Welden & Edwards
53 Bampton Street
Tiverton
Devon
EX16 6AL

Company reg. no: 05552114
Phone: 01884 257997

Email: lettings@weldenedwards.co.uk
Web: www.weldenedwards.co.uk

Tenant Application Form

It is mandatory to complete the whole form. Please use black ink and BLOCK CAPITALS.

Property Details

Property Address:	
	Postcode* :

Rental Details

Monthly Rental*: £	Tenancy term (months)*:
Number of Tenants/Guarantors*:	Start Date (dd/mm/yyyy)*:
Who is the lead tenant?:	Share of Rent*: £
Who will be funding the deposit?	Will this be the only or principle home of at least on tenant? ☐ Yes ☐ No

Tenant identification (to be completed by the landlord/ letting agent)

Has proof of residency been copied and put on file? (Proof of residency means 2 original and different documents such as bank statement, utility bill, council tax bill, telephone bill etc. with the applicant's name and current address on. The documents must not be older than three months, or the most recent version if issued less frequently, when this application is made.)	Has a certified and signed copy of a driving licence and/or passport and/or other valid personal identification been put on file? ☐ Yes ☐ No, specify ……..

Tenant applicants Details

Title*: ☐ Mr ☐ Miss ☐ Mrs ☐ Ms ☐ Other		
First Name*:		Full Middle Name:
Surname*:		Date of birth*:
Sex*: ☐ Male ☐ Female		National Insurance Number:
No of dependants*:	Marital Status*: ☐ Single ☐ Married ☐ Divorced ☐ Separated ☐ Widow(er)	
Daytime phone number*:		Mobile number:
Work number:		Email Address:
Any previous names*: First Name:	Last Name:	Used Until: dd/mm/yyyy
Nationality ……. Passport number …….		Do you need a work permit to work in the UK? ☐ Yes ☐ No
Please provide the address of any other UK property you own jointly or on your own.		
Do any of the applicants enjoy diplomatic immunity? ☐ Yes ☐ No		

Occupants – Please list everyone who will be living in the property: **Please use rear of sheet for additional info**

First Name:& Surname:	Nationality (to comply with the immigration Act 2014)	Date of birth:	Relationship to Applicant:	Smoker:	Lead tenant (tick box)

Please supply addresses to cover your last 3 years of residency

Address History – Current Address (Please complete all address details where appropriate)

Time at address: From*: dd/mm/yyyy	To: dd/mm/yyyy
Living status*: ☐ Furnished Tenant ☐ Unfurnished Tenant ☐ Own home ☐ Living with parents ☐ Other	
Address:	
	Postcode:
Reason for leaving:	

Address History – Previous Address 1 (Please complete all address details where appropriate)

Time at address: From*: dd/mm/yyyy	To: dd/mm/yyyy
Living status*: ☐ Furnished Tenant ☐ Unfurnished Tenant ☐ Own home ☐ Living with parents ☐ Other	
Address:	
Postcode:	

Next of Kin –

First name:	Surname:	Relationship:
Address:		
	Postcode:	
Email address:	Contact number::	

Character reference - – (must be a person who has known you at least 5 years)

First Name:	Surname:	Relationship:
Contact number:	Email Address:	
Address:		
		Postcode

Landlord details or Previous landlord details

Landlord / Agent Name*:	Contact Name*:
Phone Number*:	Mobile Number:
Email address	Email address:
Address:	
	Postcode:
Status at current address □ Tenant (private) □ Tenant (council) □ Owner □ Living with friends □ Living with family □ Other, please……	
Additional Information to assist the referee: Reason for leaving:	

Employment Details – If your Employment is likely to change please supply your offer letter or contact of new employment

Employment Type*:	☐ Full time employed ☐ Part time employed ☐ Temporary/Contract ☐ Unemployed ☐ Self-Employed ☐ Retired ☐ Student ☐ Housewife/Home maker ☐ Payment in advance
Occupation*:	
Employment status*:	☐ Junior ☐ Management ☐ Unskilled ☐ Supervisor ☐ Semi-skilled ☐ Skilled ☐ Senior Management ☐ Other ☐ Not applicable

Employer Details

Organisation Name:	Start date*: dd/mm/yyyy If less than 6 months please give additional details below.
Job Title*:	Employee/Payroll/Service number:
Address:	
	Postcode:

Employer reference details - Please provide details of the person/department of whom we may contact to obtain a reference

Contact Name:	Job Title:
Phone Number:	Mobile Number:
Fax Number:	Email Address:
Additional Information: (e.g: Is the contact's address different to the address above)	

Accountant Details

Do you have an accountant?*: Yes ☐ No ☐ If **No** Please provide 6 months bank statements showing proof of income	
Company Name *:	Contact Name*:
Phone Number:	Mobile Number*:
Email address	
Address:	
	Postcode:
Additional Information to assist the referee:	

Pension Details

Do you have proof of your pension?*: Yes ☐ No ☐ If **Yes** Please supply a copy of your annual pension statement	
Pension Providers Company Name:	Pension Ref Number:
Contact Name*:	Phone Number:
Email address:	
Address:	
	Postcode:
Additional Information to assist the referee:	

Affordability Details

Gross annual income*: £	Any additional sources of income?*: Yes ☐ No ☐ If **Yes** Please provide below
Amount of additional income per annum?* £	
Please provide details of any additional income*:	

Bank Details

Current account held?*: Yes ☐ No ☐ If **Yes** please enter the following details	How many credit cards held?*:
Sort code*:	Account number:
Account name *:	Name of bank*:
Address *:	
Time with bank*: (years)_____ (months)_____	Cheque guarantee card held*: Yes ☐ No ☐
Overdraft facility Yes ☐ No ☐ Overdraft limit £	If currently overdrawn, how much? £

Financial history and Criminal record

Have you ever received any County Court Judgments or Individual Voluntary Arrangements against you?* Yes ☐ No ☐ Not Asked ☐ If **Yes** please enter the details		
Have you ever been declared bankrupt?* Yes ☐ No ☐ Not Asked ☐ If **Yes** please enter the details		
Have you or anybody else moving into the property, who is not a joint tenant, any unspent criminal convictions?	Yes ☐	No ☐ (if yes, please give details) ……..
Have you ever had part of your deposit withheld on any previous tenancy?	Yes ☐	No ☐ (if yes, please give details)
Have you ever been served notice for not fulfilling any obligation during the tenancy?	Yes ☐	No ☐ (If Yes, Please enter details below)

Pets/animals required in the property:

Will any of the tenants have pets in the property?	Yes ☐	No ☐ If **Yes** Please provide below
If yes please provide details:		

Consent

I hereby confirm that the information I have given in this application form is true, accurate, to the best of my knowledge and not misleading.
I give my consent to the information being used by credit card companies, credit reference companies, existing/previous landlords/letting agents/employers/accountants etc. The information can also be used during any tenancy for the management of the property, including but not limited to, being given to contractors and being used to chase money owed.
I understand that the letting agent will use the information provided to make decisions about my application. This can also mean that if any information is found to be untrue, the application can be declined and I will lose all or part of the administration fee.
I agree to that information given by credit reference companies will be shared with the letting agent and landlord and that this information may also be accessed again if I apply for or guarantee a tenancy in the future.
I agree that the referees and bank listed above may be contacted by the landlord, agent or referencing company.

As part of the legal process of letting a property we are required to provide you with certain information prescribed by law. Please tick this box if we may email you this information and other documents and notices to reduce our

environmental impact through unnecessary printing ☐

By proceeding with this application you confirm that you have advised the applicant of how their data may be used as described above Endsleigh offer specialist contents insurance for all kinds of tenants. As an additional service we'll contact your tenant once their application is complete to discuss their insurance needs. Please note - Endsleigh won't pass this data on to any 3rd parties.

If the applicant would prefer not to be contacted by Endsleigh about insurance, please tick here ☐

By **signing your agreement to proceed** you are accepting that we may use your information in this way.

Signed: **Date:**

Please ensure that you have completed all fields indicated * as failure to do this may result in a delay in producing your report.

The information contained within this application is being transmitted to and is only for the use of Experian. If the reader of this message is not the intended recipient, you are hereby advised that any dissemination, distribution or copy of this application is strictly prohibited. If you receive this application in error, please immediately notify us by calling

Experian registered in England and Wales under the company registration number 653331.
Registered office address: Landmark House, Experian Way, NG2 Business Park, Nottingham NG80 1ZZ.