LANDLORD REGISTRATION FORM

To be completed by the landlord DATE: LANDLORD INFORMATION: (SIGNATURE REQUIRED ON MANAGEMENT AGREEMENT) Surname: First Name: Title: Address: **Email Address** Postcode: Tel Number: Home/Work: Mobile: Do you own the property detailed below? YES Are you a member of a tenancy deposit protection scheme? YES NO If yes provide registration details: Have you registered with the landlord registration scheme? YES NO If yes provide LL reg number: If non-resident landlord please provide Inland Revenue Reference number (this includes landlords resident in ROI) PROPERTY INFORMATION (IF YOU HAVE MORE THAN ONE PROPERTY, PLEASE COMPLETE ADDITIONAL PROPERTY FORM(S)) Address: Postcode: **Description/ Property Type** House Flat/apartment Room in shared house Other Is your property a HMO? YES (N.B if so please provide copy of HMO licence) Is it furnished: YES NO YES Can you provide furniture if tenant requires? (If yes please provide details on Pg 2) NO Can you remove furniture if tenant requires? YES NO What type of heating does the property have?: Gas Oil Solid Fuel Electric Storage heater

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To be completed by the landlord

3.0. Rental information				
Rent Required:	Weekly		Monthly	
Does the rent include rates?	YES NO			
If no complete the following:				
Approx rates £	per week			
If the tenant qualifies for a rates to the required rental charge	rebate this will be paid	directly to LPS oth	erwise the rate	charge shall be added
Will you accept pets e.g. cats/do	gs:			YES NO
4. 5. COMMENTS				
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6. LANDLORD BANK DETAILS	,			
Name of Bank:				
Address:				
Account Name:				
(Please note that rent can on	ly he naid into one o	or both named o	on proof of o	wnershin document)
Sort Code:		Number	,,, proor or or	, , , , , , , , , , , , , , , , , , ,
7. N.B. Re: Signature				
BY SIGNING THE MANAGEME HAVE PROVIDED ON THIS FO		ONFIRMS THAT	Γ ALL THE IN	FORMATION YOU