



CCV
LETTING AGENT
SOLUTIONS

GUARANTORS APPLICATION FORM

Agent Name: Key Moves Lettings (Bradford)

Agent Code: 1320

HOW TO CONTACT US

Please return this form by fax to: 0844 892 1772

If you have any questions concerning this form please call us: 0844 892 1767

TO AVOID UNNECESSARY DELAY, PLEASE COMPLETE IN BLOCK CAPITALS.

A bold outline to any data field means that it is a field we must have completed to be able to process your application.

TO BE COMPLETED BY LETTING AGENT

Our Enquiry Code: **Applicants Surname:**

How much Rent will Guarantor cover? £

DETAILS OF THE PROPERTY TO BE RENTED

Landlords Name:

Property Address:

Postcode:

TO BE COMPLETED BY GUARANTOR - Please complete your details

Title: First Name: Middle Name:

Surname: Date of Birth:

Tel: Email:

Mobile: Fax:

Current Address: Postcode:

Address Line 1:

Address Line 2:

Address Line 3:

Time at this address: yrs months

Current address status? Owner Rented Living with Parents/Friends/Relations

Other (please state:)

If you have lived at your current address for less than 3 years, please complete the sections below.

Previous Address 1: Postcode:

Address Line 1:

Address Line 2:

Address Line 3:

Time at this address: yrs months

Previous Address 2: Postcode:

Address Line 1:

Address Line 2:

Address Line 3:

Time at this address: yrs months Please continue on a separate sheet if required.

Current Landlords/Agents details: Name:

Tel: Mobile:

Fax: Email:

Tenancy Start Date: Current Rent: £

Address: Postcode:

Address Line 1:

Address Line 2:

Address Line 3:

Have you any current, historic or pending adverse credit? No <input type="checkbox"/> Yes <input type="checkbox"/> Please complete below	
How many CCJs/Court Decrees?:	Monetary Value total: £
Other, please describe the type and value:	
Employed, Contract or Temporary please tell us your current employer:	
Please tell us your status: Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/>	
Contract Worker <input type="checkbox"/> Temporary Worker <input type="checkbox"/> Independent means <input type="checkbox"/>	
Name:	
Your Position:	
Gross Annual Salary:	Full Time/Part Time* Please delete as appropriate
NI Number/Payroll or Pension Service Number:	Start Date:
Address:	Postcode:
Address Line 1:	
Address Line 2:	
Address Line 3:	
Contact details:	Contact Name:
Contact Position:	Email:
Tel:	Fax:
Is your position going to change in the near future? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please provide details of your future employer.	
If you have less than six months employment please complete below	
Previous employer:	
Name:	
Your Position:	
Gross Annual Salary:	Start Date:
Payroll/Service Number:	End Date:
Address:	Postcode:
Address Line 1:	
Address Line 2:	
Address Line 3:	
Contact details:	Contact Name:
Contact Position:	Email:
Tel:	Fax:
If you still have less than six months employment please continue on a separate sheet and attach to this form	
Future employer:	
Name:	
Your Position:	
Gross Annual Salary:	Start Date:
Payroll/Service Number:	End Date:
Address:	Postcode:
Address Line 1:	
Address Line 2:	
Address Line 3:	
Contact details:	Contact Name:
Contact Position:	Email:
Tel:	Fax:
Other Income Information:	
(If you have any Working Tax Credit or Housing Benefit, Please send us your current statement)	

Self Employed - Please provide the last 3 years SA302 or Accountants Details

Retired - Please provide the last Pension Statement or Pension Provider Details

Accountant/Pension Provider Name:

Address:

Postcode:

Contact Name:

Address Line 1:

Address Line 2:

Address Line 3:

Email:

Tel:

Fax:

Once this application form has been fully completed and signed please return to your letting agent.

Declaration:

I hereby confirm that the information provided by me is to the best of my knowledge true. I consent to this information being verified by contacting the third parties detailed in this form. I understand that the results of the findings will be forwarded to the appointed letting agent and/or landlord and may be accessed again should the tenant, for whom I am proposing to act as Guarantor, default in respect of any of their tenancy covenants. I further understand that this application and the result of the findings may be disclosed to an insurer and/or their agents in connection with the provision of insurance related to the tenancy. I agree that CCV Letting Agent Solutions or their approved agent may search the files of a Credit Reference Agency and IDS Ltd, the insurance industrys data collection agency, which will keep record of that search. I understand that I may request the name and address of the Credit Reference Agency to whom I may then apply for a copy of the information provided.

I also understand that in the event of my defaulting on the rental payment, that any default may be recorded with the credit reference agency and IDS Limited, who may supply the information to other credit companies or insurers in the quest for the responsible granting of tenancies, insurance and/or credit.

I understand that in the event of a may defaulting in respect of my covenants as Guarantor, the information contained herein may be disclosed to one or more tracing companies and/or debt collection agencies in order to recover any monies due or to trace my whereabouts.

The details you provide will be held by CCV Letting Agent Solutions and the letting agent and may be used to keep you up to date on our products and services and those of the CCV Group and other organisations we believe will be of interest to you. If you prefer not to receive this information, please tick this box:

I have read the above and agree to be bound by these terms:

Guarantor's Signature:

Date:

Print Name: