



**APPLICATION TO LET (TENANTMASTER GROUP SCHEME)  
PRIVATE & CONFIDENTIAL**

COMPLETION OF THIS FORM DOES NOT GUARANTEE THAT YOU WILL BE ACCEPTED AS A LESSEE AS FINAL ACCEPTANCE IS THAT OF THE LESSOR			
Accommodation Applied For Unit Number _____	Building _____	Garage No: _____	Open Bay No _____
U/C Bay No: _____	Occupation Date _____	Lessor _____	Period of Lease (3, 6 or 12 Months) _____

**1. First Applicant** Full Names: (Dr/Mr/Ms/Mrs/Miss) \_\_\_\_\_

Present Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_ Cell No: \_\_\_\_\_ Tel No: \_\_\_\_\_

Delete which is not applicable: OWNER/LESSEE of above property Years Occupied: \_\_\_\_\_

Present Lessor / Agent: \_\_\_\_\_

Tel No: \_\_\_\_\_ Cell No: \_\_\_\_\_ Rent Paid: \_\_\_\_\_

Previous Lessor / Agent: \_\_\_\_\_

Tel No: \_\_\_\_\_ Cell No: \_\_\_\_\_ Rent Paid: \_\_\_\_\_

Next of Kin : Name: \_\_\_\_\_

Address \_\_\_\_\_

Postal Code: \_\_\_\_\_ Cell No: \_\_\_\_\_ Tel No: \_\_\_\_\_

**Martital Status (Mark with an 'X')**

Married I.C.P.  Married A.N.C.  Single  Other

Identity No: \_\_\_\_\_ Age: \_\_\_\_\_

S.A. Citizen YES / NO (If no, quote Resident Permit No) \_\_\_\_\_

**2. Second Applicant** Full Names: (Dr/Mr/Ms/Mrs/Miss) \_\_\_\_\_

Present Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_ Cell No: \_\_\_\_\_ Tel No: \_\_\_\_\_

Delete which is not applicable: OWNER/LESSEE of above property Years Occupied: \_\_\_\_\_

Present Lessor / Agent: \_\_\_\_\_

Tel No: \_\_\_\_\_ Cell No: \_\_\_\_\_ Rent Paid: \_\_\_\_\_

Previous Lessor / Agent: \_\_\_\_\_

Tel No: \_\_\_\_\_ Cell No: \_\_\_\_\_ Rent Paid: \_\_\_\_\_

Next of Kin : Name: \_\_\_\_\_

Address \_\_\_\_\_

Postal Code: \_\_\_\_\_ Cell No: \_\_\_\_\_ Tel No: \_\_\_\_\_

**Martital Status (Mark with an 'X')**

Married I.C.P.  Married A.N.C.  Single  Other

Identity No: \_\_\_\_\_ Age: \_\_\_\_\_

S.A. Citizen YES / NO (If no, quote Resident Permit No) \_\_\_\_\_

**3. No. of Persons to Occupy Unit :** \_\_\_\_\_

Adult Male	No:	<input type="text"/>	Name/s	<input type="text"/>	Age/s	<input type="text"/>
Adult Female	No:	<input type="text"/>	Name/s	<input type="text"/>	Age's	<input type="text"/>
Child Male	No:	<input type="text"/>	Name/s	<input type="text"/>	Age/s	<input type="text"/>
Child Female	No:	<input type="text"/>	Name/s	<input type="text"/>	Age/s	<input type="text"/>

4. Details of Employment		
Applicant/s	First Applicant	Second Applicant
Employer's Name		
Employer's Address		
Occupation		
Monthly Income		
Paye/Tax No		
Period Employed		
Tel No / Ext No		
Fax No		
Contact Name		

**5. References:**

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Contact No's: \_\_\_\_\_ Contact No's: \_\_\_\_\_

6. Car Registration No: \_\_\_\_\_ Bank Lease Details: \_\_\_\_\_ Make & Model: \_\_\_\_\_

7. Bank Details

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Bank

Branch Name

Branch Code

Account No

**8. Rental Statement delivery options [Mark your choice with an 'X']**

View on Internet	By e.mail	By Post
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9. I/We hereby confirm that I/we have personally inspected the interior of the premises applied for. I/We declare that the above information is correct. All maintenance and repairs are subject to the Lessor's final approval. If the application is successful, I/we agree to sign Trafalgar's standard lease agreement within 3 days of being requested to do so and I/we shall be bound by all terms and conditions thereof. No agreement of lease shall be deemed to exist between the Lessor and myself until the lease has been signed by, or on behalf of, the Lessor.

**10. I/We hereby authorise the Landlord or Agent to:-**

- a) Contact, request and obtain information from any credit provider (or potential credit provider) or registered credit bureau relevant to an assessment of my behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness;
- b) Furnish information concerning my behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness to any registered credit bureau or to any credit provider (or potential credit provider) seeking a trade reference regarding my dealings with the Lessor.

Signature/s : \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE ONLY	
1. Employment confirmed	
2.. Previous Lessor checked	
3. Credit Check	
4. Recent Payslip & I.D. submitted	
5. Application Accepted / Rejected	

For Office Use

Tenant Master Group Scheme
Broker No: 87347/260

Group Scheme No: 1963/02026/07