



<u>Walmer Link</u> 14 Lungelo Mlandu Str Walmer Tel: 041 517 2813 Email: wlink@imizi.co.za	<u>Fairview Link</u> Restitution Avenue Fairview Tel: 041 517 3066 Email: fairview@imizi.co.za	<u>Willowdene</u> Cnr Frank Landman & Willow Rd Fairview Tel: 041 001 1112 Email: willowdene@imizi.co.za	<u>Khwezi Uitenhage</u> John Street Uitenhage Tel: 041 450 6264 Email: khwezi1@imizi.co.za Email: khwezi2@imizi.co.za
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TENANT APPLICATION FORM

PROJECT : _____

Introduction:

We thank you for showing interest in our units for rental. In order for us to process your application as speedily as possible, please ensure that all required information (incl. certified supporting documents as listed below) are included in this application and submitted to IMIZI Housing.

Your combined household nett income must not exceed R22000 per month.

Certified Supporting Documents :

- Current Payslip and Letter from employer for all employed occupants
- Identity Document of Applicant
- Identity Document of all occupants over the age of 16
- Marriage, divorce or death Certificate (where applicable)
- Birth Certificates of Dependants under the age of 16
- Copy of SASSA Card and SASSA letter (if applicable)
- Bank statements of all occupants (no less than 6 months)
- Personal Budget Form and Supporting Documents
- IRP 5 / Tax Certificate (IT 3)
- Affidavit from all persons over 18 years who are unemployed

By ticking this box I confirm that I am aware of the non-refundable application fee of R170 which will be levied on each and every application.

BANK DETAILS FOR FEE AS FOLLOWS:

Bank: FIRST NATIONAL BANK
 Account name: IMIZI
 Account number: 62098456439
 Branch code: 261050
 Branch name: NEWTON PARK
 Reference: Name & Surname

A. Personal Particulars :

APPLICANT

SURNAME _____

FIRST NAME/S _____ DATE OF BIRTH _____

IDENTITY NUMBER _____

NATIONALITY _____

CITY/POSTAL CODE _____

TELEPHONE (H) _____ CELL PHONE _____

CURRENT EMPLOYER _____

OCCUPATION _____ MANAGER/HR OFFICE _____

EMPLOYERS' ADDRESS _____

TELEPHONE (W) _____ LENGTH OF SERVICE _____

EMAIL _____ VEHICLE REGISTRATION NO. _____

SPOUSE/PARTNER

SURNAME _____

FIRST NAME/S _____ DATE OF BIRTH _____

IDENTITY NUMBER _____

NATIONALITY _____

CITY/POSTAL CODE _____

TELEPHONE (H) _____ CELL PHONE _____

CURRENT EMPLOYER _____

OCCUPATION _____ MANAGER/HR OFFICE _____

EMPLOYERS' ADDRESS _____

TELEPHONE (W) _____ LENGTH OF SERVICE _____

EMAIL _____ VEHICLE REGISTRATION NO. _____

B. Household Composition (Persons to take full time occupation)

SINGLE COUPLE Married or Cohabiting COUPLE with children SINGLE PARENT with children

NAME	DATE OF BIRTH	RELATIONSHIP	EMPLOYMENT STATUS

C. Residency History :

Please list your residential address(es) for the past 2 years.

1. ADDRESS _____ FROM _____
TO DATE _____ LANDLORD NAME _____ LANDLORD NUMBER _____

2. ADDRESS _____ FROM _____
TO DATE _____ LANDLORD NAME _____ LANDLORD NUMBER _____

Indicate your current housing situation.

APPLICANT

HOME OWNER LIVING WITH FAMILY RENTAL APARTMENT OR HOUSE INFORMAL

SPOUSE / PARTNER / OCCUPANTS

HOME OWNER LIVING WITH FAMILY RENTAL APARTMENT OR HOUSE INFORMAL

IF RENTING, PLEASE INDICATE BASIC RENT PER MONTH _____

DO YOU ARE ANY OCCUPANT CURRENTLY OR HAVE EVER OWNED PROPERTY / HOUSE IN SOUTH AFRICA? Yes No

DO YOU OR ANY OCCUPANT CURRENTLY OR HAVE EVER OWNED A RDP HOUSE IN SOUTH AFRICA? Yes No

HAVE YOU OR ANY OCCUPANT RECEIVED A GOVERNMENT HOUSING SUBSIDY BEFORE? Yes No

WILL YOU BE JOINED BY YOUR PARTNER/SPOUSE/ANYONE ELSE IN A FEW MONTHS TIME? Yes No

ARE ANY OF THE OCCUPANTS EMPLOYED? Yes No

NEXT OF KIN:

NAME & SURNAME _____ TEL _____ RELATIONSHIP _____
ADDRESS _____

D. Income Particulars

APPLICANT

FORMAL LABOUR INFORMAL TRADE PENSION DISABILITY GRANT MAINTENANCE OTHER (Please specify)

SPOUSE / PARTNER / OCCUPANTS

FORMAL LABOUR INFORMAL TRADE PENSION DISABILITY GRANT MAINTENANCE OTHER (Please specify)

List basic monthly income (before deductions) for all members of your household taking occupation, from all sources

NAME	SOURCE (Employment, Pension, Etc.)	Monthly Income
	TOTAL BASIC MONTHLY INCOME FOR HOUSEHOLD	R

E. Marketing Information

Where did you hear about us?

WORD OF MOUTH NEWSPAPER WEBSITE FACEBOOK RADIO

F. Terms and Conditions of Application

1. No animals allowed.
2. Number of occupants is limited to two persons per bedroom.
3. Electricity and water are NOT included in the rental - Electricity is prepaid and water is metered.
4. Damage deposit will be held in an interest bearing account and cannot be utilised as rental.
5. Two months' damage deposit and one month's rent is payable before taking occupation.
6. Before vacating, an inspection will be carried out with the Caretaker and submitted to IMIZI .
7. On vacating, costs of cleaning, repairs and repainting the unit will be deducted from damage deposit.
8. Rental, water, refuse collection and/or parking is payable on or before 1st of every month in advance.
9. Debit order is the mandatory method of payment.
10. Annual rental increases will take place.
11. Annual Municipal increases take effect annually in accordance with the Municipality.
12. Completing and signing this application form is no guarantee of approval for a rental unit.
13. IMIZI or tenant have the right to give one calendar months' notice of cancellation of lease agreement should its clauses not be upheld as well as stipulations of Tenant Handbook.
14. **The units are strictly rent to rent and not rent to buy.**
15. Once approved and the deposit and first months rental has been paid, the applicant will be placed on a waiting list for the next available unit. There is no guaranteed time period to the waiting list.

G. Signature

I declare that I have read this form carefully and I also hereby give consent to the Landlord at all times to:

- a) Contact, request and obtain information from any credit provider (or potential credit provider) or registered credit bureau relevant to an assessment of the behaviour profile, payment pattern, indebtedness, whereabouts and creditworthiness of the tenant and all occupants.
- b) Furnish information concerning the behaviour, profile, payment pattern, indebtedness, whereabouts and creditworthiness of the tenant or occupant to any registered credit bureau or to any credit provider (or potential credit provider) seeking a trade reference regarding the tenants/occupants dealings with the Landlord.
- c) Contact or request to obtain information concerning criminal convictions of the applicant and occupant from SAPS.

I declare that the following information which I have furnished is correct:

- * Residency History;
- * Spouse/Partner;
- * Bank Accounts;
- * Payslips and/or Declaration of Income;
- * Occupants;
- * Full list of expenditure.

I understand that if any of it is found to be untrue and incorrect, the application will not be approved and if the application is approved based on such information the lease agreement may be cancelled with immediate effect.

APPLICANT

SPOUSE / PARTNER / OCCUPANTS

PLACE _____

PLACE _____

DATE _____

DATE _____

SIGNATURE _____

SIGNATURE _____

BANK DETAILS OF APPLICANT

BANK NAME: _____ ACCOUNT HOLDER NAME AND SURNAME _____
 BRANCH CODE _____ ACCOUNT TYPE _____ ACCOUNT NUMBER _____

BANK DETAILS OF SPOUSE / PARTNER

BANK NAME: _____ ACCOUNT HOLDER NAME AND SURNAME _____
 BRANCH CODE _____ ACCOUNT TYPE _____ ACCOUNT NUMBER _____

GENERAL

- * WHEN WOULD YOU NEED TO OCCUPY YOUR ACCOMMODATION? Month _____ Year _____
- * WOULD YOU REQUIRE PARKING FOR A CAR? (Extra Cost) YES NO (No visitor/s parking) REG NO. _____
- *IF YOUR APPLICATION IS SUCCESSFUL YOU WOULD BE REQUIRED TO ATTEND A TENANT EDUCATION COURSE WHICH IS COMPULSORY.
- *ARE YOU OR ANY OF YOUR DEPENDENTS DISABLED AND REQUIRE WHEELCHAIR ACCESS? YES NO

WHAT QUALIFICATION(S) OR SKILLS DO YOU HAVE? (All members within the household)

QUALIFICATION(S) / SKILLS	SPECIFICATION
Matric	
<u>NQF</u>	
Tertiary	
Artisan	
<u>Other</u>	

RECOMMENDATIONS FOR FUTURE PROGRAMMES:

REASON FOR APPLICATION

Please note that this is purely for statistical purposes and will not influence your eligibility.

Please tick any of the following:

- AFFORDABILITY
- CLOSER TO PLACE OF EMPLOYMENT
- SAFETY AND SECURITY
- CLOSER TO FAMILY
- SOLD OWN PROPERTY
- RETIREMENT
- OTHER (Please Specify)



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HOUSEHOLD PERSONAL BUDGET FORM

NETT INCOME (As per Payslip)	R	c
Applicant		
Spouse / Partner / Occupants		
Other (Grant, Pension, Maintenance)		
TOTAL INCOME		
EXPENDITURE	R	c
Church / Charity		
Rent		
Groceries		
Savings		
Transport Costs		
Clothing		
Loans (All types)		
School Fees		
Insurances		
Municipal Water and Electricity		
Telephone / Airtime / Cell Contracts		
Family Support		
Medical		
Entertainment		
Garnishee		
Other (Specify)		
TOTAL EXPENDITURE		
TOTAL INCOME PER ABOVE		
TOTAL EXPENDITURE PER ABOVE		
NETT CASH FLOW		



QUALIFYING CRITERIA LISTING

Dear Sir/Madam,

Thank you for your interest in our available rental units.

Please note that our qualifying criteria is as follows :

- The main applicant needs to be at least 21 years of age or older;
- The main applicant must be a South African citizen;
- The main applicant must be permanently employed or receive a pension;
- The combined household income must not be more than R22 000 per month; and
- None of the occupants must own property

Should you qualify under the above-mentioned criteria, you are welcome to apply for a unit at one of our projects. If your application is successful, you will be placed on a waiting list until such time that a unit (for which you have been approved) becomes available.

Should you wish to apply, please note that there is a non-refundable application fee of R170.00 which needs to be paid into the bank account as indicated on the top right hand side of the application form.

On the left side of the form is a list of documents which we will require in order to process your application. Please ensure that you provide us with all the documents which have relevance to you. Not handing all of the documents relevant to you could result in the outcome of your application being delayed. **All documents must be certified**, except the bank statements. Bank statements must be original with the bank stamp. All documents required from the main applicant must also be provided for all occupants.

Application forms and documents cannot be faxed or emailed. Please arrange for the original documentation to be delivered to the preferred project.

Please ensure that you read and understand the conditions of the application as stipulated on page three (3) of the application form. Bear in mind that incorrect information provided by an applicant can lead to the application being declined.

We wish you all the best in your search for your dream accommodation.

Regards

Client Services Department
IMIZI HOUSING

I, _____ ID _____ state that I have read the above qualifying criteria and hereby confirm that I (and all other occupants) have complied herewith.

SIGNATURE

DATE