

Guarantor Check Form

| Name: | |
|-----------------------------------|--------|
| (Miss,Mrs,Ms,Mr) | |
| Maiden Name: | |
| Date of birth: | |
| NI Number: | |
| Nationality/ Require work permit: | |
| | |
| Mobile Phone: | |
| House Phone: | |
| Email: | |
| Marital status: | |
| Aware of any adverse credit: | |
| Driving Licence: | YES/NO |
| Current living address: | |
| | |
| Are you a homeowner: | YES/NO |
| | |
| Period at current address: | |
| | |
| Landlord/ Managing | |
| Agency contact details: Name: | |
| Number: | |
| Email : | |
| | |

| Address: | |
|--|-------------------------|
| | |
| | |
| Previous Address: | |
| | |
| Period at previous address: | |
| Landlord/ Managing Agency contact details: | |
| Name: | |
| Number: | |
| Email : | |
| Address: | |
| | |
| Employment Status: | Employed / Not Employed |
| Company and Position: | |
| Employment Address: | |
| | |
| Employment reference: | |
| Name: | |
| Email: | |
| contact number: | |
| Add at the second second | |
| What is your monthly Income: | |
| Salary: (Yearly) | |
| Payroll Number: | |
| Novt Of Kin | |
| Next Of Kin: | |
| (Name and Relationship) | |
| Next of kin contact details: | |
| Number: | |
| Trainiber. | |

| Address: | |
|---|--------|
| Email: | |
| Ever been evicted: | YES/NO |
| Alternative address and contact number: | |
| Please sign to confirm you are happy for relevant checks to be carried out (including credit check, land registry & employment) and you are happy for us to pass on your details, checks & references to the relevant related parties including landlord. | |
| Sign | Date |

OFFICE USE ONLY

- Land Registry Search
- o Employment Reference
- o Credit Status