

## ACCEPTANCE FORM

Name: \_\_\_\_\_ Sole/Joint Owners

Address of Property to Let: \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

I/We the above Sole/Joint Owner/s of the said property agree to let Eastbourne Lettings act as our Managing Agents in accordance with the terms and conditions contained in our brochure.

I/We require the below option:

Full Management -  
10% + VAT

Rent Collection -  
9% + VAT

Introduction service – Find a tenant  
2 weeks rent + VAT deducted on commencement of tenancy.  
(Minimum charge £300.00)

Forwarding address for correspondence: \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

Contact Telephone No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

I/We acknowledge responsibility for obtaining permission from my/our mortgager and or lesser. (Please tick)

I/We will inform my/our insurance company or my/our intention to let the above property and gain such additional cover as may be required. (Please tick)

I/We will confirm that all the gas appliances have been serviced and comply with the gas safety (Installation and use) Regulations 1994. Copy a certificate enclosed) (please tick)

I/We agree to let Eastbourne Lettings obtain the necessary Gas Safety Certificate from a CORGI Registered Gas Installer. The numbers of Gas appliances in the property are:  
\_\_\_\_\_

I/We confirm that all electrical equipment has been checked to comply with the Electrical Equipment Regulations 1994. Copy of certificate enclosed. (please tick)

I/We agree to let Eastbourne Lettings obtain the necessary Electrical Equipment Safety Certificate. (please tick).