occupation date:

About the guarantor

Mr Mrs Miss Ms (Please provide any previous names)

First Names: Surname:

Date of Birth: National Insurance No:

Address:

Town: County:

Postcode: Telephone No:

Time at this address: years Months

Are you the owner of the property? YES NO Do you pay a mortgage on this property? YES NO

Please state the monthly payment for your mortgage/rent/etc. £

(If no, state whether council tenant, private tenant or living with parents etc.)

Previous address (if less than seven years at the above)

Address:

Town: County:

Postcode: Time at this address: years months

State whether council tenant, private tenant or living with parents etc.:

Your relationship to the applicant?

(Mother/Father etc.)

Are you married/divorced/single etc.?

Number of dependants?

Do you have any County Court Judgements/poor credit history? YES

NO

(If yes, please give details on a separate sheet)

Your present employer

(If self-employed give Accountant's name & tel. no. And state Accountant please)

Company:

Address:

Town:

County:

Telephone No:

Fax No:

Position:

Salary:

Employment Commencement Date:

Payroll No:

Contact Name:

Position:

Your previous employer (if less than three years at the above)

Company:

Address:

Town:

County:

Postcode:

Telephone No:

Position:

Period Of Employment:

Contact Name:

Position:

Next of Kin (this must be a relative)

Name:

Relationship:

Address:

Town:

County:

Post Code:

aytime Telephone No.:

Evening Telephone No:

Character referee

Name:

Relationship (relatives not accepted):

Address:

Town:

County:

Daytime Telephone No:

Evening Telephone No:

Bank/building society details

Bank Name:

Address:

Town:

County:

Telephone No:

A/c No:

Sort Code:

A/c Type:

A/c Name:

IMPORTANT - The application will not be processed unless the declaration below is signed
TERMS AND CONDITIONS OF CHECK SEARCH ASSESSMENT

1. I agree that all parties on this form can be contacted and that these parties can provide all information they are asked for and also that this information may then be shared with a prospective landlord and / or their agent.
2. I authorise that Check Search Ltd may confirm my bank/building society details given above are correct.
3. I understand that checks will be made with County Court registers and if any unsatisfied County Court Judgements or adverse credit is registered against me the reservation may be cancelled and the deposit may be forfeited.
4. All information is only used to make an assessment for credit/insurance, property rental decisions.
5. To the best of my knowledge and belief the information I have given on this form is correct and complete.
I understand that if any unsatisfactory references are obtained or that if I give any false or misleading information that this may affect my assessment. The reservation could be cancelled and the deposit may be forfeited.
6. I confirm that should the tenant default on their rent payments I may be liable for any outstanding payments due.
7. I agree that Check Search Ltd may search the files of a credit reference agency, which will keep a record of that search. Details of how I conduct the account may also be disclosed to the agency. This information may be used by other lenders in assessing applications from me and my household and for occasional debt tracing and fraud prevention.

Signed:**Dated:**