

Accommodation Advertisement Form

Please complete one form per property unit

Contact Details		
Agent/Landlord Name:	Company	
Home / Business Address:		
		Postcode
Mobile No:	Email:	Telephone No:
Website:		

Property Address
Address of Property to be advertised:
Post Code:

Type of property: <i>(please tick)</i>			
Bedsit	<input type="checkbox"/> Flat	<input type="checkbox"/> Private Hall Room	<input type="checkbox"/>
House	<input type="checkbox"/> Room	<input type="checkbox"/> Studio	<input type="checkbox"/>
University Hall Room	<input type="checkbox"/>		
Size of property <i>(No. bedrooms)</i> :		Number of beds to let:	Habitable Floors:
Description of Property <i>(Optional - Max 15 words)</i>			

Shared Facilities: <i>(For use by all tenants)(please tick)</i>					
Broadband Internet	<input type="checkbox"/>	Double Glazing	<input type="checkbox"/>	Fridge Freezer	<input type="checkbox"/>
Garden	<input type="checkbox"/>	Lounge	<input type="checkbox"/>	Microwave	<input type="checkbox"/>
Off Road Parking	<input type="checkbox"/>	Shower	<input type="checkbox"/>	Telephone	<input type="checkbox"/>
Washing Machine	<input type="checkbox"/>	Wheelchair Access	<input type="checkbox"/>		

Private Facilities: <i>(please tick)</i>					
Broadband Internet	<input type="checkbox"/>	Double Bed	<input type="checkbox"/>	En-Suite	<input type="checkbox"/>
Television	<input type="checkbox"/>				

Safety & Security: <i>(please tick)</i>			
Burglar Alarm	<input type="checkbox"/>	Smoke Alarm(s)	<input type="checkbox"/>

Suitable For: <i>(please tick)</i>					
Children	<input type="checkbox"/>	Couples	<input type="checkbox"/>	Family	<input type="checkbox"/>
Females	<input type="checkbox"/>	Individuals	<input type="checkbox"/>	Males	<input type="checkbox"/>
Mixed Group	<input type="checkbox"/>	Pets	<input type="checkbox"/>	Postgraduates	<input type="checkbox"/>
Staff	<input type="checkbox"/>	Undergraduates	<input type="checkbox"/>		

Other Facilities

Other Facilities

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Heating:

Type of Heating: _____

Certification:Gas Certificate: _____ Expiry Date: *(please enclose a copy if applicable)* _____HMO Certificate: _____ Expiry Date: *(please enclose a copy if applicable)* _____EPC Reference: _____ Expiry Date: *(please enclose a copy if applicable)* _____

Energy Efficiency: _____ Potential Energy Efficiency Rating: _____

Environmental Impact: _____ Potential Environmental Impact: _____

Tenancy Deposit Protection Scheme: _____

Adverts Section *(Please complete those that are applicable)*

Price per Person: From £ _____ To £ _____

Price per Room: From £ _____ To £ _____

Whole Property Rent: Week £ _____ Month £ _____

Deposit (per person / room / property)(£): _____ Let Property to: Individuals/Groups/Both _____

Is this inclusive of: Water: Yes/No Gas: Yes/No Electricity: Yes/No
Internet: Yes/No

Property Available From: _____ Contract Length: _____

Retainer: _____

Please ensure you have completed the entire application

- I confirm that the information supplied on this application is true to the best of my knowledge and belief.

- I agree to indemnify University of West London and Studentpad in respect of any loss arising from inaccurate misleading or incomplete information in this application.

- I agree to any and all advertising conditions listed below.

I am the Landlord / Landlady / Agent for this property *(delete as appropriate)*

Print Name: _____ Date: _____ Signed: _____

For Office Use Only**Advertising Conditions**

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