

## RENTAL APPLICATION FORM

UNIT/ERF No. & COMPLEX NAME	
OCCUPATION DATE	
RENTAL AMOUNT	
(CANDIDATE) PROPERTY PRACTITIONER	Riegardt Vorster   084 787 4131   rentals@lecosteestate.co.za
CONTRACT PERIOD	

### DETAILS OF FIRST PERSON APPLYING TO RENT THE PREMISES ("FIRST APPLICANT")

#### PERSONAL INFORMATION:

SURNAME		FULL NAMES	
IDENTITY NUMBER / PASSPORT NUMBER		NATIONALITY	
MARITAL STATUS			
IF MARRIED	<input type="checkbox"/> COMMUNITY OF PROPERTY	<input type="checkbox"/> ANC	<input type="checkbox"/> ACCRUAL SYSTEM
TELEPHONE NUMBER (WORK)		MOBILE NUMBER	
E-MAIL		MOTOR VEHICLE	YES NO
PHYSICAL ADDRESS			

#### NEXT OF KIN:

NAME		CONTACT NUMBER	
RELATIONSHIP			

#### DETAILS OF EMPLOYMENT:

EMPLOYERS NAME/COMPANY NAME			
EMPLOYER ADDRESS			
OCCUPATION		EMPLOYMENT START DATE	
TYPE	PERMANENT	CONTRACT	SELF-EMPLOYED
TELEPHONE NUMBER		E-MAIL	
GROSS MONTHLY SALARY		SALARY DATE	

#### BANK ACCOUNT DETAILS:

ACCOUNT NAME		NAME OF BANK	
BRANCH CODE		BRANCH NAME	
ACCOUNT NUMBER			
ACCOUNT TYPE	CHEQUE	SAVINGS	OTHER



# LE COSTE

PROPERTY RENTALS

**CURRENT LANDLORD/RESIDENTIAL INFORMATION & REFERENCE:**

ARE YOU THE OWNER OF THE PROPERTY WHERE YOU CURRENTLY RESIDE?		YES	NO
IF NO, PLEASE COMPLETE:			
RENTAL PAID		LEASE PERIOD	___/___/20___ TO ___/___/20___
PROPERTY PRACTITIONER / LANDLORD		CONTACT NUMBER	
REASON FOR TERMINATION			

**REQUIRED DOCUMENTATION** (\*CERTIFIED/STAMPED COPIES TO BE ATTACHED TO THIS APPLICATION FORM)

CERTIFIED ID DOCUMENT/PASSPORT	<input type="checkbox"/>	VERIFIED SARS TAX NUMBER	<input type="checkbox"/>
IF PASSPORT, WORK PERMIT/VISA	<input type="checkbox"/>	CERTIFIED PROOF OF ADDRESS	<input type="checkbox"/>
STAMPED BANK STATEMENTS*	<input type="checkbox"/>	CERTIFIED PAYSLEIPS*	<input type="checkbox"/>
* 3 X (THREE) MONTHS/OR IF SELF-EMPLOYED/COMMISSION EARNING & OVERTIME INCOME, PLEASE PROVIDE 6 X (SIX) MONTHS			
MARRIAGE CERTIFICATE (IF IN COMMUNITY OF PROPERTY)	<input type="checkbox"/>		

As part of the application and verification process, you are required to complete the applicable criminal background check at your nearest PostNet office. Please visit any PostNet branch, request the standard criminal background check service, and ensure that your full name and identification details are correctly captured. Once the check has been completed, kindly submit a copy of the results to our agency for our records and final processing of your application.



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## PROPERTY RENTALS

### DETAILS OF SECOND PERSON APPLYING TO RENT THE PREMISES ("SECOND APPLICANT")

#### PERSONAL INFORMATION:

SURNAME		FULL NAMES	
IDENTITY NUMBER / PASSPORT NUMBER		NATIONALITY	
MARITAL STATUS			
IF MARRIED	<input type="checkbox"/> COMMUNITY OF PROPERTY	<input type="checkbox"/> ANC	<input type="checkbox"/> ACCRUAL SYSTEM
TELEPHONE NUMBER (WORK)		MOBILE NUMBER	
E-MAIL		MOTOR VEHICLE	YES NO
PHYSICAL ADDRESS			

#### NEXT OF KIN:

NAME		CONTACT NUMBER	
RELATIONSHIP			

#### DETAILS OF EMPLOYMENT:

EMPLOYERS NAME/COMPANY NAME			
EMPLOYER ADDRESS			
OCCUPATION		EMPLOYMENT START DATE	
TYPE	<input type="checkbox"/> PERMANENT	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SELF-EMPLOYED
TELEPHONE NUMBER		E-MAIL	
GROSS MONTHLY SALARY		SALARY DATE	

#### BANK ACCOUNT DETAILS:

ACCOUNT NAME		NAME OF BANK	
BRANCH CODE		BRANCH NAME	
ACCOUNT NUMBER			
ACCOUNT TYPE	<input type="checkbox"/> CHEQUE	<input type="checkbox"/> SAVINGS	<input type="checkbox"/> OTHER

#### CURRENT LANDLORD/RESIDENTIAL INFORMATION & REFERENCE:

ARE YOU THE OWNER OF THE PROPERTY WHERE YOU CURRENTLY RESIDE?	YES	NO
IF NO, PLEASE COMPLETE:		
RENTAL PAID	LEASE PERIOD	___/___/20___ TO ___/___/20___
PROPERTY PRACTITIONER / LANDLORD	CONTACT NUMBER	
REASON FOR TERMINATION		

#### REQUIRED DOCUMENTATION (\*CERTIFIED/STAMPED COPIES TO BE ATTACHED TO THIS APPLICATION FORM)

CERTIFIED ID DOCUMENT/PASSPORT	<input type="checkbox"/>	VERIFIED SARS TAX NUMBER	<input type="checkbox"/>
IF PASSPORT, WORK PERMIT/VISA	<input type="checkbox"/>	CERTIFIED PROOF OF ADDRESS	<input type="checkbox"/>
STAMPED BANK STATEMENTS*	<input type="checkbox"/>	CERTIFIED PAYSIPS*	<input type="checkbox"/>
* 3 X (THREE) MONTHS/OR IF SELF-EMPLOYED/COMMISSION EARNING & OVERTIME INCOME, PLEASE PROVIDE 6 X (SIX) MONTHS			
MARRIAGE CERTIFICATE (IF IN COMMUNITY OF PROPERTY)	<input type="checkbox"/>		

#### ADDITIONAL DOCUMENTATION:

IF EITHER OF THE APPLICANTS HAVE ANY JUDGEMENTS/DEFAULTS GRANTED AGAINST THEM - PLEASE SUBMIT FORMAL PAYMENT ARRANGEMENTS/SETTLEMENT LETTERS WITH THIS APPLICATION FORM.

IF EITHER APPLICANT IS CURRENTLY UNDER DEBT REVIEW PROCEEDINGS - PLEASE SUBMIT LATEST REMITTANCE ADVICE FROM DEBT COUNCILLOR.



**MATTERHORN**  
PROPERTY SPECIALISTS

# LE COSTE

## PROPERTY RENTALS

**REGISTRY OF ALL OCCUPANTS TO THE PROPERTY (INCLUDING CHILDREN):**

NAME AND SURNAME	ID NUMBER (AGE OF CHILD)	CONTACT NUMBERS	RELATIONSHIP
<i>Note: If occupants are not declared, the Landlord will list them as unlawful occupants.</i>			
NUMBER OF PETS OWNED		TYPE OF PETS	

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/Property Practitioner had known such information, would have not allowed the application to be successful.

I/We agree and allow the Landlord/Property Practitioner at all times to 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;

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/Property Practitioner.

INQB8 PROPERTY RENTALS respects your privacy and your personal information, thus, we take all reasonable measures to protect your personal information to keep it confidential / shall take all reasonable measures to protect the personal information of Clients/the Lessor/the Lessee and for the purpose of this clause, "personal information" shall be defined as detailed in the Promotion of Access to Information Act 2 of 2000 ("PAIA") and the Protection of Personal Information Act 4 of 2013 ("POPI").

INQB8 PROPERTY RENTALS collects the above requested information so as to accurately complete the lease agreement.

The personal information hereby provided by the Client/the Lessor/the Lessee will be collected, disclosed, used, processed, and stored as is necessary to carry out lawful actions and functions for the conclusion of performance of the agreement entered into between (the Client/the Lessor/the Lessee) and INQB8 PROPERTY RENTALS and will only be done with your written consent where required, unless we are legally required to divulge same or are obligated to do so for performance of a public law.

By providing the above information, the Client/the Lessor/the Lessee hereby provides INQB8 PROPERTY RENTALS with his/her express written consent to use his/her personal information, to share certain information with an affiliate company, to analyse his/her personal information for purposes of drawing a profile/file records and to send various communications on to the Client/the Lessor/the Lessee as is necessary for the course of business.

By signing this agreement, the Client/the Lessor/the Lessee consents to the processing of his/her information by INQB8 PROPERTY RENTALS and agrees that the information was supplied voluntarily for the purpose of securing and finalising the lease/rental agreement.

<b>SIGNED AT (PLACE)</b>		<b>ON (DATE)</b>	
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\_\_\_\_\_  
**FULL NAME (APPLICANT)**

\_\_\_\_\_  
**SIGNATURE (APPLICANT)**

<b>SIGNED AT (PLACE)</b>		<b>ON (DATE)</b>	
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\_\_\_\_\_  
**FULL NAME (SECOND APPLICANT)**

\_\_\_\_\_  
**SIGNATURE (SECOND APPLICANT)**



**MATTERHORN**  
 PROPERTY SPECIALISTS