

## Insurance Referral Form

<b>Referral Date:</b>	17th Dec 2025
<b>Property Details</b>	
<b>Insurance:</b>	Landlord Legal Expenses & Rent Guarantee Insurance
<b>Policy Type:</b>	renewal
<b>Rental Property Address:</b>	Totam ut quo rerum a, Ut velit laboriosam, Totam fuga Doloribu, Aute dolore modi ven, Earum et esse exped
<b>Post Code:</b>	Earum et esse exped
<b>No of bedrooms:</b>	4
<b>LHA Rate (Rent PCM in £):</b>	500
<b>Tenant Details</b>	
<b>Tenant(s) name:</b>	Beatae recusandae L
<b>Email Address:</b>	wacidybodu@mailinator.com
<b>Contact No:</b>	18
<b>Tenancy Term:</b>	1 year
<b>AST Start Date:</b>	29th Dec 2025
<b>Policy Start Date:</b>	19th Dec 2025
<b>Policy Holder Details</b>	
<b>Policy for:</b>	I'm an Landlord
<b>Policy Holder Type:</b>	Both
<b>Company/Organization:</b>	Est reiciendis disti
<b>Name:</b>	Dr Voluptatem sit cillu Voluptatem laboriosa
<b>Landlord/Agent Primary Address:</b>	Suscipit aute ullamc, Nostrud aliquid dolo, Atque et ea eos id n

<b>Contact No:</b>	69
<b>Alternate Contact No:</b>	4
<b>Email Address:</b>	fogegizuri@mailinator.com
<b>Council Details (From which the tenant is from)</b>	
<b>Council Name:</b>	Voluptatem voluptas
<b>Council officer Name:</b>	Ex labore eaque null
<b>Council_officer_email:</b>	kojo@mailinator.com
<b>Referral Name:</b>	Labore ut sit volup
<b>Referral Email:</b>	xevu@mailinator.com
<b>Billing Details</b>	
<b>Billing Name:</b>	Ipsam voluptas neque
<b>Billing Address:</b>	Tempor ipsum veritat, Voluptas ut velit in, 578758, 578758
<b>Billing Email:</b>	peputi@mailinator.com
<b>Billing Contact:</b>	76

Moneywise Investments Plc