



Reg: 1998/019215/07 VAT:4510233747
 Ground floor, Sagewood House,
 Lynnwood Service Road, Lynnwood Ridge
 PO Box 36805, Menlo Park, 0102
 (012) 348 3578 086 212 0819
 www.unilofts.co.za

UNILOFTS PRETORIA – 2019 APPLICATION / RENEWAL FORM

Fully furnished, luxury student accommodation for the serious student.

All units are sharing units for 2 students, equipped with 2 x ¾ beds, cupboards, study table & chair. Kitchen is equipped with fridge, stove, washing machine, tumble dryer, dishwasher. Living room equipped with flat screen TV, couch, table & 2 chairs. 1 x Bathroom equipped with shower, bath, basin & toilet.

Students who don't wish to share a unit, have to rent both rooms / beds.

UNIT OPTIONS to choose from:

A Type	2 separate rooms with ceiling fans	R 5 800 per room / bed per month	R 7 800 deposit	R1380 lease fee	Initial pmt R 14980	One room	TICK
					Initial pmt R 28580	Both rooms	TICK
B Type	2 bed open plan unit	R 4 400 per bed per month	R 6 400 deposit	R1380 lease fee	Initial pmt R 12180	One bed	TICK
					Initial pmt R 22980	Both beds	TICK

Accommodation per room rented Includes:

DSTV Connection. Free water. Free secure under cover parking. 24 hour security. Bio metric entrance.

Other value added services available:

On-site management. On-site maintenance. Selling of pre-paid electricity, airtime & data tokens. Copy shop. Additional cleaning services.

PARENT /GUARDIAN /ACCOUNT PAYER DETAILS

Title: _____ Name: _____

Surname: _____

ID: _____

Nationality: _____

Cell phone: _____

Email address for ACCOUNT:

Residential address: _____

Postal address: _____

Employer: _____

Occupation: _____

Work address: _____

Work tel. number: _____

SPOUSE DETAILS

Full Name: _____

ID: _____

Cell phone: _____

Email: _____

Work tel. number: _____

STUDENT DETAILS:

First name: _____

Surname: _____

ID: _____

Email: _____

Cell Phone: _____

Nationality: _____

SA Cell phone (for foreigners): _____

Year of study (example 1st, 2nd): _____

Course: _____

Student Number: _____

Email application to marlize@legprop.co.za
 Head office 012 348 3578

Marketing office cell phone 073 949 7213
 www.unilofts.co.za

MONTHLY INCOME:

Gross salary (applicant): R _____

Gross salary (spouse): R _____

Other Income: R _____

Specify: _____

TOTAL INCOME: R _____

PLEASE SEND THE FOLLOWING DOCUMENTATION

WITH YOUR APPLICATION:

- Copies of ID's (applicant and student).
- Proof of Income: Payslip or 3 months bank statements or letter from accountant.
- Proof of residence
- Proof of registration at place of study
- Letter of Bursary / Sponsor (If applicable)

BURSARY / SPONSOR INFORMATION:

Name of bursary / sponsor: _____

Physical address: _____

Contact person: _____

Office tel. number: _____

Email: _____

Date of bursary payment: _____

Amount paid by bursary for accommodation:

MARKET RESEARCH

Where did you hear about us:

Flyers	Pole adds	Book-N-Stay	Website	Word of Mouth	Kovsie Radio	Google search
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Other: _____

LEASE PERIOD:

7 January 2019 to 20 December 2019

CONSENT CLAUSE:

The Tenant and/or the Parent or Guardian or person responsible for payment hereby agrees and allows

- The Agent, at all times, to contact, **request and obtain information** from any credit provider, potential credit provider **or registered credit bureau** that may be necessary to assess the behavior, profile, payment patterns, debt obligation, whereabouts and creditworthiness of the Tenant and/or the Parent or Guardian. **The cost for obtaining payment profile from the credit bureau will be for the account of the Tenant.**

- The agent to **furnish information** concerning the behavior, profile, payment patterns, debt obligation, whereabouts and creditworthiness of the Tenant to **any registered credit bureau** or to any credit provider or potential credit provider seeking a trade reference regarding the Tenants dealing with the Agent.

LEGPROP (PTY) LTD (the agents) is affiliated with TPN credit bureau as per The National Credit Act.

I, THE UNDERSIGNED, CERTIFY THAT THE

INFORMATION PROVIDED IS TRUE AND CORRECT:

Date of application: _____

Signature applicant / guardian:

Name and Surname: _____

Signature of Student (tenant)

Name and Surname: _____

OFFICE USE

New	TPN SCORE	Unit	A	Owner
Renew			B	