

*Physical Address:* -c/o Dalena Properties CC, Fenwick House, 26 Main Road, Gonubie, 5257

*Postal Address:* -P O BOX 288, GONUBIE, 5256

Tel. 043-740 4786 (work) Cell. 072 170 8713 (Lynn) Cell. 083 741 8997 (Mari)

E Mail. [maintenance@dalena.co.za](mailto:maintenance@dalena.co.za) or [rentaldp@dalena.co.za](mailto:rentaldp@dalena.co.za) Website: [www.dalena.co.za](http://www.dalena.co.za)

**RENTAL APPLICATION FORM FOR RESIDENTIAL PREMISES – NATURAL APPLICATION (INDIVIDUAL AND NOT ENTITY)**

**DETAILS OF FIRST PERSON APPLYING TO RENT THE PREMISES**

Full Name & Surname			
Identity / Passport No.			(certified copy to be attached)
Date of Birth			
Nationality			
Marital Status			
If Married: In Community of Property		ANC	Accrual System
Telephone (Home)	(Work)		(Fax)
(Mobile)	Email address/es		
Physical Address			
Postal Address			

Are you the Owner of the property where you currently stay? **Yes** **No**

If No, please give us the following information:

- Rental Paid
- Rental Property address
- How long have you rented there
- Name of Rental Agent / Landlord
- Contact number


**BANKING DETAILS FOR DEPOSIT REFUND & EMPLOYMENT PURPOSES**

Bank	
Branch & Code	
Account number	
Type of Account	

**EMPLOYMENT DETAILS**

Self-employed: YES / NO	
Occupation	
Current Employer	
Employer's address	
Period of employment	

**AFFORDABILITY DETAILS**

Gross monthly salary (before deductions & tax)	(certified copy of payslip attached)
Salary payment date	
Current monthly expenses	

Initial
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RENTAL APPLICATION FORM FOR RESIDENTIAL PREMISES

**DETAILS OF SECOND PERSON APPLYING TO RENT THE PREMISES**

Full Name & Surname					
Identity / Passport No				(certified copy to be attached)	
Date of Birth					
Nationality					
Marital Status					
If Married: In Community of Property		ANC		Accrual System	
Telephone (Home)		(Work)		(Fax)	
(Mobile)		Email address/es			
Physical Address					
Postal Address					

Are you the Owner of the property where you currently stay? **Yes** **No**

If No, please give us the following information:

• Rental Paid	
• Rental Property Address	
• How long have you rented there	
• Name of Rental Agent / Landlord	
• Contact number	

**BANKING DETAILS**

Bank	
Branch & Code	
Account number	
Type of Account	

**EMPLOYMENT DETAILS FOR DEPOSIT REFUND & EMPLOYMENT PURPOSES**

Self-employed: YES / NO	
Occupation	
Current Employer	
Employer's address	
Period of employment	

**AFFORDABILITY DETAILS**

Gross monthly salary (before deductions & tax)	(certified copy of payslip attached)
Salary payment date	
Current monthly expenses	

Initial

# RENTAL APPLICATION FORM FOR RESIDENTIAL PREMISES

## GENERAL DETAILS

Who will be staying at the Premises for the whole period of the Lease?

<b>Number of adults</b>					
Full names, surname & ID of Adult 1					
Full names, surname & ID of Adult 2					
Full names, surname & ID of Adult 3					
<b>Number of children</b>					
Children's ages (Date of Births)	1	2	3	4	
Full name & Surname of child 1 – as above					
Full name & Surname of child 2 – as above					
Full name & Surname of child 3 – as above					
Full name & Surname of child 3 – as above					
Names of Schools attended by children					
Number Pets owned		Type:			
Indoors / outdoors		Breed:			
Smoking? Indoors/Outdoors					

Number of vehicles at Premises

1. Type		Registration	
2. Type		Registration	
3. Type		Registration	

Have you (or both of you) ever had any judgments / defaults granted against you?	Yes	No
If Yes, please give details		

I / we declare that the information we have given in this application form is true and correct to the best of my/our knowledge and that I/we have not failed to provide any information which, if the Landlord had known such information, would have not allowed the application to be successful.

Upon acceptance by the Landlord and the presenting of an Agreement of Lease, I/we agree to pay the following:

Rental Damage Deposit	R	
BCMM Service Deposit	R 4 889-00	
Lease Administration Fee	R 450-00	
Credit Check	R 200-00	
Pro-rata rent	R	
1st Month rent	R	
Total	R	

Initial

**RENTAL APPLICATION FORM FOR RESIDENTIAL PREMISES**

**SUPPORTING DOCUMENTS TO BE ATTACHED WITH THIS APPLICATION**

**First Person**

**Second Person**

Certified RSA ID Document / Passport	Certified RSA ID Document / Passport
Certified Proof of current address	Certified Proof of current address
3 x Certified Pay slips	3 x Certified Pay slips
Change of employment: Provide signed Employment Contract	Change of employment: Provide signed Employment Contract
Certified 3 Month's Original or Bank-Stamped bank statements	Certified 3 Month's Original or Bank-Stamped bank statements
Certified SARS Tax Number Verification	Certified SARS Tax Number Verification
Transunion Report – Credit Report ( <a href="http://www.mytransunion.co.za">www.mytransunion.co.za</a> ) For assistance call 0861 482 482.	Transunion Report – Credit Report ( <a href="http://www.mytransunion.co.za">www.mytransunion.co.za</a> ) For assistance call 0861 482 482.
If married Out of Community of Property please provide Ante Nuptial Contract	If married Out of Community of Property please provide Ante Nuptial Contract

I/We agree and allow the Landlord or Agent at all times to:

1. contact, request and obtain information from any credit provider (or potential credit provider) or registered credit bureau that may be necessary to assess my/our behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness;
2. furnish information concerning the behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness of me/us to any registered credit bureau or to any credit provider (or potential credit provider) seeking a trade reference regarding my/our dealings with the Landlord.

Signed by the Applicant at \_\_\_\_\_ on this the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

**FIRST APPLICANT SIGNATURE**

Signed by the Second Applicant at \_\_\_\_\_ on this the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

**SECOND APPLICANT SIGNATURE**

**(SIGNATURES REQUIRED OF BOTH HUSBAND & WIFE, OR PERSONS SHARING)**

Initial