

RESIDENTIAL LEASE APPLICATION FORM sisaya.mgeyi@cityprop.co.za 012-319-8885 **OFFICE USE** APP ID: Existing Status: New New existing **Trf credit:** Yes No Tenant code: If existing: Unit change Renewal Case number: Building transfer Additional unit If new existing: Q number: Downgrade Lease fee: Standard Upgrade Other Deal maker: **SISAYA** 15th payer **Credit Control:** Bursary Student Building Manager Property name: Lease start date: Lease term: Property code: Bach 1 Bed Tenant type: Natural Juristic BO: Yes No Unit number: 1.5 Bed 2 Bed Deposit arrangement: Yes No Surety: Yes No Rental: 2.5 Bed 3 Bed Number of months: 2 Statement: Post Hand 3.5 Bed 4 Bed E-mail A. APPLICANT/S DETAILS Applicant 1: Applicant 2: Surname: Initials: Full names: Full names: Gender: Male Female Gender: Male Female ID Type: SA ID Passport Permit ID Type: SA ID Passport Permit ID/Passport number: ID/Passport number: DD/MM/YY DD/MM/YY Date of birth: Date of birth: SA citizen: Yes SA citizen: Yes If not, permit number: If not, permit number: DD/MM/YY DD/MM/YY Permit expiry date: Permit expiry date: Passport and Visa expiry date:DD/MM/YY Passport and Visa expiry date:DD/MM/YY Country of permanent residence: Country of permanent residence: Telephone number: Telephone number: Mobile phone: Mobile phone: Email address: Email address: Postal address: Postal address:Code: Complete if applicant: Company CC Trust Sole Proprietor Other Registration number: Entity name:

Please note that an incomplete form will not be processed.

Trading as:

City Property Administration (Pty) Ltd. Reg. No. 1968/010808/07

VAT number:

B. APPLICANT/S INCOME

Applicant 1:	Applicant 2:		
Employment status: Student/Bursary Pensioner Beneficiary	Employment status: Student/Bursary Pensioner Beneficiary		
Self-employed Employed	Self-employed Employed		
Monthly net take home pay:	Monthly net take home pay:		
Occupation:	Occupation:		
Employer name:	Employer name:		
Employer/supervisor/HR telephone number:	Employer/supervisor/HR telephone number:		
Do you earn any other monthly income: Yes No	Do you earn any other monthly income: Yes No		
Source:	Source:		
Specify monthly income amount:	Specify monthly income amount:		
Home language:	Home language:		
Communication channel: Phone SMS Email	Communication channel: Phone SMS Email		
Do you have a post matric qualification: Yes No No	Do you have a post matric qualification: Yes No		
If yes, please confirm level: Certificate Diploma Bachelor	If yes, please confirm level: Certificate Diploma Bachelor		
Honours Masters Doctors	Honours Masters Doctors		
How did you hear about us: Website Returning tenant	How did you hear about us: Website Returning tenant		
Current tenant Promotions Pamphlets Billboards	Current tenant Promotions Pamphlets Billboards		
Newspaper Show unit Referral Social media	Newspaper Show unit Referral Social media		
Google Other	Google Other		
Would you like to receive marketing/promotional communication from us: Yes No No	Would you like to receive marketing/promotional communication from us: Yes No		
C. APPLICANT/S BANK ACCOUNT DETAILS			
Applicant 1:	Applicant 2:		
Type of account: Current Transmission Savings Cheque Other	Type of account: Current Transmission Savings Cheque Other		
Name of the account holder:	Name of the account holder:		
Account number:	Account number:		
Bank:	Bank:		
Branch:	Branch:		
Branch code:	Branch code:		
D. APPLICANT/S SURETY DETAILS			
Applicant 1:	Applicant 2:		
Full/Registered names:	Full/Registered names:		
ID/Registration number:	ID/Registration number:		
Contact number:	Contact number:		
Email address:	Email address:		
Residential address:	Residential address:		
Code:	Code:		
Please note that an incomplete form will not be processed.	City Property Administration (Pty) Ltd. Reg. No. 1968/010808/07		

E. /	APPLICANT/S NEXT OF KIN [DETAILS (Not to be an occup	pant)			
Applicant 1:			Applicant 2:	Applicant 2:		
Full	names:		Full names:	Full names:		
Con	ntact number:		Contact number:	Contact number:		
Relationship to applicant:		Relationship to applic	Relationship to applicant:			
F. <i>A</i>	APPLICANT/S OCCUPANTS (N	lot to be next of kin)				
N.A	AME AND SURNAME	ID/PASSPORT NUMBER	TEL NUMBER	STUDENT (YES/NO)	STUDENT NUMBER	
G . 1	TERMS AND CONDITIONS					
1.	I/We the undersigned (hereinafter referred to as 'the Applicant'), hereby warrant that the information contained in this application is true and correct.					
2.	In the event that the person(s) signing below is/are signing in a representative capacity he/she warrants that he/she is duly authorised to act herein for and on behalf the Applicant. In the event that he/she not being so authorised, or in the event that the information relating to the Applicant not being correct, the signatory hereto agrees that he/she shall be personally liable in all respects as though he/she is the Applicant.					
3.	The Applicant agrees to pay a non-refundable administration fee in the event of this application being accepted by the landlord.					
4.	The Applicant acknowledges and agrees that the landlord or its agent may perform a credit search on the Applicant, sureties, members and directors with one or more of the registered credit bureaux when assessing this application and to transmit details to a registered credit bureaux of how the Applicant has from time to time performed on the account in meeting the obligations in terms of the lease.					
5.	The personal information given in this lease application form will be used by us for the purpose of approaching you to promote or offer to supply goods or services, including promotional campaigns, offers or loyalty programmes which may be of interest to you, or for which you may qualify unless you have elected to opt-out.					
6.	. Should the Applicant at any time, after approval by the Landlord of an Application, wish to amend an Application in any manner and for any reason what so ever, the Applicant will be charged an additional Lease Fee (over and above the standard Lease Fee) of R530.00 (Five Hundred and Thirty Rand) inclusive of VAT.					
Signature of Applicant 1:			Date:			
Ciar	pature of Applicant 2:			Data		
Signature of Applicant 2:				Date		

OFFICE USE (Manual Checks)

Applicant 1:	Applicant 2:
Employment confirmed: Confirmed To be confirmed	Employment confirmed: Confirmed To be confirmed
For review	For review
Contact person and position:	Contact person and position:
Contact number:	Contact number:
Notes:	Notes:
Next of kin confirmed: Yes No	Next of kin confirmed: Yes No No
Notes:	Notes:
Bank details verified: Confirmed To be confirmed	Bank details verified: Confirmed To be confirmed
For review	For review
Notes:	Notes:
Credit Check (Internal): Applicant Occupant	Credit Check (Internal): Applicant Occupant
Notes:	Notes:
Details confirmed by:	Details confirmed by: