RESIDENTIAL TENANCY APPLICATION FORM

PROPOSED PROPERTY ADDRESS:	RENT P/W: \$					
LENGTH OF TENANCY: 3 MONTHS 6 MONTHS 12 MONTH	S OTHER	COMMENCING:				
FIRST NAME: MIDDLE NAME:						
FAMILY/LAST NAME: PREVIOUS FAMILY/LAST NAME (IF APPLICABLE):						
DATE OF BIRTH: MARITAL STATUS: 18+ CARD NO.:						
DRIVERS LICENSE NO.: STATE: VEHICLE REGO. NO.: STATE:						
CAR BIKE MAKE, MODEL AND COLOUR:						
CURRENT ADDRESS:						
HOME PHONE NO.: WORK NO.:						
MOBILE NO.: EMAIL ADDRESS:						
OCCUPATION: MEDICARE NO.:						
ARE YOU OR ANY OF THE DEPENDENTS RESIDING WITH YOU, SMOKERS? YES NO						
THE PROPERTIES MANAGED BY THIS OFFICE MAY		Y THE				
BARGLAY MIS PROTECT & PROTECT PLAN.						
RENT @ \$ PAYABLE FOR A TERM OF MONTHS, COMMENCING						
PAYMENT DETAILS: RENT (2 WEEKS IN ADVANCE) FROM/ TO/ TO/ \$						
BOND (EQUIVALENT TO NO LESS THAN 4 WEEKS RENT) \$						
TOTAL AMOUNT PAYABLE ON OR BEFORE/ \$						
NB: WEEKLY RENT REPRESENTS % OF TOTAL INCOME.						
BEFORE ANY APPLICATION WILL BE CONSIDERED, YOU MUST ACHIEVE A MINIMUM OF 100 POINTS						
TYPE OF I.D.	No. Of Points	COPY ATTACHED				
COPY OF RATES NOTICE (IF PREVIOUSLY OWNED PROPERTY)	50	POINTS VALUE				
RENT LEDGER FROM CURRENT MANAGING AGENT	50	POINTS VALUE				
DRIVERS LICENSE	40	POINTS VALUE				
PHOTO I.D. (18+ CARD)	30	POINTS VALUE				
PASSPORT	30	POINTS VALUE				
CURRENT CAR/BIKE REGISTRATION PAPERS	10	POINTS VALUE				
COPY OF PHONE, ELECTRICITY AND/OR GAS ACCOUNTS	10 EACH	POINTS VALUE				
MEDICARE CARD	10	POINTS VALUE				
PROOF OF INCOME - IF EMPLOYED LAST 2 X PAYSLIPS. IF SELF-EMPLOYED BANKS STATEMENT; ACCOUNTANTS DETAILS; TAX RETURN FOR PREVIOUS YEAR. IF UNEMPLOYED COPY OF CURRENT CENTERLINK STATEMENT.		RELEVANT COPIES OF DOGUMENTATION ATTACHED.				

EMPLOYMENT DETAILS IF YOU ARE EMPLOYED ARE YOU FULL TIME PART TIME CASUAL CONTRACT CONTACT PERSON: PHONE NUMBER:____ How long have you worked there:_____ Nett Weekly Income (excl. over time): \$____ IF EMPLOYED LESS THAN 6 MONTHS PLEASE PROVIDE PREVIOUS EMPLOYER: _____ _____ PHONE NUMBER:___ ADDRESS: LENGTH OF EMPLOYMENT: Position Held: IF YOU ARE SELF-EMPLOYED REGISTERED NAME OF BUSINESS:______ ABN:_____ TYPE OF BUSINESS:____ _____ Personal Nett Income p/week: \$___ PHONE NUMBER: NAME OF ACCOUNTANT:______ PHONE NUMBER:_____ LENGTH OF TIME IN BUSINESS: LIST ONE MAJOR CREDITOR: IF YOU ARE A STUDENT ARE YOU FULL TIME PART TIME ARE YOU AN OVERSEAS STUDENT YES NO IF YES VISA EXPIRY DAT IS:____/____/____ Name of learning institution:_____ Department:_____ STUDENT ID NUMBER:____ INCOME SOURCE:_____ CONTACT:_____ NETT WKL INCOME:____ IF YOU RECEIVE A CENTERLINK PAYMENT TOTAL AMOUNT RECEIVED WEEKLY (TOTAL PAYMENTS): \$_____ TYPE OF PAYMENT:_____ CRN NUMBER:____ YOUR RENTAL HISTORY CURRENT AGENT/LANDLORD: PHONE: DATE VACATED: /___/_ ADDRESS OF RENTED PROPERTY: RENT PER WEEK: \$ PERIOD OF TENANCY: REASON FOR LEAVING: WAS THE BOND REFUNDED IN FULL YES NO IF NO WHY: Previous agent/landlord:______Phone:____ _____ DATE VACATED:____/___/____ ADDRESS OF RENTED PROPERTY:_____ RENT PER WEEK: \$_____ PERIOD OF TENANCY:_____ REASON FOR LEAVING:_____ WAS THE BOND REFUNDED IN FULL YES NO IF NO WHY: EMERGENCY CONTACT (NOT RESIDING WITH YOU) RELATIONSHIP: NAME: ADDRESS: _____ Phone:____

REFERENCES

PLEASE COMPLETE ALL 5 REFERENCES REQUESTED BELOW, PLEASE DO NOT USE THE SAME CONTACT TWICE AND DO NOT USE THE SAME PERSON AS YOUR EMERGENCY CONTACT. YOUR 5 REFERENCES SHOULD INCLUDE, PARENT OR GUARDIAN, FAMILY MEMBERS NOT LIVING WITH YOU, PERSONAL FRIENDS (MUST BE AUSTRALIAN RESIDENTS) AND IF SELF EMPLOYED AT LEAST ONE ESTABLISHED TRADE OR BUSINESS REFERENCE.

1.	NAME:	RELA	TIONSHIP:	
	ADDRESS:		Known for:	YEARS/MONTHS
	HM PHONE:	Mobile:	RELATIONS	SHIP:
2.	NAME:	RELA	rionship:	
	ADDRESS:		Known for:	YEARS/MONTHS
	HM PHONE:	MOBILE:	RELATIONS	SHIP:
з.	NAME:	RELA	rionship:	
	ADDRESS:		Known for:	YEARS/MONTHS
	HM PHONE:	MOBILE:	RELATIONS	SHIP:
4.	Name:	RELA	rionship:	
	ADDRESS:		Known for:	YEARS/MONTHS
	HM PHONE:	MOBILE:	RELATIONS	SHIP:
5.	Name:	RELA	rionship:	
	ADDRESS:		Known for:	YEARS/MONTHS
	HM PHONE:	Mobile:	RELATIONS	SHIP:
WILL TH	LIST THEIR NAMES AND ERE BE ANY OTHER PEI VHO: HEY COMPLETED AT TEN	THE PROPERTY? YES AGES: RSONS LIVING AT THE PROPERT HANCY APPLICATION FORM?	Y? YES NO	
		YES NO IF YES HOW		
	LIST TYPE AND BREED		MANY:	
		YES NO IF YES RE		
		YES NO IF NO H		

DISCLAIMER / AUTHORITY

I, THE SAID APPLICANT, DO SOLEMNLY AND SINCERELY DECLARE THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT AND THAT ALL OF THE INFORMATION WAS GIVEN OF MY OWN FREE WILL. I FURTHER CONSENT TO THE LESSOR/AGENT CONTACTING AND /OR CONDUCTING ANY ENQUIRIES AND/ OR SEARCHES WITH REGARD TO THE INFORMATION AND REFERENCES SUPPLIES IN THIS APPLICATION. I, THE SAID APPLICANT, DO SOLEMNLY AND SINCERELY DECLARE THAT I AM OVER 18 YEARS OF AGE AND HAVE READ AND UNDERSTAND THE CONTENTS OF THIS AGREEMENT AND HAVE THE COMPETENCE AND CAPACITY TO ENTER INTO THIS AGREEMENT. I FURTHER DECLARE THAT I HAVE INSPECTED THE PROPERTY LOCATED AT I HAVE, OF MY OWN ACCORD, DECIDED THAT I WISH TO RENT THE AFOREMENTIONED PROPERTY COMMENCING ____/___ FOR A PERIOD OF _____ MONTHS. 2. I HAVE BEEN INFORMED, UNDERSTAND AND AGREE THAT THE RENTAL FOR THE SAID PROPERTY IS TO BE \$ PER WEEK AND IS WITHIN MY MEANS. з. I HAVE BEEN INFORMED, UNDERSTAND AND AGREE THAT THE RENTAL FOR THE SAID PROPERTY IS TO BE PAID EVERY _ AND IS TO BE PAID BY THE DUE DATE AT ALL TIMES. I HAVE BEEN INFORMED, UNDERSTAND AND AGREE THAT THE LESSOR/AGENT WILL CARRY OUT AN INSPECTION ON THE PROPERTY ON A BASIS AND | FURTHER WARRANT THAT I WILL COOPERATE FULLY TO ALLOW THIS INSPECTION TO BE CARRIED OUT. 4. I HAVE BEEN INFORMED, UNDERSTAND AND AGREE THAT THE ACCEPTANCE OF MY APPLICATION IS SUBJECT TO A SATISFACTORY REPORT BEING OBTAINED FROM INFORMATION SUPPLIED ON THE FULLY COMPLETED TENANCY APPLICATION SUBMITTED BY ME. I FURTHER CONSENT TO THE AGENT CARRYING OUT ANY ENQUIRIES NECESSARY TO PROCESS MY APPLICATION FOR TENANCY. 5. I HAVE BEEN INFORMED, UNDERSTAND AND AGREE THAT SHOULD THE LANDLORD BE PUT TO ANY EXPENSE OR EXPEND ANY MONEYS DURING THE CURRENCY OF THE TENANCY AGREEMENT OR AT THE EXPIRATION OF THE TENANCY AGREEMENT AS A CONSEQUENCE OF A BREACH BY ME IN THE PERFORMANCE AND OBSERVANCE OF THE OBLIGATIONS UNDER THE TENANCY AGREEMENT (INCLUDING BUT NOT LIMITED TO: EVICTIONS, PAYMENT OF RENT, MAINTENANCE OF THE PREMISES, MAKING GOOD ANY DAMAGE TO THE PREMISES), THAT ALL AND ANY SUCH MONEYS EXPENDED BY THE LANDLORD SHALL BE RECOVERABLE FROM ME AND PAYABLE BY ME, INCLUDING, BUT NOT LIMITED TO, LEGAL FEES, MERCANTILE AGENTS FEES, ACCOUNTANTS FEES, ETC.. 6. I FURTHER CONSENT TO THE AGENT DISCLOSING ALL PERSONAL INFORMATION THAT THEY MAY HOLD FOR THE PURPOSE OF: LISTING MY NAME WITH A DATABASE AS A RESULT OF A TRIBUNAL ORDER ENFORCING A TRIBUNAL ORDER COMMENCING RECOVERY ACTION IN RELATION TO ANY DEBT OWED AS A RESULT OF OUTSTANDING RENT, REPAIRS AND/OR DAMAGE THAT OCCURRED OR OCCURS DURING MY PERIOD OF TENANCY. 7. I HAVE BEEN INFORMED AND UNDERSTAND THAT THIS PROPERTY MAY BE COVERED BY THE BARCLAY MIS PROTECT & COLLECT PLAN AND IN THIS CASE, I FURTHER CONSENT TO THE AGENT SUPPLYING MY PERSONAL INFORMATION TO BARCLAY MIS PROTECT & COLLECT PTY LTD. I HAVE BEEN INFORMED, UNDERSTAND AND AGREE THAT SHOULD THIS APPLICATION NOT BE 8. ACCEPTED, THE AGENT IS NOT REQUIRED OR OBLIGED TO DISCLOSE WHY OR SUPPLY ANY REASON FOR THE REJECTION OF THIS APPLICATION UNLESS THE APPLICATION IS DECLINED AS A RESULT OF MY NAME BEING LISTED WITH A TENANCY DATA BASE. I HAVE BEEN INFORMED, UNDERSTAND AND CONSENT TO THE AGENT SUPPLYING ALL NECESSARY INFORMATION, AS MAY BE REQUIRED, TO ANY TENANCY DATA BASE/S THAT THEY USE, SUBJECT TO THE TENANCY DATA BASE/S COMPLYING WITH THE PROVISIONS OF THE PRIVACY ACT. FURTHER MORE I HAVE READ, UNDERSTAND AND ACCEPT THE AGENTS PRIVACY STATEMENT. 10. I HAVE BEEN INFORMED, UNDERSTAND AND ACKNOWLEDGE THAT THE AGENT HAS THE CONTACT DETAILS FOR THE TENANCY DATA BASE/S THEY USE AND THAT THE AGENT WILL SUPPLY THESE CONTACTS SHOULD I REQUEST THEM. APPLICANTS FULL NAME:

DATE:

APPLICANTS SIGNATURE:

RENTAL REFERENCE CHECK

IN ACCORDANCE WITH THE PRIVACY ACT, I THE UNDERSIGNED AUTHORISE THE RECIPIENT OF THIS FAX TO GIVE INFORMATION TO Integrity Property Management Fax 3808 8871, REGARDING MY RENTAL HISTORY.

I FURTHER UNDERSTAND THIS INFORMATION MAY BE USED TO ASSESS MY APPLICATION FOR TENANCY.

PLEASE COMPLETE THE INFORMATION BELOW AND RETURN WITH YOUR TENANCY APPLICATION FORM:-				
APPLICANTS NAME:				
PROPERTY APPLIED FOR:				
CURRENT ADDRESS:				
PERIOD OF TENANCY: RENT PAID PER WEEK: \$ No. OF OCCUPANTS:				
CURRENT AGENT/LANDLORD: CONTAGT:				
AGENT/LANDLORD PHONE: AGENT/LANDLORD FAX:				
MANAGING AGENT EMAIL ADDRESS:				
IN ORDER FOR US TO PROCESS YOUR APPLICATION WE WILL FAX THIS TO YOUR CURRENT MANAGING AGENT/LANDLORD FOR A REFERENCE CHECK. PLEASE DO NOT COMPLETE THE SECTION BELOW, THIS WILL BE COMPLETED BY YOUR CURRENT MANAGING AGENT/LANDLORD.				
DEAR AGENT/LANDLORD, PLEASE COMPLETE THE FORM BELOW AND RETURN TO OUR OFFICE TOGETHER WITH A COPY OF THE RENT LEDGER, VIA EMAIL OR FAX. THANK YOU IN ADVANCE FOR YOUR ASSISTANCE.				
NAME & POSITION OF PERSON COMPLETING THIS FORM:				
LENGTH OF TENANCY: RENT PER WEEK: \$ BOND HELD: \$				
WAS RENT PAID ON TIME: YES NO IF NO DO YOU KNOW WHY?				
WERE INSPECTIONS CARRIED OUT: YES NO DETAILS:				
Were there any problems gaining access: Tyes No Details:				
RESULTS OF INSPECTIONS:				
WHERE LAWNS AND GARDENS MAINTAINED:				
DID THE TENANT HAVE PETS				
ANY DAMAGE CAUSED BY PETS:				
WERE THE TENANTS CONSIDERATE OF NEIGHBORS:				
WERE ANY BREACH NOTICES ISSUED: YES NO TYPE:				
REASON FOR LEAVING (IF KNOWN):				
WAS THE BOND BE REFUNDED IN FULL: YES NO REASON:				
WOULD YOU RENT TO THIS TENANT AGAIN: YES NO REASON:				
SIGNATURE: DATE:				