Address:
283 Hans Strijdom Ave
Lyttelton Manor
0157

Cell: 082 857 2686
Fax: 086-542-9627
E-mail: linda@forr.co.za

APPLICATION TO RENT PROPERTY

Declaration by Lessee

Details of Lessee(s)

Full name of Lessee			
Identity/Trust/CC/ Company number		Cell Number	
Telephone (Home)		Telephone (Business)	
Fax Number		e-mail address	
If you are a non-resident, state country of residence and passport number			
Physical Address			
Postal Address			
Marital status			
Full name of Spouse			
Identity/Trust/CC/ Company number		Cell Number	
If you are a non-resident, state country of residence and passport number			

Details of employment

Name of employer			
Salary p/m		Occupation	
Telephone Number		Period of employment	
Physical Address			

Details of Trade and/or other references

1. Next of Kin (full name)		Telephone No	
2. Next of Kin (full name)		Telephone No	
3. Trade Reference		Telephone No	
4. Trade Reference		Telephone No	

Details of Your Bank Account

Name of Bank		Account Number	
Type of Account		Account Holder	
Branch Address		Branch Code	

Details of Property and Finances

Address of property		Date of Occupation	
Deposit		Rental p/m	
Lease administration costs		Bank details of Agent	

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Declaration by Lessee

I / We confirm the following number of people will be residing at the premises	

Proof of payment for the Deposit plus Lease administration costs are attached to this application. I confirm and agree that the Agent does a credit check and supply the results to the Lessor. I/we will be required to enter into a written lease agreement with the Lessor. This declaration is made by me/us as *lessee(s)/representative(s) of the lessee(s). I/We certify that the information furnished in this declaration is true and correct.

Signature of lessee(1)	Date	Signature of lessee(2)	Date

Declaration by Agent

I certify that these are true copies of the declarations held by me, which declarations will be retained by me for 5 years.

Name of Agent		Cell number	
Signature		Date	

PLEASE FAX COMPLETED FORM TO 086 542 9627