

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 <input type="checkbox"/> No <input type="checkbox"/>	
Are you a smoker?	Yes / no
Preferred Area	
Location preferred Area, In Town or rural	
Status at current address	Owner / tenant / other (_____)
Length of time at this address	
Property preference details	
Type pf property House 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 yrs to 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.com or submit on the website under the applications tab