



INDIVIDUAL ATTENTION | LOCAL KNOWLEDGE | INDEPENDENT ADVICE



# TENANT RENTAL APPLICATION FORM

## RENTAL PROPERTY ADDRESS .....

**TENANT 1:**

**EMPLOYMENT STATUS:**

NAME: MR/MRS/MISS

EMPLOYED/EMPLOYED/UNEMPLOYED

SURNAME:

IF SELF EMPLOYED NAME OF ACCOUNTANT:

FIRST NAME/S:

PROFESSION:

DOB:

EMPLOYER IF APPLICABLE:

LANDLINE

NUMBER OF DEPENDANTS:

MOBILE:

MARITAL STATUS:

ADDRESS:

SINGLE/LIVING WITH PARTNER/MARRIED

TIME AT ADDRESS:

N.I.N:

PREVIOUS ADDRESS:  
(If at above less than three years)

## WE REQUIRE THE FOLLOWING FROM SUCCESSFUL APPLICANTS

1. The equivalent of 1 month's rent plus one months security deposit
2. in many cases particularly where a bank reference is not available we may require a guarantor.
3. 3 months bank statements from the tenant
4. An Employers reference in writing
5. A recent utility bill
6. A copy of the tenant's passport to confirm the tenants identification
7. Landlord References

108 Hill Street, Newry  
Co. Down  
BT34 1BT  
Tel: 028 3026 6811





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**EMPLOYERS REFERENCE**

PLEASE COMPLETE AND STAMP WITH COMPANY STAMP OR TYPE ON HEADED PAPER.

NAME OF EMPLOYEE: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

LENGTH OF SERVICE: \_\_\_\_\_

UNDER NOTICE OF TERMINATION? YES/NO

ANY ISSUES WITH EMPLOYEE? YES/NO

PLEASE GIVE DETAILS:

SIGNED BY: \_\_\_\_\_

COMPANY STAMP:

PRINT: \_\_\_\_\_

POSITION: \_\_\_\_\_

DATE: \_\_\_\_\_

**LANDLORD REFERENCE**

NAME OF TENANT:

PROPERTY ADDRESS:

PERIOD OF TENANCY:

/ / TO / /

ARE RENTAL PAYMENTS UP TO DATE? YES/NO

WOULD YOU RECOMMEND THIS TENANT? YES/NO

IF NO PLEASE COMMENT:

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNED: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

**N.B ALL REFERENCES ARE TREATED STRICTLY CONFIDENTIAL**

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RICS

