

***This form must be completed in full in Block Letters –Tel: 481-7444 Fax: 481-1176/ 0866306251***

**Date Premises Viewed: \_\_\_\_\_ By Whom: \_\_\_\_\_ Contact person @ Bld : \_\_\_\_\_**

I/We having viewed the below premises, do hereby make application to hire the accommodation referred to hereunder:

**ACCOMMODATION**

Building: \_\_\_\_\_ Flat Number: \_\_\_\_\_ Flat Size: \_\_\_\_\_ Occupation Date: \_\_\_\_\_

Address : \_\_\_\_\_ Tenant Reference No: \_\_\_\_\_

Parking required: Yes \_\_\_\_\_ No \_\_\_\_\_

Number of adults to occupy: Male \_\_\_\_\_ Female : \_\_\_\_\_

Number of children to occupy: Male \_\_\_\_\_ Female: \_\_\_\_\_

Which advert did you respond to :

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> IMMOAfrica     | <input type="checkbox"/> Framework To Let Board | <input type="checkbox"/> WhatsApp        |
| <input type="checkbox"/> Other          | <input type="checkbox"/> E-mail                 | <input type="checkbox"/> Property 24     |
| <input type="checkbox"/> Poster/ Flyers | <input type="checkbox"/> Facebook               | <input type="checkbox"/> Tenant Referral |

**PERSONAL INFORMATION**

Surname: \_\_\_\_\_ Name: \_\_\_\_\_

ID No: \_\_\_\_\_ Married: YES  NO

Name & Surname of partner: \_\_\_\_\_ ID No: \_\_\_\_\_

E- Mail : \_\_\_\_\_ Cell Number: \_\_\_\_\_

**PRESENT ACCOMMODATION**

Where do you presently stay: \_\_\_\_\_

Why are you leaving: \_\_\_\_\_ How long did you stay there: \_\_\_\_\_

Who are you paying rent to: \_\_\_\_\_ Tel No: \_\_\_\_\_

Comments: \_\_\_\_\_

**YOUR WORK INFORMATION**

Where do you work: \_\_\_\_\_

What work do you do: \_\_\_\_\_ Tel Number: \_\_\_\_\_

How long have you worked there: \_\_\_\_\_ Who do you report to: \_\_\_\_\_

What is your monthly salary: \_\_\_\_\_ Your employee no: \_\_\_\_\_

Comments: \_\_\_\_\_

**YOUR PARTNER'S WORK INFORMATION**

Where does your partner work: \_\_\_\_\_

What work does he/she do: \_\_\_\_\_ Tel Number: \_\_\_\_\_

How long has he/she worked there: \_\_\_\_\_ Who does he/she report to: \_\_\_\_\_

What is his/her monthly salary: \_\_\_\_\_ His/Her employee no: \_\_\_\_\_

**BANK INFORMATION**

Bank Name: \_\_\_\_\_ Branch: \_\_\_\_\_  
 Type of Account: \_\_\_\_\_ Account No: \_\_\_\_\_

**NEXT OF KIN – NOT STAYING WITH YOU**

Mother/ Father's name: \_\_\_\_\_ Tel Number: \_\_\_\_\_  
 Brother/Sister's name: \_\_\_\_\_ Tel Number: \_\_\_\_\_  
 Friend's name: \_\_\_\_\_ Tel Number: \_\_\_\_\_

**HIRE PURCHASE/MONTHLY ACCOUNT INFORMATION**

| <u>Company Name</u> | <u>Amount Owning</u> | <u>Monthly Instalment</u> |
|---------------------|----------------------|---------------------------|
| _____               | _____                | _____                     |
| _____               | _____                | _____                     |

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**FOR OFFICE USE**

| <b>DEPOSIT</b>      | <b>PART MONTH</b>   | <b>FULL MONTH</b>   |
|---------------------|---------------------|---------------------|
| Amount              | Date                | Date                |
| Parking             | Rent                | Rent                |
| Electricity         | Parking             | Parking             |
| Key                 | Provisional Gas     | Provisional Gas     |
| Remote              | Provisional Elec    | Provisional Elec    |
| <b>TOTAL: R</b>     | Provisional Water   | Provisional Water   |
| Lease Fee           | Refuse              | Refuse              |
| TPN/ITC Charge      | Sewerage            | Sewerage            |
|                     | Basic Facility      | Basic Facility      |
| <b>TOTAL DUE: R</b> | <b>TOTAL DUE: R</b> | <b>TOTAL DUE: R</b> |

**Grand Total:R** \_\_\_\_\_

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I, the undersigned, hereby warrant that the details on this application are correct and undertake, on being advised that the premises herein applied for have been allocated to me, to sign a Framework Property Services CC's standard Lease and to pay the administration fee as scheduled. I am aware that these payments are received by Framework Property Services CC, without prejudice to your principal's strict rights and further undertake not to take occupation of the premises before signing the standard Lease and paying the charges, rent, etc., as specified. Should I, notwithstanding this undertaking, take occupation and/or pay a rent, then I hereby bind myself to the said standard conditions of Lease as though I had signed the said Lease Form. I further agree that this application form will form part of the Lease document.

I further consent to and authorise the landlord to at all times:

- Contact request and obtain information from any persons, business or credit bureau relevant to an assessment of the behaviour, profile, payment patterns and credit worthiness of myself;
- Furnish information concerning the behaviour, profile, payment patterns and creditworthiness of myself to any credit bureau or similar service or to any person or business seeking a trade reference regarding my dealings with the landlord;
- I must report in writing all defects/damages to the premises within 3 days and a stamped copy must be retained by me for my records with the acknowledgement of receipt from the agent;
- I further understand that I am supplying Framework Property Services CC will personal information as defined under the POPI Act. Framework undertakes to ensure that reasonable measures have been put in place to protect my information supplied by me. Framework will under no circumstances distribute or sell my information to any 3rd party for marketing purposes. In the event of a data breach, Framework cannot be held liable for any losses incurred or damages suffered as a result of the data breach.etc)The applicant acknowledges and accepts the conditions as above. Contact request and obtain information from any persons, business or credit bureau relevant to an assessment of the behaviour, profile, payment patterns and credit worthiness of myself;
- Furnish information concerning the behaviour, profile, payment patterns and creditworthiness of myself to any credit bureau or similar service or to any person or business seeking a trade reference regarding my dealings with the landlord;
- I must report in writing all defects/damages to the premises within 3 days and a stamped copy must be retained by me for my records with the acknowledgement of receipt from the agent;
- The applicant acknowledges and accepts the conditions as above.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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TPN CHECK: YES  NO  DEFAULTS: YES  NO  DATE: \_\_\_\_\_  
 ITC CHECK: YES  NO  DEFAULTS: YES  NO  DATE: \_\_\_\_\_

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**FICA DOCUMENTATION**

ID DOCUMENT: YES  NO  PROOF OF INCOME: YES  NO   
 PROOF OF RESIDENCE: YES  NO  BANK STATEMENT: YES  NO