



FISHERS

Established 1913

PROPERTY & LETTING MANAGEMENT

CREDIT REFERENCE GUARANTORS APPLICATION ASSURED SHORTHOLD TENANCY UNDER THE HOUSING ACT 1988

1. PROPERTY

Property _____

Rental _____ Term required from _____ To _____

2. FULL NAMES

Guarantor's Name _____ National Ins No Age _____
Inc Title

Tenant (1) _____ National Ins No Age _____
Inc Title

Tenant (2) _____ National Ins No Age _____
Inc Title

Permanent Address of (1) Above _____ Phone No. _____

Nationality _____

Present Address of (1) Above _____ Phone No. _____

Email Address. _____

Employers / Accountants **of (1) Above** _____

Address: _____

Personnel Officer / Person Concerned: _____

Occupation **of (1) Above** _____ Length of Service _____ Income p.a. _____

Bankers **of (1) Above** _____ Account No. _____

Branch Address _____ Sort Code _____

In making application for the tenancy above, I certify that other than the tenants as above, the occupants will be:

Full Names	Sex	Age	DOB of persons under 14 years

Are You A Smoker Yes / No (Please delete as appropriate)

Are You A Pet Owner Yes / No (Please delete as appropriate)

I declare that the above particulars are true and accurate and I agree to you applying for references on my behalf.

SIGNED: _____ Date: _____

PLEASE NOTE: this is not a direct debit or standing order.

FISHERS

20-24, High Street Harborne, Birmingham, B17 9NF

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APPLICATION FOR A STATUS ENQUIRY FROM

Our Reference: **FISHERS**

20-24 High Street, Harborne, Birmingham. B17 9NF

Tel: 0121428100

Fax: 0121 428 1010

1. TO

Bank (name of bank): _____

Address (in full): _____

Sort Code: _____

2. ENQUIRY ON

Your Full Name (1): _____

Address: _____

Phone No. _____ Bank Account No. (if known) _____

Please provide your opinion concerning the ability of your customer to meet a financial commitment of £ _____ per calendar month exclusive, sharing with _____ other(s).

Enter the full amount of rent for the property that you are applying for.

3. CONSENT

I/We authorise (3) _____ to provide a bankers opinion as stated
AND DEBIT MY/OUR ACCOUNT WITH YOUR ADMINISTRATION FEE, as appropriate (4).

Signature (5) _____ Date: _____

Signature (5) _____ Date: _____

1. Insert your full name and address (and bank account number if known)
2. Insert details of commitment you are wishing to enter into e.g.
To meet a financial commitment of £ _____ p.c.m. exc. Sharing with _____ other(s).
3. Insert the name of your Bank.
4. Consult your Branch if you do not know the correct amount.
5. PLEASE ENSURE YOU SIGN & DATE THIS SECTION

PLEASE DIRECT YOUR REPLY TO THE ABOVE ADDRESS/FAX.

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