



Tenant Referencing Service

Comprehensive Guarantor Application Form

In order for the application to be processed quickly, please complete in BLOCK CAPITALS and ensure the application is completed in full. All sections marked with * are mandatory information.

Agent Details

| | |
|----------------|----------------|
| Name of agent: | |
| Branch number: | Contact name : |
| Locality: | Phone number: |

Property Details

| | |
|--------------|---------------|
| Postcode* : | House number: |
| Flat number: | House name: |
| Street*: | District: |
| Town*: | County: |

Rental Details

| | |
|-----------------------------|---------------------------|
| Share of rent per month*: £ | Tenancy term (months)*: |
| Total rent per month*: £ | Start Date (dd/mm/yyyy)*: |

Applicants Details

| | |
|---|-----------------------------|
| Title*: <input type="checkbox"/> Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other | |
| First Name*: | Full Middle Name: |
| Surname*: | Date of birth*: |
| Sex*: <input type="checkbox"/> Male <input type="checkbox"/> Female | No of dependants*: |
| Marital Status*: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widow(er) | |
| Any previous names*: | |
| Can we contact the applicant?* Yes <input type="checkbox"/> No <input type="checkbox"/> | Home/Daytime phone number*: |
| Work phone number: | Mobile phone number: |
| National Insurance Number: | Email Address: |
| Have you had any detrimental info registered against you? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please provide details: | |

Please supply addresses to cover your last 3 years of residency

Current Address – Please complete all address details where appropriate

| | |
|---|------------------|
| Postcode*: | House number*: |
| Flat number: | House name*: |
| Street*: | District: |
| Town*: | County: |
| Is this a Foreign address?* Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Time at address From*: (dd/mm/yyyy) | To: (dd/mm/yyyy) |
| Living status*: <input type="checkbox"/> Furnished Tenant <input type="checkbox"/> Unfurnished Tenant <input type="checkbox"/> Own home <input type="checkbox"/> Living with parents <input type="checkbox"/> Other | |

Previous Address – Please complete all address details where appropriate

| | |
|---|------------------|
| Postcode: | House number*: |
| Flat number: | House name*: |
| Street*: | District: |
| Town*: | County: |
| Is this a Foreign address?* Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Time at address From*: (dd/mm/yyyy) | To: (dd/mm/yyyy) |
| Living status*: <input type="checkbox"/> Furnished Tenant <input type="checkbox"/> Unfurnished Tenant <input type="checkbox"/> Own home <input type="checkbox"/> Living with parents <input type="checkbox"/> Other | |

2nd Previous Address – Please complete all address details where appropriate

| | |
|---|------------------|
| Postcode: | House number*: |
| Flat number: | House name*: |
| Street*: | District: |
| Town*: | County: |
| Is this a Foreign address?* Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Time at address From*: (dd/mm/yyyy) | To: (dd/mm/yyyy) |
| Living status*: <input type="checkbox"/> Furnished Tenant <input type="checkbox"/> Unfurnished Tenant <input type="checkbox"/> Own home <input type="checkbox"/> Living with parents <input type="checkbox"/> Other | |

Employment Details

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

Employer Details

| | |
|---|---|
| Is your employment likely to change shortly*? | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes please provide details of your future employer |
| Job Title*: | Start date*: (dd/mm/yyyy) |
| Payroll number: | Employers company name*: |
| Contact name*: | Contact job title: |
| Postcode: | Building number: |
| Unit number: | Building Name: |
| Street: | District: |
| Town*: | County: |
| Daytime telephone number*: | Mobile phone number: |
| Fax number*: | Email address*: |
| Please ensure you provide either a fax number or email address. | |
| Additional Information to assist the referee: | |

Accountant Details

| | |
|---|--|
| Do you have an accountant?* | Yes <input type="checkbox"/> No <input type="checkbox"/> If No Please provide 6 months bank statements showing proof of income |
| Accountants name*: | Contact name*: |
| Postcode: | Building number: |
| Unit number: | Building name: |
| Street: | District: |
| Town*: | County: |
| Daytime phone number*: | Mobile phone number: |
| Fax number*: | Email Address*: |
| Please ensure you provide either a fax number or email address. | |
| Additional Information to assist the referee: | |

Pension Providers Details

| | |
|---|---|
| Do you have proof of pension?* | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes please provide your annual statement of pension |
| Pension providers name*: | Contact name: |
| Pension reference number*: | Postcode: |
| Building no: | Unit number: |
| Building name: | Street: |
| District: | Town*: |
| County: | Day time telephone number*: |
| Fax number: | Email address: |
| Additional information to assist the referee: | |

Affordability Details

| | |
|---|--|
| Gross annual income*: £ | Any additional sources of income?*: Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes Please provide below |
| Amount of additional income per annum?* £ | |
| Please provide details of any additional income*: | |

Additional Information

| |
|---|
| Have you ever received any County Court Judgments or Individual Voluntary Arrangements against you?* |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Not Asked <input type="checkbox"/> If Yes please enter the details |
| Have you ever been declared bankrupt?* |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Not Asked <input type="checkbox"/> If Yes please enter the details |

Consent We will use the information provided to us by third parties to make decisions about your application. Agencies may supply to us, public information and/or fraud prevention information.

Information provided to Experian Ltd may be supplied to other organisations and used by them and us to

A. Verify your identity for this application and if you apply for other facilities including all types of insurance applications and claims.

B. Check all or any of the application details which have been submitted.

C. Assist organisations to make decisions on tenancy applications by you

By **confirming 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.

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Income Protection Insurance provides a monthly benefit if you are not able to work due to illness or injury leading to loss of earnings. This means that should you become sick or have an accident during the term of your policy, your rent and monthly outgoings should be covered.

Accident, Sickness & Unemployment cover (ASU) also provides a monthly benefit if you are unable to work due to an accident, sickness or involuntary unemployment. The benefit will be paid after a deferred period for up to 12 months or until you return to work, whichever is the sooner.

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The typical cost is £6.85 per £100 of monthly benefit. This is based on someone aged 35 with a 30 day waiting period.

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Aston & Co Estate & Letting Agents Reply Form

Name(s)

Contact telephone number(s)

Email address

Current home address

Signed

Dated