

TENANCY APPLICATION FORM

Acceptance of this tenancy application will not be acknowledged until
all pages are completed and signed

PROPERTY DETAILS

Address of the Property Applying for:

Rent per Week:

How long you would like to Lease the property for eg 6months/12months:

Start Date / Move in:

APPLICANT DETAILS

Full Name:

Have you been know by any other name(s): Yes No

Date of Birth:

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

Work Phone:

Mobile:

Home Phone:

Email:

Drives Licence Number:

Passport Number:

Number of Vehicles:

Registration Number(s):

DEPENDANTSDo you have any dependants: Yes No

Dependant Full Name(s)

Relationship to Applicant

Dependant Date of Birth

Are you or any of the dependants living with you a smoker: Yes No**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:

APPLICANTS ADDRESS HISTORY

Current residential address:

Period of occupancy:

Rental: Owner:

Other -

Current Agent/Lessor (if renting):

Phone:

Current Rent per week:

Reason for Leaving:

Previous residential address:

Period of occupancy:

Rental: Owner:

Other -

Previous Agent/Lessor (if renting):

Phone:

Previous Rent per week:

Reason for Leaving:

EMPLOYMENT DETAILSAre you employed: Yes No

If no – please provide details of previous employer (if any)

Employment Status: Full Time Part Time Casual Contract Self Employed

Occupation:

Net Income per Week:

Length of Employment:

Date terminated employment (if any):

Employer/Business Name:

Address:

Phone:

If Self Employed, Accountants Name:

Phone:

Are you receiving any regular Centrelink Payments: Yes No

Description of Payments:

Total income (per week):

Date payments Commenced:

Are you studying Full time: Yes No

Name of education institution you are currently attending:

Student Identification Number:

Are you an overseas student: Yes No

If yes, Visa Expiry Date:

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

Referee 1 Name:

Relationship:

Address:

Phone/Mobile:

Referee 2 Name:

Relationship:

Address:

Phone/Mobile:

Next of Kin Details – In case of Emergency - Name:

Address:

Phone/Mobile:

IDENTIFICATION

You are required to meet a 100 point identification criterion upon submission of your application.

The agent may photocopy any item and retain as part of your application.

IMPORTANT – at least one form of photo ID MUST be provided

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

40 Points:	<input type="checkbox"/> Passport	<input type="checkbox"/> Full Birth Certificate	<input type="checkbox"/> Citizenship Certificate
	<input type="checkbox"/> Driver's Licence	<input type="checkbox"/> Student Photo ID	<input type="checkbox"/> Proof of Age Card
25 Points:	<input type="checkbox"/> Medicare Card	<input type="checkbox"/> Council Rates Notice	<input type="checkbox"/> Motor Vehicle Registration
	<input type="checkbox"/> Telephone Bill	<input type="checkbox"/> Electricity Bill	<input type="checkbox"/> Rent bond Receipt
	<input type="checkbox"/> Tenancy Ledger	<input type="checkbox"/> Bank/Credit Card Statement	<input type="checkbox"/> Previous Tenancy Agreement

PROOF OF INCOME

You are also required to supply the agent with proof of your income upon submission of your application

Employed: Last TWO Pay Slips

Self Employed: Bank Statements, Group Certificate, Tax Return or Accountants Letter

Not Employed: Centrelink Statement

DECLARATION

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? True False

If false, why are you in debt to your past agent/lessor?

ACKNOWLEDGEMENT

Please acknowledge the following by signing and dating the bottom of this page - I, the Applicant,

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.

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.

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

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.

Acknowledge and accept that if this application is denied, the agent is not legally obliged to provide reasons as to why 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.

Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18A) the standard terms and any special terms before completing this application.

Acknowledge that I have received or have available the information statement (form 17a), body corporate by-laws (if applicable) before completing this application.

Acknowledge that I have been made aware of the agency's Privacy Policy

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.

Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 of the Electronic Transactions (Queensland) Act 2001 (Qld) and the Electronic Transactions Act 1999 (Cth);

Declare that the above information is true & correct and that I have supplied it of my own free will.

Name of the Applicant:

Signature:

Date:

Get your services connected FREE

connectnow.

Step 1 Select the utilities you would like connected by ticking the relevant boxes below	Step 2 Fill out you details at the bottom on this page. Sign it and give back with your application form	Step 3 Connectnow will call you within 24hours to confirm your details and connection timings
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Please tick utilities as required:

- | | | |
|--------------------------------------|--|---|
| <input type="checkbox"/> Electricity | <input type="checkbox"/> Gas | <input type="checkbox"/> Removalists |
| <input type="checkbox"/> Phone | <input type="checkbox"/> Pay TV | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Cleaning Services | <input type="checkbox"/> Trade Services |

YOUR DETAILS:

SURNAME		GIVEN NAME			
CONNECTION ADDRESS		SUBURB		P/CODE	STATE
DISCONNECTION ADDRESS		SUBURB		P/CODE	STATE
HOME PHONE		WORK PHONE		MOBILE PHONE	
EMAIL				MOVE IN DATE / /	

DECLARATION: I consent to connectnow Pty Ltd A.C.N. 79 097 398 662 arranging for the connection of the nominated home services and to providing information contained in this application to the service providers. I agree that neither connectnow nor the Agent accepts liability for loss caused by delay in, or failure to connect/disconnect or provide the nominated services. The service will be activated according to the applicable regulations, service provider time frames and terms & conditions once the client has agreed to use the chosen service provider. I authorise the obtaining of a National Metering Identifier on my address to obtain supply details. **It is the responsibility of the Tenant to ensure that the Main Electricity Switch is in the "Off Position" between 7am & 7pm on the day connection is required and that there is easy access to the property.** While the connectnow service is FREE, standard service provider connection fees and charges still apply. You pay NO extra charges as a result of using the connectnow service. I acknowledge that the terms and conditions of the service provider bind me and that after hours connections may incur additional service fees from service providers. I acknowledge that connectnow will be paid a fee by the service provider and will be paying a fee to the Agent for the service being provided to me. **Note:** Connection of your utilities will only be initiated once a representative has discussed your connection with you and obtained your consent to the terms and conditions of the relevant utility service provider(s).

SIGNED		DATE	/ /	PLEASE CALL ME	
AGENT	RAINE & HORNE	AGENT BRANCH	CHERMSIDE		
PHONE	07 3350 8400	FAX	07 3359 4811		
EMAIL	chermside@rhq.com.au				

Fax this form to 1300 889 598

