



## Residential Tenancy Application Form

All sections of this form must be completed & signed for your application to be processed.

Property Address:			Postcode:		
Rent Per Week: \$	Bond Amount: \$	Have you inspected the property?: YES / NO (Please circle)			
Was the property reasonably clean?: YES / NO (Please circle)		Length of Tenancy:	Tenancy to Commence:		
How many tenants will occupy the property?	Adults:	Children:	Ages:	Pets: Yes / No (Circle)	.
Pet Type:			Outdoor only: YES / NO		
Pet Type:			Outdoor only: YES / NO		
Vehicle 1 Rego:	Model/Year/Colour:	Vehicle 2 Rego:	Model/Year /Colour:		

### 1. First Applicant

Title:	First Name:	Middle Initial:
Last Name:		Smoker: Yes / No
Name at Birth:		Country of Birth:
Date of Birth: / /	Age (Years / Months):	
Drivers Licence No:	State:	
Card No. (NSW only):		
Passport No:	Medicare No:	Ref:
Pension Type (If applicable):		No:
Home Phone:	Mobile Phone:	
Email:		

### 2. Rental History - Applicant 1

Current Address:		
Suburb	Postcode:	
How long at current address?	Years:	Months:
Reason for Leaving:	Rent per week: \$	
Landlord/Agent Name:	Phone:	
Email:	Fax:	
Previous Address:		
Suburb:	Postcode:	
Length at previous address?	Years:	Months:
Reason for Leaving:	Rent per week: \$	
Landlord/Agent Name:	Phone:	
Email:	Fax:	
Bond refunded: Yes / No	If not, why?:	

### 3. Employment Details - Applicant 1

Occupation:	Employers Name:	
Employment Address:		
Suburb:	Postcode:	
Employer Phone No:	Contact Name:	
Length at current employment	Years:	Months:
Net Income \$	Per Week/Per Month (Please circle)	
Are you self-employed? Yes / No	ABN:	
Accountant Name:	Phone:	

### 1. Second Applicant AND/OR Partner

Title:	First Name:	Middle Initial:
Last Name:		Smoker: Yes / No
Name at Birth:		Country of Birth:
Date of Birth: / /	Age (Years / Months):	
Drivers Licence No:	State:	
Card No. (NSW only):		
Passport No:	Medicare No:	Ref:
Pension Type (If applicable):		No:
Home Phone:	Mobile Phone:	
Email:		

### 2. Rental History - Applicant 2

Current Address:		
Suburb	Postcode:	
How long at current address?	Years:	Months:
Reason for Leaving:	Rent per week: \$	
Landlord/Agent Name:	Phone:	
Email:	Fax:	
Previous Address:		
Suburb	Postcode	
Length at previous address?	Years:	Months: .
Reason for Leaving:	Rent per week: \$	
Landlord/Agent Name:	Phone:	
Email:	Fax:	
Bond refunded: Yes / No	If not, why?:	

### 3. Employment Details - Applicant 2

Occupation:	Employers Name:	
Employment Address:		
Suburb:	Postcode:	
Employer Phone No:	Contact Name:	
Length at current employment	Years:	Months:
Net Income \$	Per Week/Per Month (Please circle)	
Are you self-employed? Yes / No	ABN:	
Accountant Name:	Phone:	

## 5. Referees - Applicant 1 - (NOT co-applicant)

1. Reference Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Mobile No: \_\_\_\_\_

2. Reference Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Mobile No: \_\_\_\_\_

## 6. Emergency Contact Details - (Not same as co-applicant)

Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

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

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

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

## 5. Referees - Applicant 2 - (NOT co-applicant)

1. Reference Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Mobile No: \_\_\_\_\_

2. Reference Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Mobile No: \_\_\_\_\_

## 6. Emergency Contact Details - (Not same as co-applicant)

Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

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

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

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

## 7. Please ensure you provide Min.100 points Identification - At least ONE item from EACH section is required\* - Photocopy ALL and bring originals

Section 1:	Section 2:	Section 3:
<input type="checkbox"/> (40) Drivers License <input type="checkbox"/> (40) Passport	<input type="checkbox"/> (30) Latest 3 Current Pay Slips OR Current Bank Statement <b>*(it is mandatory to provide one of the above)</b> <input type="checkbox"/> (30) Centre Link income Statement	<input type="checkbox"/> (30) Previous tenancy reference <input type="checkbox"/> (20) Previous two rent receipts <input type="checkbox"/> (20) Home owner <b>MUST SUPPLY</b> a recent rates notice <input type="checkbox"/> (10) Motor vehicle registration <input type="checkbox"/> (10) Telephone account <input type="checkbox"/> (10) Electricity account <input type="checkbox"/> (10) Gas account <input type="checkbox"/> (10) Pet rego papers <input type="checkbox"/> (10) Birth certificate <input type="checkbox"/> (10) Medicare card <b>TOTAL POINTS</b>

## 8. FREE Utilities Connections

**myconnect**

myconnect is a FREE and easy to  
use utility connection service

☒ **Yes, Please Contact Me**

☐ Interpreter required

Phone: 1300 854 478

Fax: 1300 854 479

Email: enquiry@myconnect.com.au

Web: www.myconnect.com.au

Unless I have opted out of this section, I/we:

Consent to the disclosure of information on this form to myconnect ABN 34121 892 331 for the purpose of arranging the connection of nominated utility services; consent to myconnect disclosing personal information to utility service providers for the stated purpose and obtaining confirmation of connection; consent to myconnect disclosing confirmation details (including NMI, MIRN, utility provider) to the Real Estate Agent, its employees and myconnect may receive a fee/incentive from a utility provider in relation to the connection of utility services; acknowledge that whilst myconnect is a free service, a standard connection fee and/or deposit may be required by various utility providers; acknowledge that, to the extent permitted by law, the Real Estate Agent, its employees and myconnect shall not be liable for any loss or damage (including consequential loss and loss of profits) to me/us or any other person or any property as a result of the provision of services or any act or omission by the utility provider or for any loss caused by or in connection with any delay in connection or provision of, or failure to connect or provide the nominated utilities. I acknowledge that myconnect record all calls for coaching, quality and compliance purposes.

☐ Tick here to opt out

## 9. Declaration of Authority

I hereby offer to rent the property from the owner under a lease to be prepared by the Agent. Should this application be accepted by the landlord I agree to enter into a Residential Tenancy Agreement.

I acknowledge that this application is subject to the approval of the owner/landlord. I declare that all information contained in this application (including the reverse side) is true and correct and given of my own free will. I declare that I have inspected the premises and am not bankrupt.

I authorise the Agent to obtain personal Information from:

- (a) The owner or the Agent of my current or previous residence;
- (b) My personal referees and employer/s;
- (c) Any record listing or database of defaults by tenants such as NTD, TICA or TRA for the purpose of checking my tenancy history;

I am aware that I may access my personal information by contacting -

• NTD: 1300 563 826 • TRA: (02) 9363 9244 • TICA: 1902 220 346

If I default under a rental agreement, I agree that the Agent may disclose details of any such default to a tenancy default database, and to agents/landlords of properties I may apply for in the future.

I am aware that the Agent will use and disclose my personal information in order to:

- (a) communicate with the owner and select a tenant
- (b) prepare lease/tenancy documents
- (c) allow tradespeople or equivalent organisations to contact me
- (d) lodge/claim/transfer to/from a Bond Authority
- (e) refer to Tribunals/Courts & Statutory Authorities (where applicable)
- (f) refer to collection agents/lawyers (where applicable)
- (g) conduct an ID/background check with NTD for residential tenancies and/or a credit check for commercial tenancies with the National Tenancy Database (NTD)

**I am aware that if information is not provided or I do not consent to the uses to which personal information is put, the Agent cannot provide me with the lease/tenancy of the premises.**

Printed Name Applicant 1:

Signature Applicant 1:

Date:

Printed Name Applicant 2:

Signature Applicant 2:

Date:

## 10. Payment Details Property

Property Rental Per Week	\$
Rent in Advance ( ____ weeks)	\$
Rental Bond ( ____ weeks rent)	\$
Total Due	\$

Bank Cheque / EFT - NO CASH ACCEPTED