



Student Tenant Application - Referencing Form

Please return this form to: **Mr J Griffin, 8 Rose Walk, Wisbech, Cambs, PE13 1SG** together with:

Proof Identity & Address: This should be a copy of one of your driving licence \ passport \ work photo ID and one of a recent utility bill \ bank statement.

Property Details:

Property Details	20 Avon Way, Colchester, Essex, CO4 3HN			
	Room:			
Tenancy Details	Monthly Rent		Total Rent	
	Term		Tenancy Start Date	

Tenant Details – All highlighted areas to be completed by the Applicant

1. PERSONAL INFORMATION				
Name	<i>Title, first and surname</i>			
Contact Details	<i>Telephone no.</i>		<i>Mobile</i>	
	<i>Email</i>		<i>Date of Birth</i>	
Residential Status	Property Owner		Council Tenant	
	Private Tenant		Living with relatives \ friends	
Personal Info	Have you any County Court Judgements, Court Decrees, Bankruptcy or Administration orders? Give details if yes.		Yes	No
	Please also be aware that it may harm your application if you tick No and are later found to have some.			
	Are you a smoker?		Yes	No
	Name, Address and contact numbers of next of kin			
	Is your next of kin acting as your Guarantor?		Yes	No
	National Insurance no.			

Landlord: Mrs Elaine Griffin, 8 Rose Walk, Wisbech, Cambs, PE13 1SG Tel: 01945 429882 Mobile: 07849 168345

Agent: Mr J Griffin Mobile: 07763 167097

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2. WHERE YOU LIVE			
Current Address	<i>Include postcode</i>		
	Period at this address	<i>Years & Months</i>	
	Do you rent or own this property		
Current Landlord or Managing Agent	If currently renting or have rented in the last 12 months		
	Name of Landlord or Managing Agent		
	Contact Name		
	Daytime Tel.		Mobile no.
	Fax No.		Email
Contact Address for when tenancy ends	May be used when dealing with deposit refunds if other contact points exhausted		
	Address (incl. Post-code)		
	Daytime Tel.		Mobile no.
Previous Address	Other addresses where you have lived during the last 3 years		
	Address 1- inc. postcode		
	Period lived at address	<i>Dates from and to</i>	
	Address 2		
	Period lived at this address	<i>Dates from and to</i>	
	Address 3		
	Period lived at this address	<i>Dates from and to</i>	

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3. DETAILS OF STUDIES

Details of University	Institution Name			
	Institution Address (inc. postcode)			
	Name of Course			
	Duration of Course			
	Enrolment no.			
	Year of study (at time of Tenancy)		Start date	
Funding Details (if applicable)	Nature of Funding			
	Verification Contact Name			
	Contact Address (incl. postcode)			
	Reference number			
	Annual Amount	£		

4. EXTRA INFORMATION

Additional Information	Use this space to provide any additional information we may have requested or any information you feel may be relevant to your application.
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5. DECLARATION

Please read the declaration and sign and date below. WE CANNOT PROCEED WITH THIS APPLICATION IF YOU DO NOT SIGN

I hereby confirm that the information provided by me is to the best of my knowledge true. I consent to this information being verified by contacting the third parties detailed in this form. I understand that the results of the findings will be communicated to the landlord and may be accessed again should I default on my rental payment or apply for a new tenancy agreement in the future. I agree that the Landlord or their approved agent may search the files of a www.TenantVERIFY.co.uk who may keep a record of that search.

I also understand that in the event of my defaulting on the rental payment, that any such default may be recorded with any Credit Referencing Agency as seen fit by the Landlord who may supply the information to other credit companies or insurers in the quest for the responsible granting of tenancies, insurance and credit.

I understand that in the event of any default by me in respect of the covenants in my tenancy agreement with my Landlord, the information provided herein may be disclosed to one or more tracing companies and/or debt collection agencies in order to recover any monies due or to trace my whereabouts. I understand that the information provided by me may be transferred to a country outside of the EU for the purposes only of processing this referencing application, notwithstanding such transfer. The Landlord will remain the Data Controller for the purposes of this application. The information provided in this form by me is information as described in Ground 17 of the Housing Act 1996 and I understand that if any information within this application is found to be untrue, it is grounds for termination of the tenancy. I also understand that any default in the payment of rent may affect any future application for tenancies, credit or insurance and that the assessment of this application presumes that at some time during the tenancy agreement, I may be granted or allowed some form of deferred payment.

I confirm that I understand and that it has been explained to me that the payment of a Holding Deposit is due with all Applications. I understand that should mine or any of my joint Applicants references be unsatisfactory or that I/we do not take up the tenancy on the agreed start date that I/we will forfeit the Holding Deposit. The Landlord in turn confirms that on receipt of the Holding Deposit they will not offer the accommodation to any other Applicant provided the owner in turn agrees to the Applicant(s) offer.

Signed	
Name (please print)	
Date	

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