GUARANTOR APPLICATION FORM

AGENT/OFFICE USE ONLY: NO OF PAGES TO THIS REFERENCE INCLUDING CONTINUATION SHEETS ☐

A GUARANTOR INDEMNITY FORM MUST BE SIGNED AT THE SAME TIME AS THIS APPLICATION

AGENT ……AGENT ID NO……

CONTACT ……..Tel: ……..

Property Address Applied For (please complete + include full postcode)

…….

……. Postcode ☐☐☐☐ ☐☐☐☐

Is Rent Guarantee Protection Required?

Gold Protection 6 months ☐ 12 mths ☐

Platinum Protection 6 months ☐ 12 mths ☐ (PAYE ONLY)

Landlord's Name

…….

Landlords Tel:……..…

Inception Date ☐☐ ☐☐ ☐☐

THIS SECTION MUST BE COMPLETED BY THE TENANT WHO WISHES TO RENT THE PROPERTY

(Please complete **ALL** sections of this box) **Incomplete applications will not be accepted.**

All applicants will be jointly and severally liable for the Total Rent per Month for the Property.

Total Rent per Month for the Property £☐☐☐☐.☐☐ Total Rent per Month per Applicant £☐☐☐☐.☐☐

Rental Period ☐☐ Are you to pay the rent through your own means or housing benefit? Own ☐

Is this a joint tenancy application? ☐ YES ☐ NO Proposed Tenancy Commencement Date: ☐☐/☐☐/☐☐

Name of Tenant(s), this Guarantor relates to also reference number if known

First name(s) Surname(s)

……. …….

THESE SECTIONS MUST BE COMPLETED BY THE GUARANTOR. (Please complete **ALL** sections of this box)

PLEASE COMPLETE THIS APPLICATION FORM FULLY IN INK AND IN BLOCK CAPITALS OR THIS MAY CAUSE DELAYS IN PROCESSING YOUR APPLICATION. Please use the checklist sheet provided to help you attach all the relevant information with your application.

We regret that no explanation can be given should we be unable to accept you as a guarantor

PLEASE ENSURE THE BOTTOM OF PAGE 2 IS SIGNED BY THE GUARANTOR

State full names (including all first names) **(This section should be the signatory of the Application form.)**

1 **First Names** ***(Mr/Mrs/Ms) Delete as appropriate*** **Surname**

……. …….

Date of Birth ☐☐/☐☐/☐☐

National Insurance Number: ☐☐/☐☐/☐☐/☐☐/☐

Maiden Name …… Marital Status Single ☐ Married ☐ Divorced ☐ Other ☐

Name of Bank: …… Sort Code: ☐☐/☐☐/☐☐ Acc No: ☐☐☐☐☐☐☐☐

WHERE YOU CURRENTLY LIVE (Please complete **ALL** sections of this box. **Please note Guarantor's must be UK property owners.**

LetSafe uses Land Registry to clarify.

Current Address:

……

Applicant's email address…… Postcode (Essential): ☐☐☐☐ ☐☐☐☐

Tel Daytime: ☐☐☐☐☐/☐☐☐☐☐☐☐ Evenings ☐☐☐☐☐/☐☐☐☐☐☐☐

Period at current address ☐☐ Years ☐☐ Months

Do you own a residential property in the UK? Yes ☐ No ☐ Is this your permanent residence? Yes ☐ No ☐

IF APPLICANT IS NOT A UK PROPERTY OWNER, WE REGRET WE CANNOT PROCESS THE APPLICATION.

Current Employment details: (Please complete **ALL** sections of this box) **Your application will not be processed unless Telephone and Fax numbers are provided:**

(If self employed, please submit 3 years accounts) Are You? Employed ☐ Self Employed ☐ *(3 years audited accounts)* Retired ☐ Other ☐ *(If other, please state)*

Mobile numbers will not be accepted

Employer ☐

Accountant ☐

Address……

…… Postcode (Essential): ☐☐☐☐ ☐☐☐☐

Tel No: ☐☐☐☐☐/☐☐☐☐☐☐ Fax No: ☐☐☐☐☐/☐☐☐☐☐☐ Start Date: ☐☐ ☐☐ ☐☐

Mobile numbers will not be accepted.

Job Title: …… Salary per month: £ ……

Employer contact Name: …… Position: ……

Employer/Accountant Email Address: ……

Do you have additional source of income? **(If yes, please provide details below and provide separate proof)** Yes ☐ NO ☐

Pension ☐ **Investments** ☐ **Other (specify)** ☐

Are you aware of any previous CCJ's or Bankruptcy? Yes ☐ NO ☐ (If yes, please attach on a separate sheet)

PREVIOUS EMPLOYMENT – If you have been in your current employment for less than 3 years, please provide details of all previous employers on the continuation sheet provided and include start dates and leaving dates. **Please provide a copy of your P45 or last payslips to speed up your application.**

Employers/ Accountants Name and Address: ……

…… **Postcode (Essential):** ☐☐☐☐ ☐☐☐☐

Tel No: ☐☐☐☐☐/☐☐☐☐☐☐☐ Fax No: ☐☐☐☐☐/ ☐☐☐☐☐☐☐

Mobile numbers will not be accepted.

Job Title: …… Salary per month: £ ☐

Start Date: ☐☐ ☐☐ ☐☐ Leaving Date: ☐☐ ☐☐ ☐☐ Position: ……

Contact Name: …… Email Address: ……

In your capacity as Guarantor, will you be paying the rent for the applicant during the tenancy? **YES**: ☐ **NO** ☐

In your capacity as Guarantor, will you be paying the rent in the event of the applicant defaulting on their payments? **YES**: ☐ **NO** ☐

If NO, how?…… ……

NEXT OF KIN DETAILS

Name …… Address……

Tel: ☐☐☐☐☐/ ☐☐☐☐☐☐ Evenings: ☐☐☐☐☐/ ☐☐☐☐☐☐

Data Protection Act 1998. All information supplied in this application will only be used for obtaining references in order to assess your application. Once the application has been completed, **Data Protection Act 1998.** All information supplied in this application will only be used for obtaining references in order to assess your application. Once the application has been completed, this paper will be shredded and for compliance purposes, the information will be kept on a secure database which is not accessible to the general public.

I hereby authorise LetSafe to make any enquiries considered necessary to substantiate information supplied on this application, I authorise you or your assessment company to disclose any information about me and my account to any credit reference agency and/or any other tenancy database who may retain a record of such a search. This information is used to help me make credit, insurance, rental and property decisions and occasionally for fraud prevention or debtor tracing. I give my permission to take up all necessary references and that these may be shown to a Landlord and / or their lender. The details you provide will be held by LetSafe and will not be used for any other purpose than it is intended for.

PLEASE NOTE: A SIGNED CONSENT FORM , AND FORM OF ID MUST ACCOMPANY THIS APPLICATION.

© LetSafe (UK) Limited 2008

Signature of Applicant…… **DATE**……

APPLICATIONS MUST BE SIGNED AS THEY CANNOT BE PROCESSED WITHOUT A SIGNATURE.