



Unit 5a, Liosban Business Park, Tuam Road, Galway

Tenant Application Form

Telephone: 091-771898

E-mail: letting@winterspm.com

PSRA Licence No: 001876

Address of Property: _____

Number of Occupants: _____ **Adults:** _____ **Children:** _____

Pets: **Yes / No** If yes, please specify _____

Date you wish to move in: _____ Monthly Rent: _____ Security Deposit: _____

Length of Lease Requested? **12 Months:** _____ **Other:** _____

Name of Letting Agent who showed you this Property: _____ Date of Lease Signing: _____

During initial application, prospective Tenants should complete all sections of the form noted as Part 1 – Application Stage.
*If their application has been accepted by the Landlord, data within Part 2 – Acceptance Stage **will need to be completed** prior to lease signing occurring.*
Note: All unsuccessful Tenant Application Forms will be destroyed.

PART 1: APPLICATION STAGE <i>Please read carefully</i> At this stage of the process each applicant <u>must</u> supply the following: (a) Present Employer <u>Written Reference</u> (b) Previous Landlord <u>Written Reference</u> (c) Photo ID per applicant (official ID, passport/drivers licence)	PART 2: ACCEPTANCE STAGE <i>To be completed if application is accepted</i>
1 (a) HEAD TENANT PERSONAL DETAILS Mr/Mrs/Ms _____ First Name: _____ Last Name (s) _____ Home Address: _____ Mobile Phone No: _____ Nationality: _____ Date of Birth (dd/mm/yy) _____ Email Address: _____	PPS Number for Head Tenant: <hr/> OFFICE USE REFERENCE 1 <input type="checkbox"/> REFERENCE 2 <input type="checkbox"/> PHOTO ID <input type="checkbox"/>
1 (b) HEAD TENANT EMPLOYMENT DETAILS Job Title: _____ Employer's Name: _____ Employer's Address: _____ Tel No: _____	
2 (a) SECOND TENANT PERSONAL DETAILS Mr/Mrs/Ms _____ First Name: _____ Last Name (s) _____ Home Address: _____ Mobile Phone No: _____ Nationality: _____ Date of Birth (dd/mm/yy) _____ Email Address: _____	PPS Number for Second Tenant: <hr/> OFFICE USE REFERENCE 1 <input type="checkbox"/> REFERENCE 2 <input type="checkbox"/> PHOTO ID <input type="checkbox"/>
2 (b) SECOND TENANT EMPLOYMENT DETAILS Job Title: _____ Employer's Name: _____ Employer's Address: _____ Tel No: _____	

3 (a) THIRD TENANT PERSONAL DETAILS

Mr/Mrs/Ms _____ First Name: _____ Last Name (s) _____

Home Address: _____

Mobile Phone No: _____ Nationality: _____

Date of Birth (dd/mm/yy) _____ Email Address: _____

3 (b) THIRD TENANT EMPLOYMENT DETAILS

Job Title: _____ Employer's Name: _____

Employer's Address: _____ Tel No: _____

PPS Number for Third Tenant:

OFFICE USE

REFERENCE 1
REFERENCE 2
PHOTO ID

4 (a) FOURTH TENANT PERSONAL DETAILS

Mr/Mrs/Ms _____ First Name: _____ Last Name (s) _____

Home Address: _____

Mobile Phone No: _____ Nationality: _____

Date of Birth (dd/mm/yy) _____ Email Address: _____

4 (b) FOURTH TENANT EMPLOYMENT DETAILS

Job Title: _____ Employer's Name: _____

Employer's Address: _____ Tel No: _____

PPS Number for Fourth Tenant:

OFFICE USE

REFERENCE 1
REFERENCE 2
PHOTO ID

WE WELCOME SOME FEEDBACK FROM YOU

Where did you hear about Winters Property Management DAC?

www.winterspm.com

Galway Advertiser

www.daft.ie

Word of Mouth

Facebook

Other Please specify _____

CURRENT BANK A/C DETAILS

(this account will be used to set up your standing order for payment of rent, monthly in advance)

Name of Bank: _____

Bank Address: _____

A/C Holder Name: _____

BIC: _____

IBAN: _____

IMPORTANT NOTES:

This application is **not** a contract and is **not** a guarantee of acceptance. We cannot proceed with any application until all references have been received by our office & Part 1 of this form is complete.

If your application is successful and has been accepted by the Landlord, you will be required to complete Part 2 and pay the agreed security deposit without delay.

A STANDING ORDER MUST BE SET UP TO PAY YOUR RENT ON A MONTHLY BASIS IN ADVANCE. IF RENTS ARE NOT PAID ON TIME, A LATE FEE OF €30 WILL BE INCURRED.

Recommendation:

It is recommended that tenants take out an insurance policy to cover their own contents & valuables.

I/we on behalf of all applicants wish to confirm that we consent to the data provided above being utilised by Winters Property Management DAC in connection to our application to rent this property. This consent is only required up to the commencement of a tenancy. Once a tenancy commences no consent is required due to lawfulness of processing.

I/we declare that all information in this application is true to the best of my knowledge and I understand all/any conditions set out in this application.

I/we consent for WPM DAC to use the details provided for Property Services marketing

Signature/s: _____ Date: _____