## **Full Reference Application Form**



Please return this form to Harris Shields Collection - Bridlington. Asterisks (\*) indicate a field is mandatory.

Agency Details		
Letting Agent Name *	Letting Agent ID *	
Harris Shields Collection - Bridlington	4234	

Property Details			
Total Monthly Rent •	Sin (manufacture)		
Abode •	Building/House Number *	Building/House Name •	
Address Line 1 *			
Address Line 2 *			
Town •	County •	Postcode *	

Length of Tenancy (months) *	Share of Rent *	
	£	
	11 🔞	£

Applicant's Cont	act Details			
Title (e.g. Mr. Mrs. etc.) *	First Name *		Middle Name *	Last Name *
Date of Birth (dd/mm/yyyy)		Telephone Number *		Mobile Number *
Email Address *			Previous Full Name (if your	r name has changed in the last 6 years)
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If you have had any recent arrears or adverse credit within the last 10 years, please provide details on the 'Additional Informa What is your expected residency status? Family Single Couple Sharer	Marital Status *		Do you smoke? *	Do you have pets? *	Any recent arrears or adverse credit? *
What is your expected residency status?					
Vhat is your expected residency status?					4
	l you have had a	any recent arrears or advers	se credit within the last 10	years, please provide det	ails on the 'Additional Information' page
	What is your exp	ected residency status?			
Family Single Couple Sharer	8 8	out of the second of the secon			
	amily	Single	Couple	Sharer	

Types Of Pets	
Please list all pets that will reside at the property.	
Pet 1 *	
Pet 2 *	*
Pet 2	
1	
Pet 3 *	
- <del>-</del> ±	- II SH -> ) (SHAH) + H2-MIDHON 24 + CH SH
	(A)

Applican	it's Employment	Details					
Employment Select which	Sector * most closely describes	your employer's bus	siness sector:				
Tech	Media/Creative	Finance/ Professional	Public Sector	Student	Other	Retired	Unemployed

Applicant's Work Address Details		
Abode *	Building/House Number *	Building/House Name *
Address Line 1 *		
Address Line 2 *		
Town *	County *	Postcode *

Applicant's Curr	ent Address D	etalis		
Abode *		Building/House Number	er •	Building/House Name *
		2 s) II — I sentitore t		
Address Line 1 *				
#				
1-				
Address Line 2 *				
I				
Ī.				
Town *		County *		Postcode *
Town		County		Fosicode
Move In Date (Estimate)	•			
#				
What is your current re	sidency position? It	f 'Tenant', please complete	the section titled 'I andlor	d / Agency Details' below.
a. is your content re	active positions in	Tenant, piedse complete	and section there candida	aganoj odano odione
Tenant	Owner	Live with Parents	Family / Friends	Staff Accommodation
Current Rental F	igure			
£ per week or month				
Current Rental Figure *				
Cullent Kentai rigule				
Applicant's Prev	ious Address	Details (if available)		
DOMESTICAL CONTRACTOR OF THE PARTY OF THE PA		AND THE REAL PROPERTY OF THE PARTY OF THE PA		
If you have occupied a provide any further ad	iny previous addres: dresses, going back	ses other than your current a up to 6 years, on the Additi	address in the last 10 yea onal Information page.	rs, please enter the most recent one below. Please
Abode *		Building/House Number	er.*	Building/House Name *
Address Line 1 *				
Address Line 2 *				
Town *		County *		Postcode *
		County		1
Move In Date (Estimate)	•		Move Out Date (Estimate)	ate) •

Landlord / Agency Details For Your Current Address						
Please note that we cannot accept landlord references from relatives or friends, agents' business, not personal, details.	All contact details must be your landlord or letting					
Name of Landlord / Letting Agent *	This is a Letting Agency This is a Private Landlord					
Title (e.g. Mr, Mrs, etc.) Contact First Name *	Contact Last Name *					
Contact Telephone Number *	Contact Email Address *					
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Source of Incom	e			
Please note that we ca personal, details.	nnot accept references	from relatives or friends. A	All contact details for inco	ome referees must use their business, not
Employed (PAYE)	Self-Employed (Self-Assessment)	Self-Employed (Accountant)	Investments / Savings	Benefits (please state which type)
Employer / Accountant N	lame *		Annual Income Amount *	
			£	
Position / Role			Time With Employer	
Title (e.g. Mr, Mrs, etc.)	Contact First Name *		Contact Last Name *	
Primary Contact Number		Secondary Contact Numb	per	Contact Email *
Comments / Further Infor	mation (if you have further inc	come sources, please specify the	se on the next sheet)	

Identification		
National Insurance Number *	Identification Type (e.g. passport, driving licence, etc)	Identification Number *
Bank Account Number *	Bank Account Sort Code	e •

Next Of Kin		
Names *	Phone No. *	
	1. SP - 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
Address *		
Deletionakin to you.	Email *	
Relationship to you *	Elitaii	
Personal Reference		
Name, address, telephone number and e mail address		
Names *		
Address •		
E mail & Telephone number *		
Reason For Leaving Your Current Address		
Reason: *		
Dependants under 18 years		
Names and dates of birth of all children to reside at the property *		
Time At Current Address		
Years & Months		
Time spent at this address *		
Where did you have shout Hamile Shields Collection 9		
Where did you hear about Harris Shields Collection?  Where did to hear about Harris Shields Collection?		
Where did to hear about name Shields Collection?		

1	Get Started	2 Personal Details	(3) Source of Income	(4) Offer Conditions
* O		e information I am providing e Letting Agency if required.	is true and accurate, and giv	e permission for it to
<b>.</b>		t this information may be ac Letting Agency.	cessed again should I apply t	o rent a future
*		t the information on this for as third-party referencing a	m may be shared with the La gencies.	ndlord of the
•	I agree and acception via the Goodlord		ation for this tenancy digitall	y via email, or online
* □	I understand that Holding Deposit.	A SAME AND AND ONE OF THE PERSON OF THE PERS	may lead to the Letting Age	ncy withholding the
*		m in a position to proceed w n by the Letting Agency.	vith the tenancy, should I be i	nvited to make a
	Signed			
	Print			
	Date		er.	