

**Mediation Order** - Order No.: \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_  
**tenancy applicant:** Name, first name

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 date of birth place of birth nationality

\_\_\_\_\_ / \_\_\_\_\_  
**residential address**

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 postal address

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 passport no. date and place of issue occupation /profession

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 phone: private office mobile

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 e-mail e-mail telefax

\_\_\_\_\_ / \_\_\_\_\_  
**special terms:** customer signs on behalf of another person

**Premises required**

number of rooms: \_\_\_\_\_ o flat o apartment o house o variable

**preference:** o old building o new building o balcony o garden o lift o car park

**furnished:** o yes o no o partly o variable **rent per month:** max. € \_\_\_\_\_

**period:** from \_\_\_\_\_ until \_\_\_\_\_ but at least (until) \_\_\_\_\_

**location:** o variable / o central (o east / o west) / only: \_\_\_\_\_

**number of persons:** \_\_\_\_\_ male, \_\_\_\_\_ female, \_\_\_\_\_ children ( \_\_\_\_\_ aged )

\_\_\_\_\_ **smoker:** o yes o no

**special requests:** services, allergies against animals, animal keeping...

By signing this order the customer acknowledges the terms of business of the agency **ZEITRAUM WOHNKONZEPTE** and gives his approval of obtaining a solvency check ( e.g. SCHUFA-information) in case the landlord requires it.

\_\_\_\_\_ , \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 location date customer mediator