



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: (please	tick)		4 8	
Bedsit University Hall Room	Flat	House		
Size of property (No. bedroom	ms): Number of beds to let:	Habitable Floors:		
Description of Property (Optional - Max 15 words)				
Shared Facilities: (For use by all tenants)(please tick)				
Broadband Internet	Burglar Alarm	Double Glazing		
Fridge Freezer	Lounge	Microwave	H	
Parking	Smoke Alarm	Telephone		
Washing Machine				
Other Facilities:				
Private Facilities: (please t	0	_		
Cooking Facilities	En-Suite Bathroom			
Other Facilities:				
Suitable For: (please tick)				
Children Females	Couples Individuals	Family International Students		
Males	Mixed Group	Pets		
Post-Graduates	Smokers	Staff	H	
Under-Graduates				
Other Facilities:				

Heating:				
Type of Heating:				
2				
Certification:				
Gas Certificate:		Expiry Date: (please enclose a copy)		
HMO Certificate:		Expiry Date: (please enclose a copy)		
Electrical Certificate:		Expiry Date: (please enclose a copy)		
EPC Reference:		Expiry Date: (please enclose a copy)		
Energy Efficiency:		Potential Energy Efficiency Rating:		
Environmental Impact:		Potential Environmental Impact:		
Tenancy Deposit Prote	ction Scheme:			
Adverts Section (Pleas	se complete those that are applicable)			
Price per Person:	From £	To £		
Price per Room:		To £		
Whole Property Rent:	Week £	Month £		
Deposit (per person / re	oom / property)(£):	Let Property to: Individuals/Groups/Both		
Is this inclusive of:	Water: Yes/No Gas: Yes/No Internet: Yes/No	Electricity: Yes/No		
Property Available Fro	m:	Contract Length:		
Tenancy Deposit Scheme:				
Please ensure you ha	ave 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 Greenwich and Studentpad.co.uk 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 / Land	dlady / Agent for this property (delete as approp	oriate)		
Print Name:	Date:	Signed:		
For Office Use Only				