

Landlord

Landlord Name	Title:	Forenames:	Surname:
	Or Company:		

Landlord Address			
			Postcode:

Residency	<input type="checkbox"/> Landlord lives in the UK	<input type="checkbox"/> Landlord lives overseas • CNR No:
-----------	---	--

NB. Landlords who live overseas are obliged to pay tax on income earned from letting their properties in the UK unless they have applied for and received a CNR certificate. Please contact agent for further details if necessary.

Contact Numbers	Home:	Work:
	Mobile:	Fax:

E-mail		
	CC:	
	BCC:	

Statements	Would the landlord prefer to receive statements: by <input type="checkbox"/> E-mail or by <input type="checkbox"/> post?
------------	--

Copy each statement to	Title:	Forenames:	Surname:
	Or Company:		
	Address:		
			Postcode:
	<input type="checkbox"/> E-mail statements to:		

Payment Method	<input type="checkbox"/> Send a cheque to landlord	<input type="checkbox"/> Send cheque to bank	<input type="checkbox"/> Use BACS / AutoPay
----------------	--	--	---

Bank Details	Branch Name:	Account Name:
	Branch Address:	Sort Code:
		Account Number:
	Postcode:	

Landlord Preferences

Repairs

<input type="checkbox"/> Let us manage repairs	<input type="checkbox"/> I would prefer to pay invoices	<input type="checkbox"/> I will do the repairs myself
--	---	---

Contact Information

NB. Are there any special arrangements we should make for contacting the landlord? For example, if the landlord lives overseas you might want to take a note of the time difference

Preferred Contractors

Name:
Name:
Name:

Property To Rent

Property Details

Address:	Target Rent: £ pcw/pw
	Mortgaged Properties Only
	Property is subject to a mortgage: <input type="checkbox"/> YES <input type="checkbox"/> NO
	Mortgage provider:
	Mortgage provider informed of let: <input type="checkbox"/> YES <input type="checkbox"/> NO
Postcode:	

Furnishing

Furnished: <input type="checkbox"/>	Part Furnished: <input type="checkbox"/>
Fully Furnished: <input type="checkbox"/>	Unfurnished: <input type="checkbox"/>
Note:	

Alarm & Access

Property is alarmed:	Operated by key:	Operated by code:
We must contact landlord to gain access:	You have provided us with keys:	
Security Response:	Security Company:	

Utility Companies

Gas:	Gas Ref No:
Electricity:	Electricity Ref No:
Water:	Council:
Housing Benefit:	Sewage:
Phone:	Television:

Service Contracts

Insurance Policies

	Policy No	Company	Informed	Expiry Date
Buildings				
Contents				
Rent Protection				
Legal Expenses				
Repairs Insurance				
Gas Check				
Public Liability				

Safety Inspections

Gas Inspection Required:	<input type="checkbox"/> YES <input type="checkbox"/> NO	Certificate Dated:
Need PAT Testing:	<input type="checkbox"/> YES <input type="checkbox"/> NO	Certificate Dated:
Fixed Wire Check Required:	<input type="checkbox"/> YES <input type="checkbox"/> NO	Certificate Dated:
Needs Fire Safety Check:	<input type="checkbox"/> YES <input type="checkbox"/> NO	Certificate Dated:
Plugs And Fuses:	<input type="checkbox"/> YES <input type="checkbox"/> NO	Certificate Dated:
Furnishings Meet Fire Regs:	<input type="checkbox"/> YES <input type="checkbox"/> NO	Date Checked:
Chimney Needs sweeping:	<input type="checkbox"/> YES <input type="checkbox"/> NO	Last Swept:
Needs Asbestos Check	<input type="checkbox"/> YES <input type="checkbox"/> NO	Date Checked:
H.M.O. Licence Required	<input type="checkbox"/> YES <input type="checkbox"/> NO	Renewal Due:

