



2 Applicants

## TENANCY APPLICATION

Our office welcomes your application and any queries you may have about the property, tenancy or process. The following information and checklist will assist you to complete the Tenancy Application so it can be processed promptly.

- One Application is to be completed per person
- This application cannot be processed until it is FULLY completed including copies of supporting documents attached as required and 100 point identification check.
- Please refer to the following list of acceptable documents and point value of each.

### Proof of Identity

|           |                                                                                                           |
|-----------|-----------------------------------------------------------------------------------------------------------|
| 40 points | Drivers Licence, Passport, 18+ Card (each applicant must provide one of these or other suitable photo ID) |
| 40 points | Last 4 rent receipts; Tenant ledger                                                                       |
| 30 points | Other Photo ID; Bank Statement; Recent utility bill eg. electricity, phone or gas                         |
| 10 points | Medicare Card, Birth Certificate, Motor Vehicle registration papers                                       |

**You are also required to supply to the Lessor/Agent with proof of income with this application.**

**Employed:** Last TWO payslips; any other proof of income.

**Self Employed:** Accountant's letter; bank statements; Group Certificate.

**Not Employed:** Centrelink Statement; other proof of income.

### Successful Applications

**If the Lessor/Agent has approved the application**, which we try to do within 24-48 hours of submission, we will phone you and make an appointment for all interested parties to come to the office to secure the premises and sign all documents.

We ask that **you pay the first two (2) week's rent** at this appointment, by cash or bank cheque/money order. All documents, including the 17A (Information Statement) and 18A (Lease Agreement) will be provided at this appointment.

**This procedure must be done within 24 hours of approval.** If you have any questions or require further information, please refer to our Property Management Staff. We are here to help.

Your rental bond – equivalent to four (4) week's rent - is payable before taking possession of the property. This may be paid at any time up to collection of the keys at the start of the tenancy. The bond must also be in cash or bank cheque/money order.

If you are applying for a Bond Loan with Department of Housing, please advise us at this appointment.

Property Address: \_\_\_\_\_

Lease Term: \_\_\_\_\_ months Starting: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Rental amount: \$ \_\_\_\_\_ p/w

Lease to be in the names of: \_\_\_\_\_

(All adults to reside at the property must be listed)

**Personal Details****APPLICANT 1**

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Surname: \_\_\_\_\_ Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Current Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Drivers Licence No: \_\_\_\_\_ State of Issue: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Home Ph: \_\_\_\_\_ Mobile Ph: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Current Agent / Lessor**

Name of Agent/Lessor: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax/Email: \_\_\_\_\_

Time period at premises: \_\_\_\_\_ years \_\_\_\_\_ months Rent per week: \$ \_\_\_\_\_

**Previous Address**

Property Address: \_\_\_\_\_

Name of Agent/Lessor: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax/Email: \_\_\_\_\_

Time period at premises: \_\_\_\_\_ years \_\_\_\_\_ months Rent per week: \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Was bond refunded in full: YES / NO If no, why not: \_\_\_\_\_

**Employment**

**ARE YOU CURRENTLY EMPLOYED:** YES / NO Full time / Part time / Casual / Other: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone / Email: \_\_\_\_\_

Net Weekly Income: \$ \_\_\_\_\_ Length of Employment: \_\_\_\_\_ years \_\_\_\_\_ months

**IF YOU ARE CURRENTLY UNEMPLOYED:** What is your Centrelink payment: \_\_\_\_\_ Net weekly payment: \$ \_\_\_\_\_  
(A Centrelink statement will need to be provided to our office to substantiate this amount before your application can be processed)

**IF YOU ARE CURRENTLY SELF EMPLOYED:** What is your occupation: \_\_\_\_\_ Net weekly income \$ \_\_\_\_\_

Name of Business: \_\_\_\_\_ ABN: \_\_\_\_\_

Address: \_\_\_\_\_

How long have you operated the business: \_\_\_\_\_ years \_\_\_\_\_ months Gross weekly earnings (approx) \$ \_\_\_\_\_

Your accountant must complete the "Self Employment Confirmation Form" and return to our office via fax or email asap, as we cannot process your application until we receive this back.

**Emergency Contact / Parents/ Guardians (Must be different to other relatives listed)**

|                        |                     |
|------------------------|---------------------|
| Name: _____            | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |

**Personal References (Please do not list relatives or partners, and provide business hours contact numbers)**

|                        |                     |
|------------------------|---------------------|
| 1. Name: _____         | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |
| Email Address: _____   |                     |
| 2. Name: _____         | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |

**Other Relative/s not living with you (These persons must be a different contact to your emergency contact)**

|                        |                     |
|------------------------|---------------------|
| 1. Name: _____         | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |
| Email Address: _____   |                     |
| 2. Name: _____         | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |
| Email Address: _____   |                     |

**Other Information**

|                                                 |                               |              |               |
|-------------------------------------------------|-------------------------------|--------------|---------------|
| Names of children (if any):                     |                               |              |               |
| Name: _____                                     | Date of Birth: ____/____/____ | Age: _____   |               |
| Name: _____                                     | Date of Birth: ____/____/____ | Age: _____   |               |
| Name: _____                                     | Date of Birth: ____/____/____ | Age: _____   |               |
| Details of Vehicles to be kept at the property: |                               |              |               |
| Registration No: _____                          | Make: _____                   | Model: _____ | Colour: _____ |
| Registration No: _____                          | Make: _____                   | Model: _____ | Colour: _____ |

**Pets**

|                                                                     |              |               |                      |
|---------------------------------------------------------------------|--------------|---------------|----------------------|
| Do you have any pets: YES / NO    If yes, please list details below |              |               |                      |
| Type: _____                                                         | Breed: _____ | Colour: _____ | Registered: YES / NO |
| Type: _____                                                         | Breed: _____ | Colour: _____ | Registered: YES / NO |
| (Pets must be approved by the owner of the property)                |              |               |                      |

Property Address: \_\_\_\_\_

Lease Term: \_\_\_\_\_ months Starting: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Rental amount: \$ \_\_\_\_\_ p/w

Lease to be in the names of: \_\_\_\_\_

(All adults to reside at the property must be listed)

**Personal Details****APPLICANT 2**

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Surname: \_\_\_\_\_ Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Current Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Drivers Licence No: \_\_\_\_\_ State of Issue: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Home Ph: \_\_\_\_\_ Mobile Ph: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Current Agent / Lessor**

Name of Agent/Lessor: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax/Email: \_\_\_\_\_

Time period at premises: \_\_\_\_\_ years \_\_\_\_\_ months Rent per week: \$ \_\_\_\_\_

**Previous Address**

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Name of Agent/Lessor: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax/Email: \_\_\_\_\_

Time period at premises: \_\_\_\_\_ years \_\_\_\_\_ months Rent per week: \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Was bond refunded in full: YES / NO If no, why not: \_\_\_\_\_

**Employment**

**ARE YOU CURRENTLY EMPLOYED:** YES / NO Full time / Part time / Casual / Other: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone / Email: \_\_\_\_\_

Net Weekly Income: \$ \_\_\_\_\_ Length of Employment: \_\_\_\_\_ years \_\_\_\_\_ months

**IF YOU ARE CURRENTLY UNEMPLOYED:** What is your Centrelink payment: \_\_\_\_\_ Net weekly payment: \$ \_\_\_\_\_  
(A Centrelink statement will need to be provided to our office to substantiate this amount before your application can be processed)

**IF YOU ARE CURRENTLY SELF EMPLOYED:** What is your occupation: \_\_\_\_\_ Net weekly income \$ \_\_\_\_\_

Name of Business: \_\_\_\_\_ ABN: \_\_\_\_\_

Address: \_\_\_\_\_

How long have you operated the business: \_\_\_\_\_ years \_\_\_\_\_ months Gross weekly earnings (approx) \$ \_\_\_\_\_

Your accountant must complete the "Self Employment Confirmation Form" and return to our office via fax or email asap, as we cannot process your application until we receive this back.

**Emergency Contact / Parents/ Guardians (Must be different to other relatives listed)**

|                        |                     |
|------------------------|---------------------|
| Name: _____            | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |

**Personal References (Please do not list relatives or partners, and provide business hours contact numbers)**

|                        |                     |
|------------------------|---------------------|
| 1. Name: _____         | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |
| Email Address: _____   |                     |
| 2. Name: _____         | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |

**Other Relative/s not living with you (These persons must be a different contact to your emergency contact)**

|                        |                     |
|------------------------|---------------------|
| 1. Name: _____         | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |
| Email Address: _____   |                     |
| 2. Name: _____         | Relationship: _____ |
| Current Address: _____ |                     |
| Home Ph: _____         | Mobile Ph: _____    |
| Email Address: _____   |                     |

**Other Information**

|                                                 |                               |              |               |
|-------------------------------------------------|-------------------------------|--------------|---------------|
| Names of children (if any):                     |                               |              |               |
| Name: _____                                     | Date of Birth: ____/____/____ | Age: _____   |               |
| Name: _____                                     | Date of Birth: ____/____/____ | Age: _____   |               |
| Name: _____                                     | Date of Birth: ____/____/____ | Age: _____   |               |
| Details of Vehicles to be kept at the property: |                               |              |               |
| Registration No: _____                          | Make: _____                   | Model: _____ | Colour: _____ |
| Registration No: _____                          | Make: _____                   | Model: _____ | Colour: _____ |

**Pets**

|                                                                     |              |               |                      |
|---------------------------------------------------------------------|--------------|---------------|----------------------|
| Do you have any pets: YES / NO    If yes, please list details below |              |               |                      |
| Type: _____                                                         | Breed: _____ | Colour: _____ | Registered: YES / NO |
| Type: _____                                                         | Breed: _____ | Colour: _____ | Registered: YES / NO |
| (Pets must be approved by the owner of the property)                |              |               |                      |

The tenant/s agrees to the following conditions:

- ☐ Rent must be kept 2 weeks in advance at all times. Rental arrears will not be tolerated and should rent arrears be continuous, the tenancy may not be renewed at the end of the lease.
- ☐ The tenant/s understand that if paying rent by direct deposit or internet transfer, two working days must be allowed for processing of rental payments. The tenant/s further understands that failure to reference either their surname or the property address on their transfer/deposit will not allow the rental payment to be processed.
- ☐ Fourteen (14) days written notice on RTA Form 13 must be given prior to vacating the premises. In the event the tenant/s wish to break their fixed term tenancy agreement the tenant/s agree to continue paying rent until new tenant/s are found or lease expires, whichever happens first. The tenant's agree to pay the break lease fee of one (1) weeks rent + GST and to keep up expenses until new tenant/s move into the property. All tenant/s will be required to sign the break lease documents.
- ☐ The tenant/s understands and agrees not to add any fixtures to the property without consent of the Lessor/Agent.
- ☐ The tenant/s agree to regularly mow and trim lawns (if applicable), weed gardens and trim hedges/shrubs, water lawns and gardens (subject to council water restrictions).
- ☐ The tenant/s acknowledge that if the premises are individually metered for water and deemed water efficient then water usage charges are the responsibility of the tenant/s, and you will be billed accordingly.
- ☐ The tenant/s understands and agrees that there is NO SMOKING inside the premises at any time.
- ☐ The tenant's understands and agrees to ensure ALL approved pets remain strictly OUTSIDE ONLY unless agreed in writing by the Lessor/Agent.
- ☐ If the tenant/s is not available to attend routine inspections and should we not be notified in writing, keys will be used to gain access.
- ☐ At the termination of the tenancy agreement, the tenant/s agree to supply to the Lessor/Agent the following:
  - All keys to the property – including any cut during the tenancy
  - A receipt from a reputable pest control company for internal pest control.
  - External flea control of the property must be carried out but only applies to properties with pets.
  - A receipt from a reputable carpet cleaning company for all carpets.
- ☐ The tenant/s understands and agrees that if the above items have not been attended to prior to the final inspection, professional contractors will be engaged and the costs deducted from the bond as well as any rent owing, damage, and any cleaning not rectified within 2 working days.
- ☐ The tenant/s understands and accepts full responsibility for any animal that the tenant/s brings or allows upon the rented premises with or without the consent of the Lessor/Agent. The tenant/s will be solely responsible for any loss, damage or injury suffered by any person who is attacked by the animal. If action is brought against the Lessor/Agent by any person despite the tenant being responsible as foresaid, the tenant will indemnify and hold harmless the Lessor/Agent from any claim, action, suit or demand brought against them by any person injured by the animal.
- ☐ The tenant/s understands and agrees that if pets are approved, any damage to the grounds or the residence will be fixable at your expense, this included cleaning of blinds/curtains for pet hair if not attended to prior to handover.
- ☐ The tenant/s understands and agrees that if they are paying by direct deposit that it is their responsibility to cancel this with their financial institution at the end of the tenancy. Failure to do so may result in overpayment of rent and a delay in refunding these funds to you.
- ☐ The tenant/s acknowledges that the tenancy information and their contact details will be made available to the following people when needed: Nanak Sai Staff, Pest/Building Inspectors, Tradespersons, Police, Ambulance and Fire Department. If further persons request your details, due to privacy laws we will receive your instructions before providing the information.

Signed: \_\_\_\_\_

Signed: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**APPLICANT'S DECLARATION**

I have inspected the property located at \_\_\_\_\_

I wish to undertake a tenancy for a period of \_\_\_\_\_ to commence on the \_\_\_\_\_

at a rental price of \$\_\_\_\_\_ per week. I understand that I am to pay a rental bond of \$\_\_\_\_\_ on or before I take possession of the premises.

Please answer YES / NO to the following declarations:

|                                                                                                                                                                                                                      |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| The applicant acknowledges that they have received or have available to them from the Lessor/Agent the form 17A, 18A, body corporate bylaws (if applicable) and the "Special Terms" before signing this application. | YES / NO |
| The applicant acknowledges that they have been made aware of the Agency's Privacy Policy.                                                                                                                            | YES / NO |
| The applicant acknowledges that the Lessor and applicant (tenant) are bound by this agreement immediately upon communication of the Lessor/Agents acceptances of this application.                                   | YES / NO |
| Have you ever been evicted by a Lessor/Agent?                                                                                                                                                                        | YES / NO |
| Are you in debt to any other Lessor/Agent?                                                                                                                                                                           | YES / NO |
| Is there any reason known to you that would affect your ability to pay rent?                                                                                                                                         | YES / NO |

**PRIVACY STATEMENT**

I, the applicant, declare that the above information is true and correct and that I have supplied it of my own free will. I acknowledge that my personal contents insurance is not covered under any Lessor Insurance policy/s and understand that it is my responsibility to insure my personal belongings. I understand that you as the Lessor/Agent have collected this information for the purpose of determining whether I am a suitable tenant for the property – in particular to check my identification, my ability to care for the property, my character and my credit worthiness. For such purposes, I authorise you to contact the persons named in this application and to undertake such enquiries and searches (including tenancy database searches) as you consider reasonably necessary. In doing so, I understand that information provided by me may be disclosed to, and further information obtained from, referees named in this application and other relevant third parties. I acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide reasons as to why. I also consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the Lessor/Agent to pass my details onto others which may include (but is not limited to) insurance companies, body corporate, contractors, other real estate agents, sales people and tenancy default databases.

Signed: \_\_\_\_\_

Signed: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_