

GUARANTOR APPLICATION

AGENT NAME: **Keymove Lettings And Property Management** AGENT CODE: **500117**

SECTION 1 – TO BE COMPLETED BY THE LETTING AGENT

Rental property address	Address line 1:	.....
	Address line 2:	.....
	Address line 3:	.....
	Postcode:	.....
Tenancy details	Tenancy term:	.....
	Reference Enquiry Number:	.....
	Name of Tenant:	.....
	Is the Property	Let Only <input type="checkbox"/> Fully Managed <input type="checkbox"/>

SECTION 2 – GUARANTOR PERSONAL DETAILS

Personal details	Title:	.....
	Forename(s):	.....
	Middle Name(s):	.....
	Surname:	.....
	Date of Birth:	.....
	Monthly Rental to be guaranteed:	£.....
	Contact Number:	.....
	Email:	.....
	Mobile Number:	.....
	Marital Status	Married <input type="checkbox"/> Divorced <input type="checkbox"/> Not Married <input type="checkbox"/>
If you have been known by any other name please give it here		.....

SECTION 2 – GUARANTORS PERSONAL DETAILS (continued) You must provide three years address history

Present address	Address line 1:	.....
	Address line 2:	.....

Address line 3:

Postcode:

Time at this address: yrsmths

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

Previous address 1: House No./Street -

City / Town

Postcode Time at this address:yrsmths

Previous address 2: House No./Street -

City / Town

Postcode Time at this address:yrsmths

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

ADVERSE CREDIT Do you have any current/historic or pending adverse credit? Yes / No

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

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.....

SECTION 4 – GUARANTOR’S EMPLOYMENT DETAILS

Current Employment Status Please circle one: Employed Self Employed Retired
 Contract Worker Temp Worker Independent Means

NOTE: If Self-Employed, Retired or Independent Means, go to Section 5

Name of company: Name of company:

If Company Director, If company Director,

Director, Company Company Number:

Number: Position Gross Salary

Shift Allowance Overtime

Bonus Car Allowance

London Weighting

Payroll No..... Start Date...../...../..... Full Time / Part Time (circle)

Address line 1:

Address line 2:

Address line 3:

Postcode:

Contact name:

Email:

Contact Number:

Fax number:

Is your current position going to change in the near future Yes / No

If yes, please complete as below:

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

Future Employment Status Please circle one: Employed Self Employed Retired

Contract Worker Temp Worker Independent Means

Name of company:

Position Gross Salary

Shift Allowance Overtime

Bonus Car Allowance

London Weighting

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

**Guarantor's Future Employment Status
(continued)**

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?

Total Annual Amount £..... Breakdown

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SECTION 5 – ACCOUNTANT / PENSION PROVIDER

Self-Employment/Retired/ Independent Means Start Date /...../.....

Annual Income - £..... Will accountant be verifying income? Yes / No

Does the applicant have a private pension Yes / No How many?

Have finalized accounts been prepared? (circle) Yes – by accountant Yes – Self Assessment No

Accountant / Pension Company details

Name of Accountant:

Name of Pension Company:

Pension No..... Pension amount £.....

Address line 1:

Address line 2:

Address line 3:

Postcode:

Contact name:

Email:

Contact number: Fax number:

SECTION 6 – DECLARATION

I hereby confirm that the information I have provided is true and accurate and give my permission for this information to be verified by third parties and disclosed as detailed above for the purpose of:

- Performing a credit search by a third party agency
- Contacting my current and previous employers and other referees to confirm the details provided
- Fraud prevention, credit assessment and insurance decisions

I understand that the results of these searches will be provided to the Letting Agent and accessed again in the event of a default in rental payments.

I understand that I can request the details of any credit reference agencies used so that I can verify with them the information provided.

I understand that if I default on my tenancy obligations as a guarantor, this information may be released to authorised debt recovery agencies and could affect any future applications I make for tenancies, credit and insurance.

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.

Guarantor's Signature: Date:

Print name:

PLEASE RETURN THIS APPLICATION FORM TO YOUR LETTING AGENT

SHOULD YOU HAVE ANY QUESTIONS REGARDING YOUR APPLICATION

**PLEASE DO NOT HESITATE TO CONTACT US ON 01244 421 261 OR EMAIL US AT
TENANT@LETALLIANCE.CO.UK**