



not your average agent

Email: info@kirnestates.co.uk Tel: 0161 945 4321 Fax: 0161 945 8321

Please note that we will not be able to process any Tenant Application Form without the following:-

- a. £110 **NON REFUNDABLE** administration fee, per person over the age of 18 to be living in the property
- b. Fully completed Tenant Form
- c. Passport or Driving License for proof of ID and for us to take a copy
- d. Last household bill to be dated within the last 1 month
- e. Last 3 Months bank statements, Last 3 months pay slips, Last P60

Please also answer the following questions:-

- 1) Have you ever been bankrupt, or been subject to an individual Voluntary arrangement? YES / NO
- 2) Have you had any mortgage or rent areas in the last 3 years? YES / NO
- 3) Have you ever had a property repossessed, or had a court order for debt registered against you, or not kept to any credit arrangements? YES / NO

Signature Date.....

Full Name.....

Interested Property.....

Kirn Estates application process

1, Tennant hands the completed application form, administration fee, together with required items to be processed—the property is then reserved

2, Application takes approx 3/4 days to process, subject to your employers and landlord ref's coming back on time !--- once successful the tenants needs to pay the advanced rent equal to one months rent in cleared funds **within 3 days of acceptance, this is non-refundable** but holds the property till move in date up to a maximum of 2 weeks or approved by vendor

3, On move in date tenants pay the first months rent in cleared funds, contract's signed and keys handed over

4, After move in Kirn estates calls the Gas, Electric, Council tax and Water to transfer the bills into tenants name



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Comprehensive Application Form

Before completing please ensure that you have all the requested information including email addresses. Verbal references cannot be accepted.
If your employer/landlord confirms to you that they have no access to email please provide a full postal address.
Please complete all details in BLOCK CAPITALS

PROPERTY DETAILS

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

RENTAL DETAILS

Monthly Rental*: £	Tenancy term (months)*:
Number of Tenants/Guarantors*:	Start Date (dd/mm/yyyy)*:
Rent Guarantee Type:	Share of Rent*: £
Can we contact the applicant?* Yes <input type="checkbox"/> No <input type="checkbox"/>	

APPLICANT DETAILS

Title*: <input type="checkbox"/> Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> Co Habiting	
First Name*:	Full Middle Name:
Surname*:	Date of birth*:
Sex*: <input type="checkbox"/> Male <input type="checkbox"/> Female	National Insurance Number:
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)
Daytime phone number*:	Mobile number:
Work number:	Email Address:
Any previous names*: First Name: Last Name:	
Email address:	

Please supply addresses to cover your last 3 years of residency

CURRENT ADDRESS

Time at address: From*: 11/06/2015		To: 9/11/15	
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			
Flat:		House name*:	
House Number:		Postcode*:	
Street*:		District:	
Town*:	County:	Country:	

CURRENT LANDLORD DETAILS

Landlord / Agent Name*:		Contact Name*:	
Phone Number*:		Mobile Number:	
Fax number:		Email address:	
Flat:		House Name:	
House Number:		Postcode:	
Street:		District:	
Town*:	County:	Country:	
Additional Information to assist the referee:			

PREVIOUS ADDRESS

Time at address: From*:		To:	
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			
Flat:		House name*:	
House Number:		Postcode*:	
Street*:		District:	
Town*:	County:	Country:	

PREVIOUS LANDLORD DETAILS

Landlord / Agent Name*:	Contact Name*:	
Phone Number*:	Mobile Number:	
Fax number:	Email address:	
Flat:	House Name:	
House Number:	Postcode:	
Street:	District:	
Town*:	County:	Country:
Additional Information to assist the referee:		

PREVIOUS ADDRESS 2

Time at address: From*:	To:	
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		
Flat:	House name*:	
House Number:	Postcode*:	
Street*:	District:	
Town*:	County:	Country:

PREVIOUS LANDLORDS DETAILS 2

Landlord / Agent Name*:	Contact Name*:	
Phone Number*:	Mobile Number:	
Fax number:	Email address:	
Flat:	House Name:	
House Number:	Postcode:	
Street:	District:	
Town*:	County:	Country:
Additional Information to assist the referee:		

EMPLOYMENT DETAILS - If your Employment is likely to change please supply your offer letter or contact of new

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

Organisation Name:	Start date*:	
Job Title*:	Employee/Payroll/Service number:	
Flat:	House Name:	
House Number:	Postcode:	
Street:	District:	
Town*:	County:	Country:

REFERENCE PROVIDER 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 <input type="checkbox"/> No <input type="checkbox"/>
If No Please provide 6 months bank statements showing proof of income		
Company Name*:		Contact Name*:
Phone Number:		Mobile Number*:
Fax Number*:		Email Address*:
Flat:		House Name:
House Number:		Postcode:
Street:		District:
Town*:	County:	Country:
Please ensure you provide either a fax number or email address.		

AFFORDABILITY DETAILS

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

BANK DETAILS

Current account held?*: Yes <input type="checkbox"/> No <input type="checkbox"/>	How many credit cards held?*
If Yes please enter the	
Sort code*:	Account number:
Account name*:	Name of bank*:
Address*:	
Time with bank*: (years)_____	Cheque guarantee card held*: Yes <input type="checkbox"/>
(months)_____	No <input type="checkbox"/>

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		
Will any of the tenants have pets?*	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will any of the tenants smoke?*	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will there be any children living at the property?*	Yes <input type="checkbox"/>	No <input type="checkbox"/> (If Yes, Please enter details below)
Please provide any additional information below:		

In signing this agreement I understand that Quick Ref will use my information in order to carry out a credit check and will contact my employer/landlord as appropriate. I give authority for my landlord/employer to release this information to Quick Ref.

I have answered all the questions truthfully and understand that any false or misleading information will result in my application being cancelled and the loss of my fee.

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

Signed:

Date:

The information contained within this application is being transmitted to and is only for the use of Quick Ref. 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

