

CityTown Management AG

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Registration Form Property to Rent

☐ Apartment ☐ Garage ☐ Parking bay ☐ Hobby room ☐ Other.....

Suburb: _____ Street: _____ Size: _____ Floor: _____

Date: _____ Rental (Gross): Fr. _____ ☐ Deposit max. 3 month's rental
☐ Surety

Name for your post box and front door tag: _____

Are you using the property as a family home? ☐ yes ☐ no

No of people: _____ Adults _____
Children, Grandparents: _____

Do you have pets? ☐ yes ☐ no If yes, what kinds? _____

Do you have a car? ☐ yes ☐ no Number Plate: _____

Tenant Information

Wife / Partner

Surname: _____

First Name: _____

Street: _____

Post Code / Suburb: _____

Place of birth: _____

Residence Permit: ☐ A ☐ B ☐ C ☐ A ☐ B ☐ C

Date of birth: _____

Marital Status: _____

Profession: _____

Telephone: P: _____ B: _____ P: _____ B: _____

Employer (Adr. + Tel.): _____

Income: _____

How long have you been living at present address? _____

Reason for moving: _____

Present Landlord (Tel): _____

References may be obtained from your employer or present landlord /caretaker

(Name, Tel.): _____

Please could you enclose a prosecution clearance certificate with this rental application.

Should this application for any reason not result in a signed rental contract, then a fee of Fr. 120.00 is payable for work rendered.

Place, Date: _____

Signature: _____