

**AFRIKHAYA APARTMENTS RENTAL APPLICATION FORM**

Complex name and unit type applied for as per advertisement		Complex Name: Unit Number:
<b>1</b>	<b>Personal Details – Main Applicant</b>	
1.1	Surname	
1.2	Full Names	
1.3	Identity Number	
1.4	Physical address	
1.5	Email address	
1.6	Telephone number (home/alternative)	
1.7	Telephone number (mobile)	
1.8	Telephone number (work)	
1.9	Proof of Marital Status	
1.10	Race	
1.11	Gender	
<b>2</b>	<b>Partner / Spouse Details</b>	
2.1	Surname	
2.2	Full Names	
2.3	Identity Number	
2.4	Physical address	
2.5	Email address	
2.6	Telephone number (home/alternative)	
2.7	Telephone number (mobile)	
2.8	Telephone number (work)	
2.9	Proof of Marital Status	
2.10	Race	
2.11	Gender	

<b>3 Next of Kin</b>								
3.1	Full Name and Surname							
3.2	State Relationship							
3.3	Street Address							
3.4	Telephone Numbers							
<b>4 Employer Details</b>								
4.1	Employer / Business Name							
4.2	Contact Person							
4.3	Street Address							
4.4	Telephone Numbers							
<b>5 Additional Occupants</b>								
<p><b>PLEASE ATTACH COPIES OF BIRTH CERTIFICATES OR IDENTITY DOCUMENTS</b></p> <ul style="list-style-type: none"> <li>• Children living with you 18 years and under</li> <li>• Children over the age of 18 and still studying full-time</li> </ul>								
5.1	Occupant's / Dependent's Name							
	Occupant's / Dependent's ID No							
5.2	Occupant's / Dependent's Name							
	Occupant's / Dependent's ID No							
5.3	Occupant's / Dependent's Name							
	Occupant's / Dependent's ID No							
5.4	Occupant's / Dependent's Name							
	Occupant's / Dependent's ID No							
<b>6 Income</b>								
6.1	Do you have a regular Income	Yes		No		Other		
6.2	If "Other" please explain							
6.3	Gross Income – Main Applicant							
6.4	Gross Income – Spouse / Co-Applicant /s							
6.5	Source of Income	Employed Full Time						
		Employed Part-Time						

		Other (explain) <input type="checkbox"/>
6.6	Are you a SA Citizen	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.7	If "No", specify citizenship	
6.8	Do you have valid SA Residency	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.9	Are you blacklisted?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.10	Do you have a criminal record?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.11	Are you renting currently?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.12	Do you have contactable reference	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.13	Reference 1	
6.14	Reference 2	
6.15	Reference 3	
6.16	Do you or any co-applicants own any residential property	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.17	Have you or your partner signed an agreement to lease or purchase property from AfriKhaya, or any Social- or Government Housing Institution (including Municipal, Provincial and National Government) If "YES", please give details of addresses and/or erf numbers	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>7</b>	<b>Disability</b>	
7.1	Do you or any of your dependents have a disability? If yes please state who has the disability and the nature of the disability	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>8</b>	<b>Eviction</b>	
8.1	Have you ever been evicted from a residence?  If YES, please give details	Yes <input type="checkbox"/> No <input type="checkbox"/>

### DECLARATION AND CONSENT

In this declaration, the singular "I" and "my" should be read to include the plural "we" and "our".

I declare that all information provided is true and correct to the best of my knowledge. I understand that any misrepresentations made in this application or in additional information I may supply to AfriKhaya may render me ineligible for AfriKhaya accommodation.



**Tel:** +27 53 833 1654  
**Fax:** +27 53 831 3786  
**Email:** [info@afrikhaya.org.za](mailto:info@afrikhaya.org.za)  
**Web:** [www.afrikhaya.org.za](http://www.afrikhaya.org.za)  
**Address:** PO Box 1304  
Kimberley  
8300

I authorise AfriKhaya to undertake any enquiries necessary to arrive at a decision concerning my application for accommodation and to conduct such enquiries from time to time during tenancy. These would include, but are not limited to enquiry into my personal information and credit record(s) with any credit reference agency. I further consent to the company carrying out identity and fraud prevention checks and sharing information relating to this application through fraud prevention agencies.

I understand and accept the terms and conditions of this application. I also understand that AfriKhaya is unable to guarantee accommodation to applicants.

I understand that either withholding or giving false information will disqualify my application.

_____	_____	_____
<b>Full Name (Applicant)</b>	<b>Signature (Applicant)</b>	<b>Date</b>
_____	_____	_____
<b>Full Name (Spouse)</b>	<b>Signature (Spouse)</b>	<b>Date</b>

In order for your application to be assessed ensure that you submit certified copies of the following documents.

1. Three Months stamped bank statements;
2. Proof of Income (Three latest payslips);
3. Identity document or valid permanent residency papers;
4. Certified copy of marriage certificate / certified copy of divorce decree / customary marriage certificate as applicable;
5. ID or birth certificates of all dependants;
6. Six months bank statement if self-employed.

Please email your completed application form with the relevant documentation to the email address specified in the advertisement for the vacant unit you are applying for to: [info@afrikhaya.org.za](mailto:info@afrikhaya.org.za)