

Maras Reference Application Form - Guarantor

Agent Name	<input type="text"/>	Agent Code	<input type="text"/>
Agent Tel	<input type="text"/>	Agent Fax	<input type="text"/>

Please complete this form using block capital letters

Service Required (to be completed by the letting agent)

Reference Service	Rental Guarantee	Policyholder
Full Reference <input type="checkbox"/>	Rapid <input type="checkbox"/>	Elite Platinum <input type="checkbox"/>
Credit Check <input type="checkbox"/>	Elite 6 <input type="checkbox"/>	Elite 12 <input type="checkbox"/>
	Elite 6 Gold <input type="checkbox"/>	Elite 12 gold <input type="checkbox"/>
		Landlord <input type="checkbox"/>
		Letting Agent <input type="checkbox"/>

Section 1 – Property Rental Details

Landlord name	<input type="text"/>		
Address	<input type="text"/>		
Postcode	<input type="text"/>		
Initial tenancy rent	<input type="text"/>	Total monthly term	<input type="text"/>
Proposed tenancy start date	<input type="text"/>	Is tenancy being paid in advance?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Number of tenants	<input type="text"/>	If joint tenancy, applicants share	<input type="text"/>

Section 2 – Guarantor Personal Details

Title	<input type="text"/>	Forename(s)	<input type="text"/>
Surname	<input type="text"/>	Date of Birth	<input type="text"/>
Marital status	<input type="text"/>	Phone number	<input type="text"/>
Email address	<input type="text"/>	Fax number	<input type="text"/>
Current occupancy status	Owner <input type="checkbox"/>	Private tenant	<input type="checkbox"/>
	Living with Parents <input type="checkbox"/>	Existing tenant of agent	<input type="checkbox"/>
	If other, please advise <input type="text"/>		
Address	<input type="text"/>		
Postcode	<input type="text"/>	Email address	<input type="text"/>
Phone number	<input type="text"/>	Fax number	<input type="text"/>

Previous addresses (if you have lived at the above address for less than 3 years)

Address		
Postcode		Length of time at address
Address		
Postcode		Length of time at address
Address		
Postcode		Length of time at address

Section 3 - Adverse credit

Is there any current, historic or pending adverse credit? Yes No

If yes, please supply details

Section 4 - Employment details (Current)

Are you:

A Company Director? Self-Employed? If yes, please provide a copy of your latest set of tax calculations (SA302). If you are unable to provide us with a copy please complete Section 5.

Retired? If yes, please provide a copy of your latest P60 or pension statement or the latest 3 months bank statements.

Please state employed status:

Permanent Contract Temporary Worker Student

Full time education – Student unemployed Other – please specify

Company name

Position held

Start date If part-time, please provide hours worked

Payroll number

Address

Postcode

Contact name Phone number

Email address Fax number

Please state income Please state if annual/ monthly/ weekly

Other income details – Please specify

Is the position likely to change? Yes If yes, please complete the future employment section No

Future or Past Employment details

Only complete this section if employed by the current firm for less than 6 month or for future employer

Company name

Position held

Start date If part-time, please provide hours worked

Payroll number

Address

Postcode

Contact name Phone number

Email address Fax number

Please state income Please state if annual/ monthly/ weekly

Other income details – Please specify

Section 5 - Accountant Details (Only Required for Partners, Self Employed or Company Directors)

Company name

Address

Postcode

Position held

Contact name Phone number

Email address Fax number

Start Date Date of finalised accounts

Profit / Loss Are you a partner? Yes No

If yes, what percentage of profit was allocated?

Section 6 – Landlord insurance referral (to be completed by the Letting Agent)

Address

Postcode

Email Address Phone Number

Agency Representative (Print Name) Fax Number

I confirm that I have gained consent from the above customer to pass their details to MARAS, who will use the information provided to contact them by telephone and/or letter for a general insurance quotation.

Signature

Section 7 - Additional Information

Additional comments:

Section 8 - Declaration

I hereby confirm that the information provided by me is to the best of my knowledge true. I consent to this information being verified by contacting the third parties detailed in this form. I understand that the results of the findings will be forwarded to the appointed letting agent and/or landlord and may be accessed again should I default on my rental payment or apply for a new tenancy in the future. I agree that MARAS or their approved agent may search the files of a credit referencing agency and IDS Limited, the insurance industry's data collection agency, which will keep a record of that search. I understand that I may request the name and address of the credit reference agency to whom I may then apply for a copy of the information provided. I also understand that in the event of me defaulting on the rental payment, that any default may be recorded with the credit reference agency and IDS Limited, who may supply the information to other credit companies or insurers in the quest for the responsible granting of tenancies, insurance and/or credit. I understand that in the event of any default by me in respect of my covenants in my tenancy agreement with my landlord, the information contained herein may be disclosed to MARAS and/or one or more tracing companies and/or debt collection agencies in order to recover any monies due or to trace my whereabouts. The information provided in this form by me is information as described in Ground 17 of the Housing Act 1996 (Ground 6 Housing Act Scotland 2005) and I understand that if any information within this application is found to be untrue, it is grounds for termination of the tenancy. I also understand that any default in the payment of rent may affect any future applications for tenancies, insurance or credit. The details you provide will be held by MARAS and the letting agent and may be used by us or passed to carefully selected third parties to keep you up to date on our products and services and those of the Towergate Group and other organisations we believe will be of interest to you.

If you prefer not to receive this information, please tick this box

Applicants signature

Date

Print Name

Once completed please return this form to your letting agent

Please note You can track the progress of this Reference request by accessing our website - www.maras.co.uk selecting the "application tracker" option, enter your date of birth and the agent code (noted on the first page) and select "search".