



RENTAL APPLICATION FORM FOR RESIDENCE

DO NOT COMPLETE THIS APPLICATION UNTIL YOU HAVE VIEWED THE PROPERTY AND YOU ARE SATISFIED WITH THE CONDITION AS IT IS.

THE REGISTRATION / ADMIN FEES OF R500.00 MUST ACCOMPANY THE APPLICATION FOR IT TO BE PROCESSED.

PLEASE ENSURE FULL AND ACCURATE COMPLETION OF THE APPLICATION TO AVOID UNNECESSARY DELAYS.

PRIVATE AND CONFIDENTIAL	PLEASE PRINT IN CAPITAL LETTERS
ROOM SIZE REQUESTED – THE RATES ARE DETAILED IN THE LEASE DOCUMENT TOGETHER WITH THE PAYMENT SCHEDULE	STANDARD / LARGE / EXTRA-LARGE (please indicate preference)
OCCUPATION DATE	1 FEBRUARY 2026
TERMINATION DATE	30 NOVEMBER 2026
INSTITUTION OF STUDY	
COURSE OF STUDY AND YEAR, ie. 1 st , 2 nd , 3 rd .	
DETAILS OF STUDENT APPLYING TO RENT PREMISES	
FULL NAME	
ID / PASSPORT NUMBER	
DATE OF BIRTH	
NATIONALITY	
CELL NO.	
EMAIL ADDRESS	
CURRENT RESIDENTIAL ADDRESS	
DETAILS OF PARENT	
MOTHER	
FULL NAME	
ID / PASSPORT NUMBER	
DATE OF BIRTH	
NATIONALITY	
CELL NO	
EMAIL ADDRESS	
WORK TEL NO	
FATHER	
FULL NAME	
ID / PASSPORT NUMBER	
DATE OF BIRTH	
NATIONALITY	
CELL NO	
EMAIL ADDRESS	
WORK TEL NO	
FATHER / MOTHER	
EMPLOYMENT DETAILS	
EMPLOYER (MOTHER)	
OCCUPATION	

PERIOD EMPLOYED	
EMPLOYERS ADDRESS	
EMPLOYER (FATHER)	
OCCUPATION	
PERIOD EMPLOYED	
EMPLOYERS ADDRESS	
PERSON RESPONSIBLE FOR RENTAL PAYMENT	
BANK DETAILS	
BANK NAME	
ACCOUNT NO.	
BRANCH NAME AND CODE	
ACCOUNT TYPE	
NEXT OF KIN	
NAME	
RELATIONSHIP	
ADDRESS	
CELL NO	
EMAIL ADDRESS	
I / We declare that the information we have given in this application form is true and correct to the best of my / our knowledge and that I / We have not failed to provide any information which, if the Landlord had known such information, would have not allowed the application to be successful.	
Upon acceptance by the Landlord and the presentation of an Agreement of Lease, I/We agree to pay the following to secure the room:	
REGISTRATION FEE ON APPLICATION	R500.00 (to accompany this application)
10% NON-REFUNDABLE DEPOSIT TO SECURE THE ROOM (<i>once accepted you will receive written confirmation and be required to pay the 10% deposit within 14 days to secure the room</i>).	
TOTAL	R
To be paid via EFT OR cash at our office (charges apply) by the specified date, to secure the room	
SUPPORTING DOCUMENTS TO BE ATTACHED WITH THIS APPLICATION:	
COPY OF ID / PASSPORT - STUDENT	
COPY OF ID / PASSPORT - GUARDIAN AND/OR PERSON RESPONSIBLE FOR RENTAL PAYMENT	
PROOF OF CURRENT ADDRESS – GUARDIAN / PERSON RESPONSIBLE FOR RENTAL PAYMENT	
LATEST TWO PAYSLEIPS – GUARDIAN / PERSON RESPONSIBLE FOR RENTAL	
COMPLETED MEDICAL CERTIFICATE OF RESIDENT	

I agree to the following:

I agree that the Villa Maria Female Student's Residence Lease Agreement and House Rules shall be the basis of the contract and made on acceptance of this application **and I agree to pay the full years fee even if the student leaves before the end of the year** and further that the Manager/Management in charge shall stand in loco parentis – with authority to decide on all matters, medical or other, affecting the well-being of my daughter or ward during her period of residence.

The Landlord or Agent may at all times contact, request and obtain information from any credit provider (or potential credit provider) or registered credit bureau that may be necessary to assess my/our behaviour, profile, payment patterns, indebtedness, whereabouts and creditworthiness; furnish information concerning the behaviour, profile, payment patterns, indebtedness, whereabouts and creditworthiness of me/us to any registered credit bureau or to any credit provider (or potential credit provider) seeking a trade reference regarding my/our dealings with the Landlord.

THUS, DONE AND SIGNED AT

ON THIS

DAY OF

20

SIGNATURE OF TENANT

THUS, DONE AND SIGNED AT

ON THIS

DAY OF

20

SIGNATURE OF GUARDIAN / PERSON RESPONSIBLE FOR PAYMENT