

TENANCY APPLICATION FORM

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ABN 36 098 112 371

Our Agency welcomes your Application and any queries you may have.

The following information and checklist will assist you to complete the Tenancy Application so it can be processed as quickly as possible.

Please read prior to completing your Application

- One Application is to be completed per person.
- Applicants are to supply their own photocopies of documentation required. This Application must be accompanied by copies of documents from those listed below for the 100 points Identification Check. PLEASE NOTE THIS MUST INCLUDE A DRIVER'S LICENCE, PASSPORT OR 18+ CARD. Your original driver's licence, passport or 18+ card will be required to be sighted at the time of handing in your application.

<input type="checkbox"/>	Drivers Licence	40
<input type="checkbox"/>	Passport	40
<input type="checkbox"/>	18+ Card	40
<input type="checkbox"/>	Birth Certificate	30
<input type="checkbox"/>	Other Photo ID	30
<input type="checkbox"/>	Current Wage Advice	30
<input type="checkbox"/>	Previous Tenancy Reference	20
<input type="checkbox"/>	Previous two rent receipts	20
<input type="checkbox"/>	Motor vehicle registration certificate	10
<input type="checkbox"/>	Bank Statement	10
<input type="checkbox"/>	Telephone Account	10
<input type="checkbox"/>	Electricity Account	10
<input type="checkbox"/>	Gas Account	10
	TOTAL POINTS	<u>100</u>

- This Application cannot be processed until it is complete with copies of supporting documents attached.
- Our Agency staff will contact you within 24-48 business hours. If the Application is approved, the General Tenancy Agreement will need to be signed by all approved lease holders and an amount, equal to 6 weeks rent being 4 weeks bond and 2 weeks rent, be paid by internet transfer, money order or bank cheque within 24 hours of acceptance.

APPLICATION CHECKLIST

Before I submit this Application, I have...

- Attached photocopies of documents to meet 100 or more points of ID. Refer to list above.
- Inspected the Property both internally and externally.
- Completed all details in full on the Application form.
- Provided all contact details and documentation for confirmation of income source.
- Completed the Pet Application & Agreement form if applicable
- Read and signed the Privacy Disclosure Statement, Privacy Consent and Marketing Consent – see Page 4

OFFICE USE ONLY – TO BE COMPLETED AT TIME OF APPLICATION BEING SUBMITTED WITH APPLICANT PRESENT

CHECKLIST	STAFF MEMBER	DATE	TIME
<input type="checkbox"/> Application received		/ /	AM/PM
<input type="checkbox"/> Compared signatures to original		/ /	AM/PM
<input type="checkbox"/> Checked ALL Consents signed		/ /	AM/PM
<input type="checkbox"/> Checked Application is completed in full		/ /	AM/PM
Name of nominated Applicant to contact in relation to application status	Name	Phone	



PROPERTY ADDRESS				
How did you find out about this Property	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Website _____	<input type="checkbox"/> For Rent Sign	
	<input type="checkbox"/> Walk-in	<input type="checkbox"/> Referral	<input type="checkbox"/> Other Agent	
	<input type="checkbox"/> Other _____			
Applicant's Full Name and Address	Name			
	Address			
Personal Details	Date of Birth	/ /	Place of Birth	
	Drivers Licence No.		Expiry Date	
	Passport No.		Expiry Date	
Applicant's Contact Details	<input type="checkbox"/> Home	<input type="checkbox"/> Business		
	<input type="checkbox"/> Mobile	Email		
Current Rental Details	Rent per week	\$	Period of occupancy Months Years	
	Agent/Landlord	<input type="checkbox"/> Home		
	Fax	<input type="checkbox"/> Business		
	Do you expect the Bond to be refunded in full		<input type="checkbox"/> Yes <input type="checkbox"/> No Why _____	
Previous Address	Address			
	Rent per week	\$	Period of occupancy Months Years	
	Agent/Landlord	<input type="checkbox"/> Home		
	Fax	<input type="checkbox"/> Business		
Employment	Current Employer	<input type="checkbox"/> Full Time <input type="checkbox"/> Casual		
		<input type="checkbox"/> Part Time <input type="checkbox"/> Contract		
	Your Position	Supervisor's Name		
	Length of Employment	Years	Fax	
		Months	<input type="checkbox"/> Business	
	Net income per week		\$	
	Currently I am paid on the _____ of each week / fortnight / month (circle relevant)			
If Self Employed	Company Name	Trading As		
	Address			
	ABN	Industry/ Nature of Business		
	How long have you been self-employed?		Years	Months
	Total Annual Income (as declared to Australian Taxation Office)		\$	
	Accountant	<input type="checkbox"/> Business		
	Creditor	<input type="checkbox"/> Business		
	Creditor	<input type="checkbox"/> Business		
If a Student or Not Currently Employed	VERIFICATION OF INCOME SOURCE MUST BE PROVIDED			
	Student ID # _____	Institution _____	Faculty _____	
	Course _____	Duration _____		
	<input type="checkbox"/> Currently not employed Please indicate documents supplied with this Application to confirm your income source: <input type="checkbox"/> Parent / Guardian Letter <input type="checkbox"/> Centerlink Documents <input type="checkbox"/> Austudy Documents <input type="checkbox"/> Bank Statements <input type="checkbox"/> Other			
Australian Citizen	<input type="checkbox"/> Yes	<input type="checkbox"/> No – copies of Passport and Visa attached	Visa Expiry / /	

Vehicle Information	Total number of vehicles to be kept at the premises		
	Registration No State	Model	Owned / Hire Purchase
	Registration No State	Model	Owned / Hire Purchase
Occupancy Details Full Names, Current Addresses and Ages of all People, Including Children, who will Reside at this Property	Name	Address	Age
Pets	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If YES please complete the attached Pet Applications & Agreement form and return with the completed application form to our Agency		
Emergency Contact Details of Closest Relatives who will not be Residing with You	Name		Name
	Relationship		Relationship
	Address		Address
	☎ Home		☎ Home
	☎ Work		☎ Work
	☎ Mobile		☎ Mobile
Personal References (not relatives) Please ensure each has agreed for you to nominate them as a Referee.	Name	Occupation	☎ Business Hours Contact

I confirm the following:

- | | |
|--|---|
| | Detail |
| 1. Have you ever been evicted by any Lessor or Agent? | <input type="checkbox"/> No <input type="checkbox"/> Yes _____ |
| 2. Have you been refused another Property by a Lessor or Agent? | <input type="checkbox"/> No <input type="checkbox"/> Yes _____ |
| 3. Are you in debt to another Lessor or Agent? | <input type="checkbox"/> No <input type="checkbox"/> Yes _____ |
| 4. Is there any reason known to you that would affect your ability to pay rent when due? | <input type="checkbox"/> No <input type="checkbox"/> Yes _____ |
| 5. Was your rental bond at your last address refunded in full? | <input type="checkbox"/> No <input type="checkbox"/> Yes _____ |

I confirm the following:

During my inspection of the Property on _____ / _____ / _____ I found it to be in a satisfactory condition Yes No
If "No" I request the following items be attended to prior to my tenancy, subject to the Lessor's approval.

Declaration

I declare that the Application information provided is true and correct. I consent to this Application being verified and to the access of Tenancy Information Centre of Australia and National Tenancy Database records for information about my tenancy history if applicable. I apply for approval to rent the premises referred to in this form and acknowledge that my Application will be referred to the Lessor of the Property for consideration. I declare that I am not bankrupt or an undischarged bankrupt.

I have inspected the premises and apply for tenancy for a period of _____ months, at a rental of \$ _____ per week commencing on _____ / _____ / _____.

I understand that if this Application is approved by the Lessor:

- I, or the nominated Applicant, will be notified within 24-48 business hours of the application status.
- Arrangements must be made for all approved Applicants to sign the General Tenancy Agreement. The amount paid to the Agent equal to 6 weeks rent within 24 hours of the approval.
- Pre-moving in costs as itemised below are to be paid by **INTERNET TRANSFER, BANK CHEQUE OR MONEY ORDER.**

ITEM	CALCULATION	\$ PAYABLE	IMPORTANT NOTES
Rent – first 2 weeks rent	2 x \$	= \$	must be paid within 24 hours of Application approval
Bond – 4 times weekly rent NB: If rent is over \$500pw, Bond is specified on rent list	4 x \$	= \$	must be paid within 24 hours of Application approval.

TOTAL PRE-MOVING IN COST \$ _____ Must be paid BEFORE lease commences

APPLICANT'S SIGNATURE	Date	

