

## **Application for Residential Dwelling**

ADDRESS OF PRO	DPERTY	<del> </del>		<del></del>
SURNAME OF API	PLICANT	<del> </del>		<del></del>
CHRISTIAN/FORE	NAMES			
PRESENT ADDRE	SS			
			POST CODE	
TELEPHONE	[I	າ]	[w]	[m]
HOW MANY PEOF	PLE WILL LIVE IN T	HE PROPERTY		
HOW MANY UNDE	R THE AGE OF 16	YEARS	_	
DO YOU HAVE AN	Y PETS		ARE YOU A SMOKER	YES/NO
DO YOU HAVE A	DISABILITY THAT V	VILL REQUIRE V	WORKS TO THE PROPERTY?	
le. Additional hand	rails YES/NO.	(IF YES PLEA	SE SPECIFY NATURE OF WORKS)	
			HOUSING BENEFIT	
NOTE: A deposit towards the Agreer			to six weeks rent together with a co	ontribution
PRIME REFE	RENCES			
PRESENT EMPLO	YER and ADDRES	S (Please give co	ontact name and/or works number)	
EMPLOYERS TELEPHONE NUMBER			FAX NUMBER	
EMPLOYERS EMA	IL ADDRESS			
NAME OF BANK a	nd ADDRESS			
CONTACT NAME/	ACCOUNT NUMBE	R		
BANK TELEPHONE NUMBER			FAX NUMBER	
OTHER REF	ERENCES			
Please supply the na These people will be Priest/Vicar: Doctor; I	e asked for a charac	ogether with teleph oter reference. Pa	one number, if available, of any two of the st Landlord: Past employer: School tea	e following. cher/Tutor:
[1]				
[2]				
DATE	SIGNATURE	LE VDDI ICVNITO	191	