

R. STANLEY LAIRD & SON

5 UNIVERSITY ST. BELFAST BT7 1FY www.rslaird.co.uk

Telephone: 028 9032 4772 028 9024 8072

TENANCY APPLICATION FOR	RM DATE: / /	

ALL TENANCIES ARE FOR A 12 MONTH PERIOD UNLESS OTHERWISE STATED

R. Stanley & Son may contact your present or previous landlords/employers/guarantors noted below to confirm that the information given in this application is indeed correct. It is the responsibility of all prospective tenants to ensure that all details below have been checked and are correct.

1.	PROPERTY APPLYING FOR							
2.	RENT £(total)	EPOSITE	(total)					
3.	START DATE//2015 LENGTH	OF LEASE		D.O.B	/			
4.	FULL NAME(Block Capitals)	МОВ	ILE No:					100000000000000000000000000000000000000
	EMAIL ADDRESS							
5.	PARENTS ADDRESSTOWN							
	COUNTYPOSTCODE	HOME TEL	NO(inc	area code	e)			
6.	NAME AND ADDRESS OF EMPLOYER							
	TELOCCUPATION							
7.	COLLEGE/UNIVERSITY (QUB/UUJ etc)	YEAR OF	STUDY(from Sept	2015) ·	1 st , 2 nd	3 rd , Fin	a
	IF STUDENT STATE COURSE							
8.	IF CURRENTLY RENTING ACCOMMODATION PLEASE GIVE YOUR PRESENT ADDRESS:							
	н	OW LONG HAVE YOU	BEEN LI	VING HER	E	YRS_	MTH	5
	NAME AND ADDRESS OF YOUR CURRENT LAN	IDLORD/ESTATE AGE	NT			11 F1		
		TEL NO			1	ï		
	GUARANTOR DETAILS-THIS	SECTION MUST	BE CO	<u>MPLE</u>	<u> FED</u>			
	RANTOR IS REQUIRED FOR EACH INDIVIDUAL TENANT ON EMPLOYMENT. THIS IS PURELY AN APPLICATION AND GU							
1.	GUARANTOR NAME (BLOCK CAPITALS)							
2.	HOME ADDRESS				1			
3.	LENGTH AT THIS ADDRESSYears	RELATIONSHIP TO	TENANT					
4.	TELEPHONE NO (inc area code)	MOBI	ILE		1			
5.	OCCUPATION/PROFESSION	Tick if Self	employed	d and state	profes	sion		
	EMPLOYER	POSITION HELD IN	COMPAN	Y				
	EMPLOYERS ADDRESS			TEL NO	,			