



**REIQ** Accredited Agency

	Application for Residential Tenancy (One application to be completed per person)				
	PART 1: RENTAL PROPERTY DETAILS				
ITEM 1:	AGENT DETAILS  AGENCY NAME:  Professionals Serendipity Real Estate				
	ADDRESS: 10 Main Street  SUBURB: NORTH TAMBORINE STATE: QLD POSTCODE: 4272				
	PHONE: MOBILE: FAX: EMAIL:  07 5545 4000 07 5545 5050 rentals-tm@professionalsserendipity.com.au				
ITEM 2:	PROPERTY DETAILS				
	ADDRESS:				
	SUBURB: STATE: POSTCODE:				
	Rent: \$ Rent period: <i>\subseteq weekly / fortnightly / monthly</i> Bond: \$				
	Tenancy Term: Fixed term agreement Periodic agreement				
	Starting on: Ending on:				
	PART 2: APPLICANT DETAILS				
ITEM 3:	CONTACT DETAILS				
II EWI 3.	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 BIR	RTH:			
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				

INITIALS (Note: initials not required if signed with Electronic Signature)

ITEM 7:	APPLICANTS ADDRESS HISTORY	
	CURRENT RESIDENTIAL ADDRESS:	
	SUBURB: STATE: S	POSTCODE:
	Rent Owner Other: →  CURRENT AGENT/LESSOR (If renting):	
	AGENT/LESSOR PHONE: FAX: EMAIL:	
	CURRENT RENT REASON FOR LEAVING:  \$ Rent period: \( \square \) weekly / fortnightly / monthly	
	PREVIOUS RESIDENTIAL ADDRESS:	
	SUBURB:	POSTCODE:
	PREVIOUS AGENT/LESSOR:	
	AGENT/LESSOR PHONE: FAX: EMAIL:	
	PREVIOUS RENT:  Rent period:   Weekly / fortnightly / monthly  REASON FOR LEAVING:	
ITEM 8:	EMPLOYMENT DETAILS	
	Are you employed?  Yes  No (if no, please provide details of previous employer, if any)  Employment status:  Full time  Part time  Casual  NET INCOME (per week)  \$	yed
	DATE COMMENCED EMPLOYMENT (approx.)  DATE TERMINATED EMPLOYMENT	IT (if any):
	EMPLOYER/BUSINESS NAME:	
	ADDRESS:	
	SUBURB: STATE: POSTCODE: PHONE: FAX: EMAIL:	
	IF SELF EMPLOYED, ACCOUNTANT'S NAME:	PHONE:
ITEM 9:	CENTRELINK PAYMENTS	
	Are you receiving any regular Centrelink payments?  Yes No  DESCRIPTION OF PAYMENT(S):	
	TOTAL INCOME (PER WEEK):  DATE PAYMENTS COMMENCED:  \$	
ITEM 10:	STUDENT DETAILS	
	Are you studying full time?  Yes No  NAME OF EDUCATION INSTITUTION YOU ARE CURRENTLY ATTENDING:  STUDENT IDENTIFICATION NUMBER:	
	Are you an overseas student?	

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ITEM 11:	PERSONAL REFERENCES					
	Please do not list relatives, another applicant or partners and provide business hours contact numbers.  REFEREE 1:				RELATIONSHIP:	
	ADDRESS:					
	SUBURB:			STATE <sup>-</sup>	POSTCODE:	PHONE/MOBILE:
	REFEREE 2:				_ · · · · · · · · · · · · · · · · · · ·	RELATIONSHIP:
	ADDRESS:					
						PHONE/MOBILE:
	SUBURB:			STATE:	POSTCODE:	
ITEM 12:	PERSONAL REPR	ESENTATIVE				
	i.e. preferred pers	on(s) to be contact	ted in the event of an emerge	ency.		
	REPRESENTATIVE	<b>1</b> :				RELATIONSHIP:
	ADDRESS:					
						PHONE/MOBILE:
	SUBURB:REPRESENTATIVE			STATE:	POSTCODE:	RELATIONSHIP:
	ADDRESS:					PHONE/MOBILE:
	SUBURB:				POSTCODE:	THORE MODILE.
	PART 3: SU	PPORTING D	OCUMENTS			
ITEM 13:	IDENTIFICATION					
	You are required The Agent/Lessor	to meet a 100 poin may photocopy ar	t identification criterion upon ny item and retain as part of y	submission of yo your application.	ur application.	
	Please tick the ide	entifying documents	s you have provided with you	ır application.		
	IMPORTANT: At	least one form of	Photo Identification MUST	be provided.		
	70 Points					
	Passport		Full birth certificate	Cit	izenship certificate	
	40 Points					
	Australian Dri		Student Photo ID		partment of Veterans Aff	
	Centrelink ca	rd	Proof of age card	Sta	ate/Federal Government	Photo ID
	25 Points					
	Medicare care	d	Council rates notice	Mo	tor vehicle registration	
	Telephone bil	I	Electricity bill	Ga	s bill	
	Tenancy Histo	ory Ledger	Bank statement	Cre	edit card statement	
	Last FOUR re	ent receipts	Rent bond receipt	Pre	evious tenancy agreeme	nt
ITEM 14:	PROOF OF INCOM	IE .				
	You are also requ	ired to supply the A	Agent/Lessor with proof of yo	our income upon s	submission of your applic	eation.
	Employed:	Last TWO pay sli	ps.			
	Self employed:	Bank statements,	, Group Certificate, Tax Retu	rn or Accountant'	s letter.	
	Not employed:	Centrelink statem	nent.			

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## PART 4: DECLARATION

PLE	PLEASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE or FALSE			
I, the Applicant				
1.	Have never been evicted by an Agent/Lessor	True	False	
2.	Have no known reasons that would affect my ability to pay rent	True	False	
3.	Was refunded the rental bond for my last address in full (if applicable)	True	False	
	If false, please advise what deductions were made from your bond?			
4.	Have no outstanding debt to another Agent/Lessor?  If false, why are you in debt to your past Agent/Lessor?	True	False	
	linase, why are you in dest to your past/rigeniteessor.			
-	DT 5 TENANOV DATA DA 050			
	RT 5: TENANCY DATABASES  Agency may use the following tenancy databases to check the rental history of the Applicant/s:			
	Agency may use the following terraincy databases to check the rental history of the Applicants.			
PA	RT 6: ACKNOWLEDGEMENT			
PLE	ASE 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.	Yes	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.	ion, Yes	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.	Yes	☐ 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.	Yes	☐ No	
3.	Acknowledge and accept that if this application is denied, the Agent is not legally obliged to prov reasons as to why.	vide Yes	☐ 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 whi may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases.		☐ 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.	Yes	☐ 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.	Yes	No	
7.	Acknowledge that I have signed the agency's Privacy Notice and Consent.	Yes	No	
8.	Acknowledge that the Lessor and Applicant (tenant) are bound by this agreement immediately u communication of either the lessor or agent's acceptance of the application.	upon Yes	☐ 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> .	2 t Yes	☐ No	
10.	Declare that the above information is true & correct and that I have supplied it of my own free will	ill. Yes	☐ No	
	Name of Applicant:			
	Signature: D	Date:		

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