

HATFIELD
& SURROUNDING AREAS
(Flats & Townhouses)

ARLON

EIENDOMME / PROPERTIES

Member of Institute of Estate Agents & Estate Agency Board of South Africa
(PTY) LTD Reg. No. 9906139/07

COMMITMENT
TO
Excellence
SINCE 1991

SALES / RENTALS / DEVELOPMENTS
7 ARLON PLACE
1229 SOUTH STREET
HATFIELD
PRETORIA
SOUTH AFRICA

P.O.BOX 13686
HATFIELD
0028

TEL: 012 362 5499
FAX: 012 362 3907
C/Fax: 086 663 5499
E-Mail: arlon@icon.co.za
Website: www.arlon.co.za

Dear **Mr/Mrs**

Thank you for using ARLON PROPERTIES as your rental agent.

Attached please find the application form for the abovementioned property.

The fully completed application form must be returned to us with all the requested supporting documentation as well as proof of payment of the application fee of **R250.00** (where only one party is applying) **or R390.00** (where two parties who are married in community of property are jointly applying).

Please note that we work on a first come first served basis. The first fully completed application form supported by all the required documents and proof of payment of the application fee, will be processed. If approved, we will proceed with a rental agreement. **Incomplete applications will not be processed and will not secure an apartment. Payments of deposit and admin fee will not secure an apartment and may only be done after an application has been approved.** An apartment is only secured once the rental agreement has been signed and the deposit has been paid.

FICA documents as requested are required by law and Arlon Properties will not process an application without the required documentation as specified in our application form.

To avoid disappointment please return your application form as a matter of urgency.



APPLICATION DOCUMENTATION AND QUALIFYING CRITERIA

The following is applicable to all new applicants:

1. The lease agreement is between Arlon Properties and natural persons only.
2. The monthly lease amount may not exceed 20% of an applicant's monthly net income.
3. The lease agreement is between Arlon Properties and one Lessee only. If married in community of property the lease agreement will be between two Lessees – the applicant and the spouse. Both parties are required to provide details on the application form.
4. Clear credit record (no judgements or adverse).
5. Good references from previous lessor/landlord, where applicable.
6. Deposit and cost requirements must be met.
7. Applicant to be permanently employed with a good track record.
8. **MONTHLY RENTAL PAYMENTS ARE BY DEBIT ORDER.**
9. Please e-mail application fee together with all application documentation to:
rentals@arlon.co.za / prop@arlon.co.za

PLEASE NOTE THAT WE DO NOT RESERVE PROPERTIES. THE FIRST APPLICANT WHO QUALIFIES, SIGNS A LEASE AGREEMENT AND FULFILLS ALL CONTRACTUAL FINANCIAL OBLIGATIONS WILL BECOME THE NEW LESSEE OF THE PROPERTY.

We thank you for your support.

Anita Ackerman / Linda Van Dyk

Banking details for a direct deposit of the application fee:

Account Name Arlon Properties
 Bank Name ABSA
 Branch Code 632 005
 Account Number 407 950 6728
 Reference: Your Surname

AN APPLICATION FEE OF R 250.00 IS PAYABLE PRIOR TO THE PROCESSING OF THIS APPLICATION. IF THE APPLICANTS ARE MARRIED IN COMMUNITY OF PROPERTY A FEE OF R 390.00 IS PAYABLE.

PLEASE BE ADVISED THAT ARLON PROPERTIES WILL NOT PROCESS THE APPLICATION UNTIL SUCH TIME THAT THE APPLICATION FEE/S HAS BEEN RECEIVED.

PLEASE DO NOT PAY THE DEPOSIT AND ADMIN FEES UNTIL SUCH TIME THAT ARLON PROPERTIES HAS DRAWN UP THE RENTAL AGREEMENT (AFTER THE APPLICATION HAS BEEN QUALIFIED AND APPROVED).

9. DOCUMENTATION REQUIRED FOR QUALIFICATION OF AN APPLICANT:

9.1 Fully completed application form accompanied by all supporting documentation.

9.2 Latest salary advice (if self-employed auditor's letter confirming monthly income, latest financial statements or IT3). Bank statements will not suffice.

FICA (FINANCIAL INTELLIGENCE CENTRE ACT) DOCUMENTATION REQUIRED:

9.3 Fully completed FICA Form (pages 11 and 12). **Where an applicant is married in community of property (COP) both the applicant and the spouse must complete and sign the FICA form. At point 6 page 12 you must confirm what funds will be used to pay the monthly rent eg. salary, savings, investment, monthly income, etc.**

9.4 Copy of South African ID or copy of passport if non South African citizen. If married in community of property both parties are to supply a copy.

9.5 Proof of residential address (not older than 3 months). Can be utility bill or any other document reflecting applicant's name and residential address. If married COP and spouse does not have proof of residential address, then the applicant must please complete the confirmation of residential address on page 12.

9.6 Proof of income tax reference number (any SARS document reflecting your personal income tax number). If married in COP and spouse is employed, then we require proof of SARS income tax reference number as well.

9.7 If married by ANC (Antenuptial contract) applicant to supply proof of marital status – e.g. copy of marriage certificate (if marital status is indicated) or copy of front page of ANC. If divorced we require only the front page of your divorce order.

9.8 Proof of payment of the application fee/s.

PAYMENTS DUE: SOUTH AFRICAN RESIDENT

Monthly Lease Amount		Payable prior to arranging for a moving-in inspection.
Deposit – refundable (1 month's rent + 20%)		Payable when lease agreement is signed.
Once off Arlon administration fee	R 1 790.00	Payable when lease agreement is signed.
TOTAL		

PAYMENTS DUE: NON SOUTH AFRICAN RESIDENT

Monthly Lease Amount		Payable prior to arranging for a moving-in inspection.
Deposit – refundable (2 x Month's Rent)		Payable when lease agreement is signed.
Once off Arlon administration fee	R 1 790.00	Payable when lease agreement is signed.
TOTAL		

VERY IMPORTANT – PLEASE NOTE THAT IF A LEASE AGREEMENT IS CANCELLED BEFORE THE TERMINATION DATE, A CANCELLATION FEE OF R1890 WILL BE DEDUCTED FROM YOUR DEPOSIT AS WELL AS A MOVING-OUT INSPECTION FEE OF R490.00

APPLICATION FORM

COMPLEX NAME		BEDROOMS		REF NO	
UNIT NUMBER		BATHROOMS		DATE	
RENTAL AMOUNT		RENTAL PERIOD			

PERSONAL DETAILS: LESSEE/APPLICANT

Surname					
Full Names (Mr)					
Full Names (Mrs)					
I.D / Passport Number	(Mr)	(Mrs)			
Date of Birth	(Mr)	(Mrs)			
Marital Status	SINGLE		WIDOWED	DIVORCE	
	MARRIED COP		MARRIED	A.N.C.	
Nationality	(Mr)	(Mrs)			
Home Tel No					
Work Tel No	(Mr)	(Mrs)			
Fax No	(Mr)	(Mrs)			
Cell Phone No	(Mr)	(Mrs)			
E-mail Address	(Mr)				
E-mail Address	(Mrs)				
Residential Address					
Postal Address & Postal Code					
Name of Bank (for deposit refund): <i>Must be South African bank account. No deposit refund will be paid into foreign bank accounts.</i>					
Name of Bank Account Holder					
Bank Account Number					
Bank Branch Name & Branch Code					
No. of Persons to occupy unit					
Present Landlord or Agent (if currently renting)					
Landlord or Agent Tel No					
Current Address of Rental Property					
Monthly Rental Amount					
Reason for Vacating Rental Property					

EMPLOYMENT (MAIN APPLICANT)

Employer			
Occupation		Basic Monthly Salary	R
Period of Employment		HR Tel No	

EMPLOYMENT (SPOUSE)

Employer			
Occupation		Basic Monthly Salary	R
Period of Employment	R	HR Tel No	

REFERENCES (RELATIVES)

1. Relative Full Name (Mother/Father)			
Address			
Contact Numbers	(H)	(W)	(C)
2. Full Name of Next of Kin			
Address			
Contact Numbers	(H)	(W)	(C)

GENERAL INFORMATION:

Please specify the names, ID numbers and contact numbers of the person/s who will be occupying the property being applied for. **Please be advised that only one (1) person may occupy a bachelor/1 bedroom apartment, only two (2) persons may occupy a 2 bedroom apartment and only three (3) persons may occupy a 3 bedroom apartment**

Name	
I.D. Number	
Cell Number	
E-Mail Address	
Name	
I.D. Number	
Cell Number	
E-Mail Address	
Name	
I.D. Number	
Cell Number	
E-Mail Address	

	APPLICANT	SPOUSE		APPLICANT	SPOUSE
Basic Salary	R	R	Bond/Rent	R	R
Commission	R	R	Car payment	R	R
Overtime	R	R	Pers Loans	R	R
Subsidies	R	R	Credit Cards	R	R
Any other income	R	R	Water & Elec	R	R
GROSS INCOME	R	R	Rates & Taxes	R	R
DEDUCTIONS			Life Insurance	R	R
PAYE / Tax			Short term ins	R	R
Pension			Petrol	R	R
UIF			Telephone / Cell phone	R	R
Medical Aid			MNet / DSTV	R	R
Any other deductions			Retail Acc	R	R
NETT INCOME	R	R	School Fees	R	R
Total of combined nett income (if married in COP)	R		Alimony	R	R
1.	MONTHLY ALIMONY MAY NOT BE INCLUDED AS INCOME.		Domestic Worker	R	R
2.	PLEASE PROVIDE BANK STATEMENTS FOR THE LAST 6 MONTHS IF MONTHLY INCOME IS ON A COMMISSION BASIS.		Garden Services	R	R
			Clothing	R	R
			Entertainment	R	R
			Groceries	R	R
			Total Expenses	R	R
			Total Expenses combined (if married in COP)	R	

ASSETS & LIABILITIES

ASSETS		
PROPERTY STREET ADDRESS	ERF NO & SUBURB	MARKET VALUE
1)		R
2)		R
MOTOR VEHICLES: MAKE & MODEL	REGISTRATION NUMBER	VALUE
1)		R
2)		R
FURNITURE & HOUSEHOLD APPLIANCES		VALUE
POLICIES:		R
ANY OTHER ASSETS:		R
TOTAL ASSETS		R
LIABILITIES		
PROPERTY STREET ADDRESS	ERF NO & SUBURB	OUTSTANDING BOND
1)		R
2)		R
3)		R
MOTOR VEHICLES: MAKE & MODEL	REGISTRATION NUMBER	OUTSTANDING
1)		R
2)		R
3)		R
FURNITURE & HOUSEHOLD APPLIANCES		R
ANY OTHER OUTSTANDING DEBT		R
TOTAL LIABILITIES		R

CREDIT INFORMATION

The Lessee/s consents to and authorises the Lessor to:

Contact, request and obtain information at any time and from any credit provider (or potential credit provider) or registered credit bureau in order to assess the behavior, profile, payment patterns, indebtedness, whereabouts and creditworthiness of the Lessee/s and:

Provide information about the behavior, profile, payment patterns, indebtedness, whereabouts and creditworthiness of the Lessee to any registered credit bureau or to any credit provider (or potential credit provider) seeking a trade reference regarding the Lessee’s dealings with the Lessor).

I/We certify that to the best of my/our knowledge, all statements are true and correct. **I/We are aware that an incomplete application causes a delay in processing and may result in denial of tenancy.** I/We further understand that false, fraudulent or misleading information may also be grounds for denial of tenancy and/or forfeiture of my lease agreement.

I/We understand that that I/we may revoke this authorization & consent, in writing, at any time except for the information already released as a result of this authorization. I/we further understand that unless revoked this authorization in writing, it will remain in force and effect.

I/We understand that all documents and personal information provided to Arlon Properties will remain confidential.

The Owner/Agent and Applicant are each advised to seek independent legal advice on matters arising from use of this form.

THE APPLICANT/S ACKNOWLEDGES THAT THE PROPERTY BEING APPLIED FOR HAS BEEN VIEWED AND IS SATISFIED THAT THE PROPERTY IS FIT FOR THE PURPOSE FOR WHICH THE APPLICANT/S INTENDS LEASING THE PROPERTY AND THAT THE PROPERTY IS IN A GOOD STATE OF REPAIR AND CONDITION. THE APPLICANT FURTHERMORE ACKNOWLEDGES THAT THE PARKING ALLOCATED TO THE UNIT (WHERE APPLICABLE) HAS BEEN VIEWED AND IS TO THE SATISFACTION OF THE APPLICANT.

THUS DONE AND SIGNED AT _____ ON THE _____ DAY OF _____ 20_____

SIGNATURE OF LESSEE/APPLICANT

LESSEE FULL NAMES & SURNAME

SIGNATURE OF LESSEE/SPOUSE

SPOUSE FULL NAMES & SURNAME



**HATFIELD
& SURROUNDING AREAS
(Flats & Townhouses)**



COMMITMENT
TO
Excellence
SINCE 1991

Member of Institute of Estate Agents & Estate Agency Board of South Africa
(PTY) LTD Reg. No. 9906139/07

SALES / RENTALS / DEVELOPMENTS
7 ARLON PLACE
1229 SOUTH STREET
HATFIELD
PRETORIA
SOUTH AFRICA

P.O. BOX 13686
HATFIELD
0028

TEL: 012 362 5499
FAX: 012 362 3907/ 086 663 5499
E-Mail: arlon@icon.co.za
Website: www.arlon.co.za

Director: A Kelbrick

Dear Client,

As you may be aware of, the Government introduced the Financial Intelligence Act, whose primary aim is to combat money laundering, with effect from 30th June 2003.

Money laundering is a criminal offence throughout the world. Criminals usually obtain cash as a result of a crime, and then find that they are unable to use it in that form. They have to "legalize" the cash and this is usually done by introducing these illegally obtained funds into the economy in a variety of forms.

Government has selected certain industries, including all estate agencies, attorneys, banks, the insurance industry etc., as accountable institutions, to assist in preventing money laundering. In terms of the Financial Intelligence Centre Act (FICA) 38 of 2001, Arlon Properties has appointed one of its staff members as a compliance officer in order to oversee compliance with the obligations imposed on us by this Act.

This means that by law, we are obliged to request that you provide us with certain of your personal details as per the attached form and secondly that we then have to verify this information as soon as possible. This will take place prior to a lease agreement being entered into between a lessor and a lessee. This has to be done in order to avoid the possibility of prosecution and/or the imposition of severe fines (up to R10 million).

We would very much appreciate your co-operation in this regard and trust that you will assist the country in eliminating the scourge of money laundering and related criminal activities. ***We therefore urge you to provide us with all the relevant documentation for FICA purposes.***

Best regards

ANITA ACKERMAN
Rental Manager
Arlon Properties
rentals@arlon.co.za

LINDA VAN DYK
Rental Manager
Arlon Properties
prop@arlon.co.za

**HATFIELD
& SURROUNDING AREAS
(Flats & Townhouses)**



EIENDOMME / PROPERTIES

Member of Institute of Estate Agents & Estate Agency Board of South Africa
(PTY) LTD Reg. No. 9906139/07

COMMITMENT
TO
Excellence
SINCE 1991

SALES / RENTALS / DEVELOPMENTS
7 ARLON PLACE
1229 SOUTH STREET
HATFIELD
PRETORIA
SOUTH AFRICA

P.O.BOX 13686
HATFIELD
0028

TEL: 012 362 5499
FAX: 012 362 3907/ 086 663 5499
E-Mail: arlon@icon.co.za
Website: www.arlon.co.za

Director: A Kelbrick

FICA INFORMATION/VERIFICATION FOR NATURAL PERSONS

PROPERTY

NO	REQUIRED INFORMATION	PARTICULARS	VERIFICATION																
1.1	Full Names & Surname																		
1.2	Date of Birth																		
1.3	Identity / Passport Number		<i>Copy of ID / Passport</i>																
1.4	Residential Address		<i>Any document not older than 3 months reflecting street (physical) address</i>																
1.5	Postal Address																		
1.6	Contact Numbers: (Tel/Cell/Fax No)																		
1.7	E-Mail Address																		
1.8	SARS Income Tax Reference Number		<i>Proof of SARS income tax reference number</i>																
1.9	Married In or Out of Community of Property		<i>Copy of Marriage Certificate if married ANC</i>																
1.10	Source of Income for Financing this Transaction (please tick)	<table border="1"> <tr> <td>Salary</td> <td><input type="checkbox"/></td> <td>Savings</td> <td><input type="checkbox"/></td> <td>Investment</td> <td><input type="checkbox"/></td> <td>Bond</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other (please indicate)</td> <td colspan="7"></td> </tr> </table>	Salary	<input type="checkbox"/>	Savings	<input type="checkbox"/>	Investment	<input type="checkbox"/>	Bond	<input type="checkbox"/>	Other (please indicate)								
Salary	<input type="checkbox"/>	Savings	<input type="checkbox"/>	Investment	<input type="checkbox"/>	Bond	<input type="checkbox"/>												
Other (please indicate)																			
IF MARRIED COP SPOUSE TO COMPLETE 2.1 – 2.7																			
2.1	Full Names & Surname																		
2.2	Date of Birth (Spouse)																		
2.3	Identity / Passport Number (Spouse)		<i>Copy of ID / Passport</i>																
2.4	Residential Address		<i>Any document not older than 3 months reflecting street (physical) address</i>																
	Postal Address																		
2.5	Contact Numbers: (Tel/Cell/Fax No)																		
2.6	E-Mail Address																		
2.7	SARS Income Tax Reference Number		<i>Proof of SARS income tax reference number</i>																

Please fill in each point

I/We, the undersigned _____

DO HEREBY DECLARE:

1. THAT my/our name(s) and Identity Number(s) is/are correct as reflected above;
2. THAT my/our residential address is as follows:

3. THAT my/our postal address is as follows:

4. THAT my/our income **tax registration number(s)** is/are as follows:
5. **(PLEASE PROVIDE US WITH PROOF OF YOUR INCOME TAX NO (ANY SARS DOCUMENT WITH YOUR NAME & NUMBER ON))**

6. THAT the **source of income/funds used**/will be used to finance this transaction is/are as follows: (eg. Bond, savings, monthly income, investment, etc)

7. THAT my/our **future residential** address will be _____
effective as from: _____ 20 ____ (contractholder)

CONTACT DETAILS

	CONTRACT HOLDER	SPOUSE
Name of Employer		
Tel No (Home)		
Tel No (Work)		
Cell Phone Number		
E-mail Address		

LESSOR / LESSEE_____
DATE**Office use only**

Name and Signature of person that obtained the information					
Type of transaction (Rental/Sale)	RENTAL				
Date Form completed					
Verification documents on file?	Yes / No				
H		M		L	

ANITA ACKERMAN (COMPLIANCE OFFICER)_____
MARINA KELBRICK (KEY INDIVIDUAL)



CONFIRMATION OF RESIDENTIAL ADDRESS FOR CO-HABITANT

(To be completed if co-habitant does not have proof of residential address)

Residential address verification (as per proof of residential address provided)

I (full name and surname) _____

Date of birth _____ Identity Number _____

hereby confirm that I reside at the property located at (residential address)

I further confirm that my co-habitant (indicate relationship e.g. spouse, friend, child etc)

Full names and surname of co-habitant

ID Number of co-habitant _____

resides at the abovementioned property.

Signature _____ Date _____