

Application for Residential Tenancy

(One application to be completed per person)

PART 1: RENTAL PROPERTY DETAILS

ITEM 1: AGENT DETAILS

AGENCY NAME:

Kendall Real Estate

ADDRESS: 10 Main Street

SUBURB: NORTH TAMBORINE

STATE: QLD POSTCODE: 4272

PHONE:

07 5545 5000

MOBILE:

FAX:

07 5545 5050

EMAIL:

cath.norris@tamborinemountainrealestate.com.au

ITEM 2: PROPERTY DETAILS

ADDRESS:

SUBURB:

STATE: POSTCODE:

Rent: \$ Rent period: ← weekly / fortnightly / monthly Bond: \$

Tenancy Term: ☐ Fixed term agreement ☐ Periodic agreement

Starting on: Ending on:

PART 2: APPLICANT DETAILS

ITEM 3: CONTACT DETAILS

FULL NAME:

DATE OF BIRTH:

Have you been known by any other name(s)? ☐ Yes ☐ No

If Yes, what other name(s) have you been known by?

WORK PHONE:

MOBILE:

HOME PHONE:

EMAIL:

Driver's Licence/passport number: State:

Number of vehicles: Registration number(s):

ITEM 4: DEPENDANTS

Do you have any dependants? ☐ Yes ☐ No

DEPENDANT FULL NAME(S):

RELATIONSHIP TO APPLICANT:

DEPENDANT DATE OF BIRTH:

ITEM 5: SMOKING

Are you or any of the dependants living with you a smoker? ☐ Yes ☐ No

ITEM 6: PETS

Do you intend to keep pets at the property? ☐ Yes ☐ No Number of pets:

Type of Pet/s: Are your pets registered with a council? ☐ Yes ☐ No

If Yes, please state which council:

INITIALS

ITEM 7: APPLICANTS ADDRESS HISTORY

CURRENT RESIDENTIAL ADDRESS:			
SUBURB:		STATE:	POSTCODE:
PERIOD OF OCCUPANCY:	TYPE OF OCCUPANCY:		
	<input type="checkbox"/> Rent	<input type="checkbox"/> Owner	<input type="checkbox"/> Other: →
CURRENT AGENT/LESSOR (If renting):	AGENT/LESSOR PHONE:		
CURRENT RENT	REASON FOR LEAVING:		
\$	Rent period:	← weekly / fortnightly / monthly	
PREVIOUS RESIDENTIAL ADDRESS:			
SUBURB:			
STATE:			
POSTCODE:			
PERIOD OF OCCUPANCY:	TYPE OF OCCUPANCY:		
	<input type="checkbox"/> Rent	<input type="checkbox"/> Owner	<input type="checkbox"/> Other: →
PREVIOUS AGENT/LESSOR:	AGENT/LESSOR PHONE:		
PREVIOUS RENT:	REASON FOR LEAVING:		
\$	Rent period:	← weekly / fortnightly / monthly	

ITEM 8: EMPLOYMENT DETAILS

Are you employed?		<input type="checkbox"/> Yes	<input type="checkbox"/> No (if no, please provide details of previous employer, if any)
Employment status:	<input type="checkbox"/> Full time	<input type="checkbox"/> Part time	<input type="checkbox"/> Casual
	<input type="checkbox"/> Contract	<input type="checkbox"/> Self employed	
OCCUPATION:	NET INCOME (per week)		
	\$		
DATE COMMENCED EMPLOYMENT (approx.)	DATE TERMINATED EMPLOYMENT (if any):		
EMPLOYER/BUSINESS NAME:	PHONE:		
ADDRESS:			
SUBURB:			
STATE:			
POSTCODE:			
IF SELF EMPLOYED, ACCOUNTANT'S NAME:			PHONE:

ITEM 9: CENTRELINK PAYMENTS

Are you receiving any regular Centrelink payments?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
DESCRIPTION OF PAYMENT(S):			
TOTAL INCOME (PER WEEK):	DATE PAYMENTS COMMENCED:		
\$			

ITEM 10: STUDENT DETAILS

Are you studying full time?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
NAME OF EDUCATION INSTITUTION YOU ARE CURRENTLY ATTENDING:		STUDENT IDENTIFICATION NUMBER:	
Are you an overseas student?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, Visa expiry date:			

INITIALS

ITEM 11: PERSONAL REFERENCES

Please do not list relatives, another applicant or partners and provide business hours contact numbers.

REFEREE 1:

RELATIONSHIP:

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ADDRESS:

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PHONE/MOBILE:

SUBURB:

STATE:

POSTCODE:

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REFEREE 2:

RELATIONSHIP:

--	--

ADDRESS:

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PHONE/MOBILE:

SUBURB:

STATE:

POSTCODE:

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ITEM 12: PERSONAL REPRESENTATIVE

i.e. preferred person(s) to be contacted in the event of an emergency.

REPRESENTATIVE 1:

RELATIONSHIP:

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ADDRESS:

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PHONE/MOBILE:

SUBURB:

STATE:

POSTCODE:

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REPRESENTATIVE 2:

RELATIONSHIP:

--	--

ADDRESS:

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PHONE/MOBILE:

SUBURB:

STATE:

POSTCODE:

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PART 3: SUPPORTING DOCUMENTS**ITEM 13: IDENTIFICATION**

You are required to meet a 100 point identification criterion upon submission of your application.
The Agent/Lessor may photocopy any item and retain as part of your application.

Please tick the identifying documents you have provided with your application.

IMPORTANT: At least one form of Photo Identification MUST be provided.

70 Points

☐ Passport

☐ Full birth certificate

☐ Citizenship certificate

40 Points

☐ Australian Driver's Licence

☐ Student Photo ID

☐ Department of Veterans Affairs card

☐ Centrelink card

☐ Proof of age card

☐ State/Federal Government Photo ID

25 Points

☐ Medicare card

☐ Council rates notice

☐ Motor vehicle registration

☐ Telephone bill

☐ Electricity bill

☐ Gas bill

☐ Tenancy History Ledger

☐ Bank statement

☐ Credit card statement

☐ Last FOUR rent receipts

☐ Rent bond receipt

☐ Previous tenancy agreement

ITEM 14: PROOF OF INCOME

You are also required to supply the Agent/Lessor with proof of your income upon submission of your application.

Employed: Last TWO pay slips.

Self employed: Bank statements, Group Certificate, Tax Return or Accountant's letter.

Not employed: Centrelink statement.

INITIALS

PART 4: DECLARATION

PLEASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE or FALSE

I, the Applicant

- | | | | |
|----|--|-------------------------------|--------------------------------|
| 1. | Have never been evicted by an Agent/Lessor | <input type="checkbox"/> True | <input type="checkbox"/> False |
| 2. | Have no known reasons that would affect my ability to pay rent | <input type="checkbox"/> True | <input type="checkbox"/> False |
| 3. | Was refunded the rental bond for my last address in full (if applicable) | <input type="checkbox"/> True | <input type="checkbox"/> False |

If false, please advise what deductions were made from your bond?

- | | | | |
|----|---|-------------------------------|--------------------------------|
| 4. | Have no outstanding debt to another Agent/Lessor? | <input type="checkbox"/> True | <input type="checkbox"/> False |
|----|---|-------------------------------|--------------------------------|

If false, why are you in debt to your past Agent/Lessor?

PART 5: ACKNOWLEDGEMENT

PLEASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES or NO

I, the Applicant

- | | | | |
|-----|--|------------------------------|-----------------------------|
| 1. | 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 own personal belongings. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. | Understand that you as the Agent/Lessor 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 creditworthiness. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2.1 | for such purposes, I authorise you to contact the persons named in this application, and to undertake such enquiries and searches (including tenancy databases searches) as you consider reasonably necessary. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2.2 | 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. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. | Acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide reasons as to why. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. | Consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the Agent/Lessor to pass my details onto others which may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. | Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), the Standard Terms and any special terms before completing this application. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. | Acknowledge that I have received or have available the Information Statement (Form 17a), body corporate by-laws (if applicable) before completing this application. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. | Acknowledge that I have signed the agency's Privacy Notice and Consent. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. | Acknowledge that the Lessor and Applicant (tenant) are bound by this agreement immediately upon communication of either the lessor or agent's acceptance of the application. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. | Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 of the <i>Electronic Transactions (Queensland) Act 2001 (Qld)</i> and the <i>Electronic Transactions Act 1999 (Cth)</i> . | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. | Declare that the above information is true & correct and that I have supplied it of my own free will. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Name of Applicant:

Signature:

Date: