

Insurance Referral Form

Referral Date:	9th Oct 2025
Property Details	
Insurance:	Landlord Legal Expenses & Rent Guarantee Insurance - MW
Policy Type:	renewal
Rental Property Address:	6, Corporis nulla dolor, Laborum iste exercit, Incidunt sed anim , Eum architecto volup
Post Code:	Eum architecto volup
No of bedrooms:	2
LHA Rate (Rent PCM in £):	456
Tenant Details	
Tenant(s) name:	Voluptatem dolore
Email Address:	kibiqomur@mailinator.com
Contact No:	59
Tenancy Term:	1 year
AST Start Date:	1st Nov 2025
Policy Start Date:	17th Oct 2025
Policy Holder Details	
Policy for:	I'm an Agent
Policy Holder Type:	Both
Company/Organization:	Qui laborum aut enim
Name:	Miss Aut aut id lorem co Mollitia sit cum ali
Landlord/Agent Primary Address:	

Postcode:	
Contact No:	7
Alternate Contact No:	9
Email Address:	revoga@mailinator.com
Council Details (From which the tenant is from)	
Council Name:	Est sed voluptas eu
Council officer Name:	Aliquip et cillum co
Council_officer_email:	peqi@mailinator.com
Referral Name:	Nostrum quod esse oc
Referral Email:	jylibozi@mailinator.com

Moneywise Investments Plc