**Tenant registration form**

**Please complete in BLOCK CAPITALS**

|  |
| --- |
| **Personal details** |
| Name |  |
| Date of birth |  |
| Telephone (home) |  |
| Telephone (work) |  |
| Mobile |  |
| Email  |  |
| I would like to receive regular updates of available properties.  |
| Yes | No |
| Are you a smoker? | Yes / no |
|  |  |
| **Preferred Area** |
| Location preferredArea, In Town or rural |  |
| Status at current address | Owner / tenant / other (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) |
| Length of time at this address |  |
| **Property preference details** |
| Type pf propertyHouse or Flat |  |
| Minimum Bedroom(s) |  |
| Monthly rental budget |  |
| Would you consider out with your preferred area, if yes how far, ? miles  |  Miles |
| Proposed/required entry date |   |
| Number of adults 18yrs + to occupy property |  |
| Age & sex of any children under 18 yrsto occupy property |  |
| Any accessibility concerns, i.e ease of access for wheelchair etc | Yes / no |
| Any pets or assistance animals to occupy property? | Yes / no |
| If yes, state type & age of pet or assistance animal |  |
| Any specific requirements i.e Parking, garage, garden etc |  |
|  |
| Print name |
| Send completed form to |  info@mckenzie-ent.comor submit on the website under the applications tab  |

