

APPLICATION FOR COMMERCIAL LETTING

Application to rent premises located at:-

NAME (APPLICANT 1):

Date of Birth: _____

HOME
ADDRESS: - _____

_____ POST CODE: _____

TELEPHONE: (H) _____ (B) _____

NAME (APPLICANT 2): _____

Date of Birth: _____

HOME
ADDRESS: _____

_____ **POST CODE:** _____

TELEPHONE: (H) _____ (B) _____

BUSINESS INFORMATION:

IS YOUR BUSINESS A NEW VENTURE? **YES / NO**

IF YES:

WHAT IS THE INTENDED NATURE OF YOUR BUSINESS:

IF NO:

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

DURATION OF BUSINESS IN OPERATION: _____

WHAT IS THE NATURE OF YOUR BUSINESS?: _____

DO YOU LEASE YOUR CURRENT PREMISES: **YES / NO**

IF YES, PLEASE PROVIDE THE FOLLOWING:-

LANDLORD'S NAME: _____

ADDRESS: _____

SOLICITORS DETAILS (if applicable)

NAME: _____

ADDRESS: _____

TELEPHONE: _____

BANK DETAILS:

BANK NAME: _____

ADDRESS: _____

ACCOUNT NO: _____ SORT CODE: _____

NAME OF ACCOUNT HOLDER: _____

(1) At what date would you wish your tenancy to commence?

(2) What length of lease do you require?

Your signature is an authority for Tim Martin and Company to complete a credit search in your name with a credit reference agency.

SIGNATURE – APPLICANT (1): _____

SIGNATURE – APPLICANT (2): _____

DATE: _____