

CK No. 95/44903/23 VAT No. 4150153270

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. 083 741 8997 (Mari)

E Mail. rentalapplications@dalena.co.za Website: www.dalena.co.za

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

DETAILS OF FIRST PE	RSON APPLYING TO RE	ENT THE PREM	MISES					
Full Name & Surname								
Identity / Passport No.							(Ce	ertified copy to be attached)
Date of Birth								
Nationality								
Marital Status				_				
If Married: In Communit	ty of Property		ANC			Accrua	al System	
Telephone (Home)		(Work)				(Fax)		
(Mobile)		Email add	lress/es					
Physical Address								
Postal Address								
Are you the Owner of t	the property where you o	currently stay?	•		Yes		No	
If No, please give us the	e following information:							
Rental PaidRental Proper	rty address							
How long have	e you rented there							
Name of Rent	tal Agent / Landlord							
Contact numb	per							
Bank	OR DEPOSIT REFUND &	EMPLOYMEN	T PURPOSE	s				
Branch & Code								
Account number								
Type of Account								
EMPLOYMENT DETAIL		I						
Self-employed: YES / No	0							
Occupation								
Current Employer								
Employer's address								
Period of employment								
AFFORDABILITY DETA	AILS	ı						
Gross monthly salary (be	efore deductions & tax)					(certified cop	y of payslip attached)
Salary payment date								
Current monthly expens	es							

RENTAL APPLICATION FORM FOR RESIDENTIAL PREMISES

AN (Work) Email address/es y stay?			al System No	
(Work) Email address/es		(Fax)		
(Work) Email address/es		(Fax)		
(Work) Email address/es		(Fax)		
(Work) Email address/es		(Fax)		
Email address/es			No	
		es	No	
y stay?	Y	es	No	
y stay?	Y	es	No	
y stay:	·		No	
IPLOYMENT PU	RPOSES			
		, ,		P 44 1 N
		(cert	iffied copy of pays	iip attached)
1	PLOYMENT PUI	PLOYMENT PURPOSES		PLOYMENT PURPOSES (certified copy of pays

Initial

RENTAL APPLICATION FORM FOR RESIDENTIAL PREMISES

GENERAL DETAILS

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

, 0							
Number of adults							
Full names, surname & ID of Adult 1							
Full names, surname & ID of Adult 2							
Full names, surname & ID of Adult 3							
Number of children							
Children's ages (Date of Births)	1		2	3		4	
Full name & Surname of child 1	l – as a	bove					
Full name & Surname of child 2	2 – as a	bove					
Full name & Surname of child 3	3 – as a	bove					
Full name & Surname of child 3	3 – as al	bove					
Names of Schools attended by	childrer	า					
Number Pets owned			Туре:				
Indoors / outdoors			Breed:				
Smoking? Indoors/Outdoors							
Number of vehicles at Premises	S						
4 T				D:	-44!		

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

SUPPORTING DOCUMENTS TO BE ATTACHED WITH THIS APPLICATION

First Person		Second Perso	n		
riist reisoli		Second Ferso	··		
Certified RSA ID Document / Passport		Certified RSA I	D Document / Passport		
Certified Proof of current address		Certified Proof	of current address		
3 x Certified Pay slips	,	3 x Certified Pa	y slips		
Change of employment: Provide signed Employment Contract		Change of emp Provide signed	loyment: Employment Contract		
Certified 3 Month's Original or Bank- Stamped bank statements		Certified 3 Mor Stamped bank	th's Original or Bank- statements		
Certified SARS Tax Number Verification		Certified SARS Verification	Tax Number		
Transunion Report – Credit Report (www.mytransunion.co.za) For assistance call 0861 482 482.		(www.mytransu	port – Credit Report Inion.co.za) call 0861 482 482.		
If married Out of Community of Property please provide Ante Nuptial Contract		If married Out or Property pleaso Contract	of Community of e provide Ante Nuptial		
contact, request and obtain information concerning the any registered credit bureau or to with the Landlord. I. contact, request and obtain information concerning the any registered credit bureau or to with the Landlord.	mation from any credit provider aviour, profile, payment patterns behaviour, profile, payment pa	s, indebtedness atterns, indebte	s, whereabouts, and cre edness, whereabouts, a	ditworthiness; nd creditworthiness of n	ne/us to
Signed by the Applicant at		on this the	day of	20	
Signed by the Applicant at FIRST APPLICANT SIGNITURE		on this the	day of	20	
		on this the	day of		

Initial