



18 Upper Main Street, Larne, BT40 1SX

(028) 2827 6060

Rental Application Form

Applicant(s) _____

Property _____

Thank you for applying for one of our properties to rent, before we can submit your application to the Landlord please ensure you provide us with the following documents;

Photographic ID
(eg. valid passport, driving licence)

Proof of address
(eg. utility bill)

Proof of income
(eg. Bank statement or payslip no more than 3 months old)

Once your application has been accepted please provide us with the following, we CANNOT hold the property for you until the holding deposit is paid in full;

Holding deposit
(equivalent to ONE MONTH'S RENT, this will be used as your tenancy deposit once the lease has been signed)

Deposit Protection fee
(£40 plus VAT = £48)

DHSS administration fee
(if applicable, £90)

Tenancy Specific Information (to be completed by applicant)

Applicant One

Title	_____	Middle Name	_____
First Name	_____	Date of Birth	_____
Surname	_____		
Mobile Number	_____	Email Address	_____
Address	_____	Time at Previous Address	_____

Living Status	<i>home owner</i>	<input type="checkbox"/>	Employment Status	<i>employed</i>	<input type="checkbox"/>
	<i>council tenant</i>	<input type="checkbox"/>		<i>self employed</i>	<input type="checkbox"/>
	<i>living with parents</i>	<input type="checkbox"/>		<i>retired</i>	<input type="checkbox"/>
	<i>private tenant</i>	<input type="checkbox"/>		<i>contract</i>	<input type="checkbox"/>
	<i>other</i>	<input type="checkbox"/>		<i>student</i>	<input type="checkbox"/>
				<i>unemployed</i>	<input type="checkbox"/>
				<i>other</i>	<input type="checkbox"/>

Do you have any County Court Judgements, Court Decrees, Bankruptcy, Administration Orders, Individual Voluntary Arrangements, or any other adverse credit history whether settled or not? YES NO

If YES, please provide details _____

Please provide us with contacts for the purpose of obtaining references, where a landlord or employers reference is not available, please provide details of someone who can provide a character reference (they must be over 18, a UK resident, not related to you and you must have know them for at least 2 years).

Employer's Reference

Landlord/Agent Reference

Company Name	_____
Phone Number	_____
Email Address	_____

Agency Name	_____
Phone Number	_____
Email Address	_____

Signed: _____

Applicant Two (if applicable)

Title _____
First Name _____ Middle Name _____
Surname _____ Date of Birth _____
Mobile Number _____ Email Address _____
Address _____ Time at Previous Address _____

Living Status	<i>home owner</i>	<input type="checkbox"/>	Employment Status	<i>employed</i>	<input type="checkbox"/>
	<i>council tenant</i>	<input type="checkbox"/>		<i>self employed</i>	<input type="checkbox"/>
	<i>living with parents</i>	<input type="checkbox"/>		<i>retired</i>	<input type="checkbox"/>
	<i>private tenant</i>	<input type="checkbox"/>		<i>contract</i>	<input type="checkbox"/>
	<i>other</i>	<input type="checkbox"/>		<i>student</i>	<input type="checkbox"/>
				<i>unemployed</i>	<input type="checkbox"/>
				<i>other</i>	<input type="checkbox"/>

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Employer's Reference

Landlord/Agent Reference

Company Name _____
Phone Number _____
Email Address _____

Agency Name _____
Phone Number _____
Email Address _____

Signed: _____

Please detail any other individuals who will be living with you during your tenancy:

Name	Date of Birth	Relationship to You (eg son, daughter)	Status (eg dependent, working)

Will there be any pets living at the property? Yes No

If Yes, provide details (breed, age etc) _____

Will there be any smokers living in the property? Yes No

If Yes, please tick to confirm smoking will be carried out OUTSIDE

Will Housing Benefit be used to pay all / part of rent? Yes No

If Yes, please be advised that YOU are responsible for ensuring that NIHE have all the necessary and correct information relating to your claim, and YOU are responsible at all times to ensure rent is paid in full and on time.

Please provide us with Next of Kin details for all named tenants, next of kin will only be contacted in the event of an emergency:

Applicant (1, 2,)	Next of Kin (Name)	Address	Phone Number	Relationship