## **BIVEL CONSULTANTS**

Suite B10, Shakir Plaza, Garki 11, P.O Box 3745 Garki – Abuja.

Passport Here

## **PROSPECTIVE TENANT ACQUAINTANCE FORM**

| A:    |   | PERSONAL DETAILS:  |
|-------|---|--|
| :     | 1.  | FULL NAME:   |
| :     | 2.  | PRESENT ADDRESS:   |
| 1     | 3.  | PLACE OF WORK:   |
|       | 4.  | OFFICE ADDRESS:  |
| !     | 5.  | ADDRESS OF PROPERTY APPLYING FOR:  |
|       | 6.  | PHONE NO E-MAIL:   |
| -     | 7.  | MARITAL STATUS: SEX:   |
| A (i) | 1.<br>2.<br>3.<br>4.<br>5.<br>6.<br>7.<br>(i)<br>1.<br>2.<br>3.<br>4.<br>5.<br>6.<br>7. | DECLARATION:   |
|       |   | I HEREBY DECLARE THAT I WILL PAY   |
|       |   | MY RENT WHEN DUE FOR RENEWAL.  |
|       |   | SIGN DATE:   |
| B:    |   | RENTAL DETAILS:  |
| :     | 1.  | CURRENT RENT PAID IN YOUR APARTMENT:   |
| :     | 2.  | REASONS WHY YOU WANT TO LEAVE YOUR APARTMENT?  |
| 1     | 3.  | HOW MANY PEOPLE WILL BE STAYING IN THE PROPERTY:   |
|       | 4.  | WHO IS RESPONSIBLE FOR SUBSEQUENT RENT PAYMENT?  |
|       | 5.  | IF COMPANY PLEASE INDICATE THE CONTACT PERSON'S NAME & PHONE NO.   |
| (     | 6.  | BUDGET RANGE PER ANNUM:  |
| -     | 7.  | TERM (HOW MANY YEARS):   |
| C:    |   | REFEREE/GUARANTOR  |
| :     | 1.  | NAME, ADDRESS AND PHONE No. (ONE OF THE REFEREES SHOULD BE YOUR EMPLOYER).<br>(i).   |
|       |   | (i)  |
|       |   | (ii).  |
|       |   | <u>CONDITION:</u> we want our property to be in the same shape and condition with which we have let to you if a  |
|       |   | any time you are vacating.   |
|       |   | We also charge one month of your annual rent charges, additional to the rent to be paid as caution fee in case an damage done on the property at the time of your vacation which is refundable if no damage is done on the propert |
|       |   | and you have to notify us 3 month before the expiration of your tenancy for the refund.  |

Signature: .....

Date:....