



THE ESTATE OFFICE, EGGLESTONE ABBEY, BARNARD CASTLE, COUNTY DURHAM DL12 9TN  
 TEL: 01833 690100 FAX: 01833 637004 e.mail: williamsalvin@whtsalvin.co.uk www.whtsalvin.co.uk



<b>Date Completed:</b>	
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## COMMERCIAL TENANCY APPLICATION FORM

**PROPERTY DETAILS (THE RENTAL PROPERTY):**

<b>Property Address:</b>			
	<b>Postcode:</b>		
<b>Rent (per annum):</b>			
<b>Commencement Date:</b>			
<b>Proposed Use:</b>			
<b>Length of Lease Required:</b>			

**MAIN CONTACT (APPLICANT) DETAILS:**

<b>Full Name:</b>		<b>Date of Birth:</b>	
<b>Position in Company:</b>		<b>NI Number:</b>	
		<b>Gender:</b>	Male/ Female

<b>Present Residential Address:</b>			
	<b>Post Code:</b>		

<b>Residential Premises Type:</b>	Owned <input type="checkbox"/>	Tenanted <input type="checkbox"/>	<b>Time at this address</b>	Years:..... Months:.....
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<b>Present Landlord/ Agent Name:</b>			
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<b>Landlord/ Agent Address:</b>			
	<b>Post Code:</b>		
	<b>Telephone:</b>		
	<b>Mobile:</b>		
	<b>Email:</b>		

<b>Previous Address: (if less than 3 years)</b>			
	<b>Post Code:</b>		<b>Time at this address</b>
			Years:..... Months:.....

**APPLICANTS IDENTITY INFORMATION (MONEY LAUNDERING REGULATIONS)**

<b>Copy Document Required: 1 from each row. (tick if attached)</b>	Council Tax <input type="checkbox"/>	Utility Bill <input type="checkbox"/>	Bank Statement <input type="checkbox"/>
	Passport <input type="checkbox"/>	Driving Licence <input type="checkbox"/>	



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**COMPANY DETAILS:**

<b>Company Name:</b>			
<b>Registered Office Address:</b>			
	<b>Post Code:</b>		
<b>Company Status:</b> (Indicate as appropriate)	Limited Company <input type="checkbox"/>	Partnership <input type="checkbox"/>	Sole Trader <input type="checkbox"/>
<b>Company Details:</b>	<b>Registration Number:</b>		
	<b>VAT Number?</b>		
	<b>No. of Directors?</b>		
	<b>No. of Employees?</b>		
<b>Company Contact Details:</b>	<b>Telephone:</b>		
	<b>Fax:</b>		
	<b>Email:</b>		
	<b>Website:</b>		
<b>Number of Years Trading?</b>			
<b>Nature of Existing or Proposed Business:</b>			
<b>Commercial Premises Type:</b>	Owned <input type="checkbox"/>	Tenanted <input type="checkbox"/>	<b>Time at this address:</b> Years:..... Months:.....
<b>Present Landlord/ Agent Name:</b>			
<b>Landlord/ Agent Address:</b>			
	<b>Post Code:</b>		
	<b>Telephone:</b>		
	<b>Mobile:</b>		
	<b>Email:</b>		
<b>Previous Address:</b> (if less than 3 years)			
	<b>Post Code:</b>		<b>Time at this address:</b> Years:..... Months:.....



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**REFERENCES:**

**APPLICANT ACCOUNTS REFERENCE:**

<b>Is the Company currently trading?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide three years accounting records. If three years accounts are not available or if the company is a new venture, then a business plan and/ or proof of sufficient funds to cover the rent payments will need to be provided. If the proposed tenant is a Limited Company and if the Company is a new Business or unable to demonstrate trading records for the last three years, then guarantees will be required from one or more Directors.	
<b>Has the Company or any Directors/ Partners had any Debt Problems?</b>	County Court Judgment <input type="checkbox"/> Criminal Conviction <input type="checkbox"/> Declared Bankrupt <input type="checkbox"/>
<b>Details:</b>	

**APPLICANT BANK OR BUILDING SOCIETY DETAILS:**

<b>Bank or Building Society Name:</b>			
<b>Branch Address:</b>			
	<b>Postcode:</b>		
<b>Account Details:</b>	<b>Sort Code:</b>		
	<b>Account Number:</b>		
	<b>Account Name:</b>		
	<b>Bank Manager/ Contact:</b>		

**TRADE/ BUSINESS REFERENCE**

<b>Reference Name:</b>			
<b>Trade/ Business Name:</b>			
<b>Address:</b>			
	<b>Postcode:</b>		
<b>Contact Details:</b>	<b>Telephone:</b>		
	<b>Mobile:</b>		
	<b>Email:</b>		
	<b>Website:</b>		



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**CHARACTER REFERENCE:**

<b>Referee Name:</b>		
<b>Occupation of Referee:</b>		
<b>Address:</b>		
<b>Contact Details:</b>	<b>Postcode:</b>	
	<b>Telephone:</b>	
	<b>Mobile:</b>	
	<b>Email:</b>	

**Declaration & Authorisation - PLEASE NOTE:**

I/We apply for a tenancy as per this application. I/We confirm that the information provided is true and accurate and I/We authorise WHT Salvin to seek additional information and carry out ID/ Money Laundering checks, credit checks and referencing by contacting agencies, organisations and individuals as necessary in accordance with The Data Protection Act (1988). I/We confirm that any concerns have been raised with WHT Salvin and I/We understand that tenancies obtained with false information can be terminated.

Please send or email this form to:

WHT Salvin  
 The Estate Office  
 Egglestone Abbey  
 Abbey Lane  
 Barnard Castle  
 Co. Durham  
 DL12 9TN

Tel: 01833 690100  
 Fax: 01833 637004  
 Email: [admin@whtsalvin.co.uk](mailto:admin@whtsalvin.co.uk)

Signed – Main Contact: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Position in Company: \_\_\_\_\_