

# Credit Check Application Form



Please return this form to Magpie Property Management Ltd. Asterisks (\*) indicate a field is mandatory.

Agency Details	
Letting Agent Name *	Letting Agent ID *
<input type="text" value="Magpie Property Management Ltd"/>	<input type="text" value="3519"/>

Property Details		
Abode *	Building/House Number *	Building/House Name *
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address Line 1 *		
<input type="text"/>		
Address Line 2 *		
<input type="text"/>		
Town *	County *	Postcode *
<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Monthly Rent *		
<input type="text"/>		

Tenancy Details		
Start Date of Tenancy (dd/mm/yyyy) *	Length of Tenancy (months) *	Share of Rent *
<input type="text"/>	<input type="text"/>	<input type="text"/>

Applicant's Contact Details			
Title *	First Name *	Middle Name *	Last Name *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Previous Full Name (If your name has changed in the last 12 months)			
<input type="text"/>			
Date of Birth (dd/mm/yyyy) *	Telephone Number *	Mobile Number *	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Email Address *			
<input type="text"/>			

## Applicant's Details

Marital Status \*

Do you Smoke? \*

Do you have Pets? \*

Any recent Arrears or Adverse Credit? \*

If you have had any recent arrears or adverse credit within the last 10 years, please provide details on the 'Additional Information' page.

## Applicant's Current Address Details

Abode \*

Building/House Number \*

Building/House Name \*

Address Line 1 \*

Address Line 2 \*

Town \*

County \*

Postcode \*

## Identification

National Insurance Number \*

Identification Type (e.g. passport, driving license, etc)

Identification Number \*

## Previous Address History

Please provide details below

Building/House Number \*

Building/House Name \*

Address Line 1 \*

Town/County \*

Postcode \*

Duration at Address (Please provide dates) \*

Was the property Rented, Owned or Friends or Family \*

## I would like Rent4sure Limited, or their partner companies (e.g. Intasure), to contact me

about related products and services which may be of interest to me, such as Tenants Contents Insurance

Please Tick \*

Yes

No

## Next Of Kin

Name. \*

Address \*

Address \*

Contact Telephone Number \*

Relationship \*

## Authorisation

I confirm that the information provided in this application form is true, accurate and complete. I understand that the information that I have submitted will be used in order to assess my suitability to be granted a tenancy agreement and I give my consent to the information that I have provided being shared with third parties for this purpose. I understand and agree that current or former employers, landlords and letting agents may be asked to provide additional information about me or to verify information that I have provided. I further agree that the information that I have provided may be submitted to credit reference agencies in order that a credit check may be conducted. I expressly acknowledge that authorising searches to be conducted and references obtained does not entitle me to see such searches or references and agree that I will direct any request for copies of searches or references to the relevant originating party and not to Rent4sure Limited. I understand that I may be refused a tenancy as a result of the searches and references obtained and agree that I shall not seek to hold Rent4sure Limited liable for such refusal nor shall I seek to bring any claim against Rent4sure Limited for any loss or damage suffered by me as a result of such refusal. I understand that information which I provide or which is collected about me may be retained on file or stored electronically in accordance with the provisions of the Data Protection Act 1998. I do / do not want Rent4sure Limited, or their partner companies (e.g. Intasure), to contact me about related products and services which may be of interest to me, such as Tenants Contents Insurance.

Applicant's Name \*

Applicant's Signature \*

Date (dd/mm/yyyy) \*

## Optional Page

You only need to send this extra page in if you choose to provide any further information.

## Additional Information

If you need to provide any previous addresses, names, credit history or other credentials please describe them below.

## Supplementary Orders (For Use By Magpie Property Management Ltd Only)

If you would like to order Rent Protection alongside this Reference, please tick the appropriate box.

6 Months  
1 Month Excess

6 Months  
Nil Excess

12 Months  
1 Month Excess

12 Months  
Nil Excess