



PROPERTY DETAILS FORM

Please complete one form per property

Landlord/Landlady/Agent Name:

Address of Property:

.....

..... Post Code:

Type of Accommodation:

Shared House/Flat () Self-contained House/Flat () Bedsit ()

Is the Landlord resident at the property: Yes () No ()

Do any non students live at the property: Yes () No ()

How many people reside at the property when it is fully occupied:

How many single study bedrooms are available to let:

Rent in £ per person per week:

How many twin study bedrooms are available to let:

Rent in £ per person per week:

Is the rent inclusive of the following bills: Gas () Electricity () Water () None ()

How often is the rent to be paid: Weekly () Monthly () Termly () Other ()

Deposit per person: £.....

Do you offer a reduced rent retainer over vacations: Yes () No ()

Will you require the resident/s to sign a contract: Yes () No ()

The property includes:

Burglar alarm () Dishwasher () Cutlery ()

Garage/Drive () Microwave () Telephone ()

Washing machine () Central Heating () Crockery ()

Lounge () Garden () Television ()

Smoke Alarms ()

Date CORGI Gas Certificate issued (Please enclose copy):

Description of Property : (no more than 20 words)

I am the Landlord/Landlady/Agent for this property and certify that, to the best of my knowledge the information contained on this form is accurate. By completing this form you are giving consent for this information to be held on a computer and if requested, to be passed onto statutory bodies.

Signed: Dated:

For office use only	Landlord/Agent Reference No:	Property Ref No:
	Date inputted on Database:	Administration Fee Paid:
	Photographs: Yes () No ()	