



LANDLORD INFORMATION & PROPERTY DETAILS

John Shepherd Lettings Limited

Specialist in Residential Lettings and Property Management

Registered in England – 06841027

VAT Registration Number: 977 8931 41



1 of 2 pages / Landlord Initials

1. LANDLORDS FULL NAME(S)

If property is owned by more than one person, please state

First Name (s)

Surname

a

b

c

Name

Address

Postcode

Home Tel.

Office Tel.

Mobile/Fax

Email

Legal Power of Attorney Yes No

(is this person allowed to make decisions on your behalf?)

2. ADDRESS OF PROPERTY TO LET

Postcode

Tel No:

3. LANDLORDS FORWARDING ADDRESS

Postcode

Home Tel.

Office Tel.

Mobile Tel.

Fax No.

Email.

4. SERVICE

Full Management Service

Rent Collection Service

Letting Only Service

5. FIRM OF ACCOUNTANTS

Partners Name

Address

Postcode

Tel No.

6. NAME OF MORTGAGE LENDER

Address

Postcode

A/C Roll No.

7. UK CONTACT

Friend/relative who does not mind being contacted in an emergency.

8. FLATS

You must complete this section if you are a flat owner. If the property is Leasehold, you must obtain consent to underlet, prior to letting.

Freeholder Head Landlord

Managing Agent

Name

Address

Postcode

Tel No.

Fax No.

9. PAYMENT OF RENT

Rental payments are made by BACS (Banks Automated Clearing System)

Bank

Bank Address

Sort Code

Account No.

Account Name:

10. KEYS

Min 3 sets of keys required. Each set comprises

Yale Chubb

Mortise Other

Please label clearly

11. SERVICE CONTRACTS AND GUARANTEES

Appliance

Contract No.

Contact Tel No.

Expiry Date

Appliance

Contract No.

Contact Tel No.

Expiry Date

If you have a preferred contractor, please give details separately. Please note that in the case of an emergency, if your contractor is unable to attend, we will use our nominated contractor.

12. SUPPLIER, METER AND STOPCOCK LOCATION & INFORMATION

Electricity Supplier

Gas Supplier

Water Authority

Stopcock Location

Is this clearly marked?

Water Meter Location

Gas Meter Location

Gas Meter Point Ref No.
(found on your gas bill)

Electricity Meter Location

Electricity Supply No. S/ / / / / / /
(found on your bill)

13. PORTABLE APPLIANCES
(PAT Testing Type/Location)

Appliance 1

Appliance 2

Appliance 3

Appliance 4

Appliance 5

14. ELECTRICAL INSPECTION CERTIFICATES

Enclosed

John Shepherd to arrange

15. GAS SAFETY RECORD

Enclosed

John Shepherd to arrange

16. BOUNDARIES

Provide a sketch and indicate in red, boundary fences/ walls for which you are responsible.

Garage/Parking Space Number or Location:

17. GARDENS

Please note below any areas for which tenants will be responsible (e.g. open plan front gardens)

18. PAYMENTS

Direct debits should be arranged for any regular accounts (e.g. grounds maintenance etc.)

Managed Property Only:

If you are going overseas and would like John Shepherd Lettings to pay closing accounts (please tick appropriate box as required).

Gas Electricity Telephone

Water Council Tax

19. INSURANCE

Comprehensive Insurance is available to Landlords. If you require Buildings and/or Contents Insurance, please tick the box as required.

Buildings Contents

If you have made alternative arrangements, please enter details. You should advise your Insurers of the proposed letting.

BUILDINGS

Insurer

Address

Tel No.

Policy No.

Policyholders Name

Renewal Date

CONTENTS

Insurer

Address

Tel No.

Policy No.

Policyholders Name

Renewal Date

N.B. Insurance premiums should be paid by Direct Debit

20. OTHER DETAILS

Council Tax Band

Alarm Details

Mail Redirection Yes No

Arranged