Residential Rental Application
Purple Letting Ltd, 42 Drake Circus, Plymouth, PL4 8AB
Telephone: 01752 600014 Email: office@purpleletting.com
PLEASE USE BLOCK CAPITALS

*Rental Address:			Room No. (if known)				
Monthly Rent:		Deposit Amount:					
Tenancy Length mo	onths	Start Date:					
Applicant Information							
*Title: *Full	Name:						
*Date of Birth:	*Mobile:		Other Number:				
*Email			Nationality:				
*Current Address:							
*City	County:		*Postcode:				
Owned Rented (Please Circl	e) *Monthly Pay	yment or Rent:	*How Long?				
Reason For Leaving							
Previous Address:			I.B				
City:	County:		Postcode:				
,	e Circle) Monthly Payr	ment or Rent:	How Long?				
Reason for Leaving:							
Current or previous landlord/agent	name:						
Address:							
Postcode:							
Email:							
	provide TWO forms of i		Driving License and/or Utility Bill				
Passport No.:		National Insurance No.:					
Driving Licence No.:		Do you smoke? Yes / No					
Do you have any pets? Yes / No							
If you answered yes, please state how many and what Pets you have?							
Have you been every convicted of	ease circle)	Yes / No					
If "yes", please provide a detailed description below (use separate sheet if necessary)							
Have you ever been declared bank	rupt or had any court jud	Igements filed against you?	Yes / No				
If yes please provide details							
Co-Applicant information (if more	e than one occupier, us	se separate sheet if necess	ary)				
Co-Applicant 1 Full Name:							
Relationship i.e. Spouse, Friend:							
Co-Applicant 2 Full Name:							
Relationship i.e. Spouse, Friend:							
Co-Applicant 3 Full Name:							
Relationship i.e. Spouse, Friend:							
Co-Applicant 4 Full Name:							
Relationship i.e. Spouse, Friend:							
Any proposed occupiers under the	age of 18? Yes	No (Please Circle	If yes how many:				
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Emergency Contact							
Name of a person not residing with you:							
Address:							
Postcode:				Tel:			
Relationship:							
Employment Information	n (if unem	ployed n	nark box with	x)			
Name of Employer:							
Address:							
Postcode:				Tel:			
Your Job/Title Description				Date of Emplo	,		
Is your employment circui	mstances l	ikely to cl	nange in the pe	eriod of the tenancy/i	next year? Yes No (please circle)		
If yes, how?							
*!	na of of inc		le a manusina di i		in hand statement stal		
*Income (please note, p	root of inc						
Employment		Hourly	Salar	, ,	Monthly Income:		
Housing Benefit		YES	NO	(please circle)	Monthly Income:		
Disability Allowance		YES	NO	(please circle)	Monthly Income:		
Income Support		YES	NO	(please circle)	Monthly Income:		
Retirement Pension		YES	NO	(please circle)	Monthly Income:		
Unemployment Benefit		YES	NO	(please circle)	Monthly Income:		
Sickness Benefit		YES	NO	(please circle)	Monthly Income:		
Other (please specify)					Monthly Income:		
Guarantor Details (if rec							
	*Full Name	е					
*Date of Birth:			*Tel				
*Current Address:							
*City			*Postcode				
Previous Address (if less	than 3 yea	rs at curr	ent address)				
Address:							
City: Postcode:							
Email:							
Relationship to Applicant:							
Occupation:							
Income:			per month				
Declaration							
I hereby expressly consent to my personal details including any forwarding address at the termination of any tenancy being passed to the landlord and/or							
utility company and/or to the local authority. I understand that other than for reasons outlined above all information will be treated as confidential							
I am applying for a tenancy on the basis that the property or accommodation will be my main or only home. I also give permission for enquiries to be made based on the information I have provided to establish my status.							
Please note should you not wish to process or provide inaccurate information the holding deposit will not be returned, however, should the landlord fail to grant you a tenancy the holding deposit will be returned.							
If the person seeking the tenancy decides not to proceed with the tenancy, for any reason, the holding deposit will not be returned.							
Details of the applicant and Guarantor contained in this form will be checked using a credit referencing agent for tenancy guarantee purposes. This process will in no way affect the applicant's record or ability to obtain credit in future and all information obtained will be kept confidential in accordance with the UK Data Protection Act and international privacy laws.							
A copy of the "How to Rent: The Checklist for Renting" has been made available to me along with the Deposit Scheme Terms and Conditions as part of this application.							
IF YOU KNOWINGLY SUPPLY FALSE INFORMATION IT MAY BE USED BY THE LANDLORD TO SEEK POSSESSION OF THE PROPERTY UNDER GROUND 17 OF SECTION 8 OF THE HOUSING ACT 1988 (AS AMENDED BY SECTION 102 OF THE HOUSING ACT 1996).							
Signature of Applicant:				Date:			
Signature of Guarantor (if required):				Date:			