BROADLANDS

Tenant's Enquiry Form

NAME: _____

CURRENT ADDRESS: _____

_____

_____

POST CODE: _____

LANDLINE: _____

MOBILE: _____

WORK: _____

EMAIL: _____

DATE OF PROPERTY REQUIRED: _____

NO. OF BEDROOMS REQUIRED: _____

PROPERTY TYPE: (PLEASE CIRCLE THE APPROPIATE)

DETATCHED SEMI-DETATCHED TERRACED CLUSTER HOUSE BUNGALOW COTTAGE

FLAT/ APARTMENT/ MAISONETTE BEDSIT/ ROOM ONLY

FURNISHED UNFURNISHED

PREFERABLE AREAS: _____

_____

PREFERRED TERM: (MIN 6 MONTHS) _____

MAX PAYABLE: £ _____ PCM

SMOKER? YES NO

PETS? YES NO

OTHER REQUIREMENTS/NOTES: _____

_____