

INDIVIDUAL APPLICATION

AGENT NAME: Elliott Booth Ltd

AGENT CODE: 750012

SECTION 1 – TO BE COMPLETED BY THE LETTING AGENT

	References:	<input type="checkbox"/> Express	<input type="checkbox"/> Ultimate
	Is Global Reference Required?	<input type="checkbox"/> Express Global	<input type="checkbox"/> Ultimate Global
	Do you require Evict?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	(For RG complete below)		
	R/G Period:	<input type="checkbox"/> 6 months	<input type="checkbox"/> 12 months
Product required	R/G Type:	<input type="checkbox"/> Per Tenant	<input type="checkbox"/> Per Property
	Address line 1:	
	Address line 2:	
	Address line 3:	
	Postcode:	
Rental address	Tenancy term:	
	Monthly Rental:	£.....	Rent share for applicant£
Tenancy details	No. of tenants being referenced	
	Proposed tenancystart date: (Can be altered later if necessary)/...../.....	
	Is the Property	Let Only <input type="checkbox"/> Fully Managed <input type="checkbox"/>	

National1 Team

The Let Alliance Team

Tel: 01244 886 236

Email: national1@letalliance.co.uk

Fax: 01244 241 117

Please Complete if you have been at your current address less than 6 months

Address Status (circle): Owner Rented Accommodation
 Living with Parents/Friends Other:

Previous address 2: Address line 1:

 Address line 2:

 Address line 3:

 Postcode:

 Time at this address: Yrs Mths

(If more space required, please use reverse of form)

SECTION 3 – LANDLORD / LETTING AGENT DETAILS

Name of Landlord / Letting Agent:
 (where you are living at present or if not renting, the details of your last Landlord or Agent)

.....

Please Note : Number:

Failure to provide Email:

adequate contact Fax:

details could Address line 1:

delay your Address line 2:

application City: Postcode:

Tenant Credit Information (if applicable)

IT IS IMPERATIVE THAT YOU DECLARE ANY ADVERSE CREDIT, WHETHER IT IS SATISFIED OR UNSATISFIED. FAILURE COULD HAVE A DETRIMENTAL AFFECT ON YOUR APPLICATION

Do you have any CCJs or Court Decrees? Yes / No

If Yes, give details.....

Have you ever been declared bankrupt or any IVA's, etc.? Yes / No

If Yes, give details.....

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Future employment details
(if current position is due to change in the near future)

**Future
Employment
Status**

Please circle one: Employed Unemployed Self Employed Retired
Contract Worker Temp Worker Student Independent Means

Name of company:

Position Gross Salary

Shift Allowance Overtime

Bonus Car Allowance

London Weighting

Payroll No..... Start Date...../...../..... Payroll No.....

Address line 1:

Address line 2:

Address line 3:

Postcode:

Position which you will hold:

Contact name:

Email:

Contact Number:

Fax:

Do you have any other source of income?
Additional Income (proof will be required)

Tax Credits £..... Disability Benefit £.....

Child Maintenance £..... Housing Benefit £.....

Carers Allowance £..... Fosterers Allowance £.....

Child Benefit £..... Employment Support Allowance £.....

Guardian Allowance £.....

Additional Income 1 £..... Additional Income 1 £.....

Description Description

SECTION 6 – DECLARATION

Terms & Conditions

I hereby confirm that the information I have provided is true and accurate and give my permission for this information to be verified by TransUnion International UK Ltd, my employer and/or future employer/accountant, my current or previous landlord or managing agent and Lexis Nexis, TrustID (where applicable) and disclosed as detailed above for the purpose of:

- Performing a credit search by a third party agency (our current Partner is TransUnion and their Privacy Notice is located here (<https://www.transunion.co.uk/legal-information/bureau-privacy-notice>)).
- Verifying my income details
- Fraud prevention, credit assessment and insurance decisions

I understand that the results of these searches, **and any documentation shared with Let Alliance**, will be provided to the Letting Agent and accessed again in the event of a default in my rental payments.

Your tenancy agreement has associated risks and your obligations and liabilities are unlimited with regards to damage and dilapidations caused by you during the tenancy. During the referencing process Let Alliance will discuss with you ways in which you can mitigate risk including Tenants Liability Insurance.

I understand that I can request the details of any credit reference agencies used in order to verify the information provided.

I understand that providing false information may lead to early termination of any subsequent tenancy agreement. I am happy for Let Alliance to contact me in respect to this application if required. I have read and agree to be bound by the above terms.

I understand that Let Alliance will hold my details securely and will not pass these to third parties without my permission.

Our privacy statement can be found at <https://www.letalliance.co.uk/about/downloads/privacy-policy>

I confirm that I have read and agree with the above statement (*must be checked to continue*)

Let Alliance will hold the supplied details securely and will contact you in respect of this reference application if required.

Signature: Date:

PLEASE RETURN THIS APPLICATION FORM TO YOUR LETTING AGENT.

SHOULD YOU HAVE ANY QUESTIONS REGARDING YOUR APPLICATION PLEASE DO NOT HESITATE TO CALL OR EMAIL US AND A MEMBER OF OUR TEAM WILL BE HAPPY TO ASSIST YOU

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