

AGENT NAME	John Shepherd Lettings
AGENT NUMBER	TBC
NAME OF LANDLORD:	
Correspondence Address - Line 1	
Correspondence Address - Line 2	
Correspondence Address - Line 3	
Correspondence Address - Postcode	
Contact Telephone	
Contact Fax	
Contact Email	
Number of tenants to be insured (IF more than 5 please refer to Let Insurance Services)	
Type of Tenants (delete or circle where applicable)	Private/working, Student, DSS non referral, Asylum seeker
Risk address - Line 1	
Risk address - line 2	
Risk address - line 3	
Risk Address - post code	
Monthly rent payable (maximum £3,000 p.c.m.)	
Start date of tenancy	
Start date of cover (if different to start date of tenancy)	
Prior to the tenancy starting have/will references be undertaken on all tenants or their Guarantors (see conditions):	Yes/No
Will a deposit be taken before the start of the tenancy and held in accordance with statutory Tenancy deposit legislation?	Yes/No

**Cover required**

Legal Expenses Only	Yes/No
<b>**Note: If Rent Protection is required, please contact your Agent for a quotation**</b>	
Information supplied by (Name of agent/insured):	
Position (e.g. Agent or insured)	
Information supplied to (LIS contact):	
LIS reference:	
Date:	

**Note regarding conditions for obtaining satisfactory references**

A satisfactory reference must be received on all tenants or their Guarantors named on the tenancy agreement including:

- at least 2 recognisable forms of ID including a photograph attached to documents issued by a statutory body (e.g driving licence, passport)

- a credit check from a recognised referencing agency approved by Let Insurance Services

- A satisfactory written reference received with proof of income

**Please continue to complete form overleaf and return to agent/Let Insurance Services**

**DISCLOSURE STATEMENT**

**LEGAL EXPENSES ONLY:**

This insurance has been arranged on the following basis:

1. Neither you nor any joint proposer:
  - have ever been convicted, charged or received a police caution for any offence or have any prosecution pending (other than a motoring offence)
  - have had any insurance declined, cancelled, declared 'void' or had any terms or conditions imposed
  - have any County Court judgements made against you (or have any outstanding), been declared bankrupt, or been disqualified from being a company director
2. For the property to which the proposed insurance cover applies:
  - A signed tenancy agreement will be in place at the start of the tenancy
  - The tenancy will be an Assured Shorthold Tenancy, a company residential tenancy or common law tenancy where the rent exceeds £25,000 p.a. and be restricted to residential use of the property
  - A satisfactory reference has been received on all tenants or their Guarantors named on the tenancy agreement including: **A)** At least 2 recognisable forms of identification including a photograph attached to documents issued by a statutory body (e.g. driving licence, passport) and a utility bill, bank statement, birth certificate or letter from a UK Government body. **B)** A credit check from a recognised referencing agency approved by Let Insurance Services
  - The tenants will be aged 18 years or over
  - A satisfactory written reference received with proof of income
  - A minimum 1 months deposit will be taken at the start of the tenancy
  - The deposit will be held in accordance with the statutory Tenancy Deposit regulations
3. For any claims submitted the landlord or agent with responsibility for collecting the rent will:
  - Serve a written letter before action as soon as the rent is known to be 14 days in arrears
  - Maintain records of all written and verbal correspondence with the tenants
  - Submit claims direct to insurers within 45 days of the insured event

**If any of these statements are not correct please notify us immediately. The cover under your policy may be invalidated and could result in a claim being partly or fully declined**

I agree that this statement is correct

Signed:.....

Name:.....

Date:.....

**If any of these statements are not correct please notify us immediately. The cover under your policy may be invalidated and could result in a claim being partly or fully declined**

**Please return to Let Insurance Services. Any queries please contact us on Tel: 0844 478 0202 Fax: 0844 478 0204 or Email: enquiries@letinsurance.co.uk**