

APPLICATION FOR RESIDENTIAL TENANCY

Property Address: _____

You are required to meet the **100 Point Identification** requirements upon submission of your application, and the agent may photocopy any item and retain as part of your application.

**If the following documents are not attached to this application, the application may not be processed.
 A copy of your Current Driver's Licence or 18+ Card must be supplied.**

40 Points:

- Driver's Licence
- Passport
- 18+ Card
- Student ID

30 Points:

- Bank statements
- Recent Utility Account
(e.g. Phone or Energy)
- Tenant Ledger

20 Points

- Medicare Card
- Birth Certificate
- Registration Form
- Healthcare Card

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

Employed: Last TWO pay slips or Letter of Offer
 Self-employed: Bank statements, Group Certificate or Profit and Loss Statement
 Not Employed: Centrelink Statement

If these documents are not available, please discuss this with the property manager.

FIRST NAME	LAST NAME	DOB:
MAIDEN NAME/OTHER NAMES USED:		SMOKER: YES / NO
DRIVERS LICENCE NO.:	STATE:	EXPIRY:
NO. OF CARS:		
MEDICARE NO.:	PASSPORT NO.:	EXPIRY:
MOBILE PH:	HOME PH:	WORK PH:
EMAIL ADDRESS:		

OTHER PERSONS TO BE LIVING AT THE PROPERTY	
FULL NAME	DOB
PETS (A Pet Application and Agreement must also be completed) (Please list Breed, Age and Number of Pets)	
NEXT OF KIN/EMERGENCY CONTACT (MUST NOT BE APPLYING)	
FULL NAME:	RELATIONSHIP:
ADDRESS:	CONTACT NO.:

RESIDENTIAL HISTORY (must provide at least 5 years)

CURRENT ADDRESS:	
REASON FOR LEAVING:	OWNER / TENANT (circle)
DATES OF OCCUPANCY:	RENT PAID:
LESSOR/AGENT:	
PHONE NO:	EMAIL/FAX:
LESSOR/AGENT ADDRESS:	

PREVIOUS ADDRESS:	
REASON FOR LEAVING:	OWNER / TENANT (circle)
DATES OF OCCUPANCY:	RENT PAID:
LESSOR/AGENT:	
PHONE NO:	EMAIL/FAX:
LESSOR/AGENT ADDRESS:	

PREVIOUS ADDRESS:	
REASON FOR LEAVING:	OWNER / TENANT (circle)
DATES OF OCCUPANCY:	RENT PAID:
LESSOR/AGENT:	
PHONE NO:	EMAIL/FAX:
LESSOR/AGENT ADDRESS:	

PREVIOUS ADDRESS:	
REASON FOR LEAVING:	OWNER / TENANT (circle)
DATES OF OCCUPANCY:	RENT PAID:
LESSOR/AGENT:	
PHONE NO:	EMAIL/FAX:
LESSOR/AGENT ADDRESS:	

EMPLOYMENT / CENTRELINK INFORMATION (written confirmation required)

EMPLOYER:	OCCUPATION:
PERIOD OF EMPLOYMENT:	NETT WEEKLY WAGE:
PAYROLL/SUPERVISOR CONTACT NO:	

IF SELF-EMPLOYED

BUSINESS NAME:	ABN:
PERIOD OF SELF-EMPLOYMENT:	NETT WEEKLY INCOME:
ACCOUNTANT CONTACT NAME AND NO.:	

REFERENCES – BUSINESS (current or previous employment)

NAME:	BUSINESS:
ADDRESS:	CONTACT NO:
NAME:	BUSINESS:
ADDRESS:	CONTACT NO:
NAME:	BUSINESS:
ADDRESS:	CONTACT NO:

REFERENCES – PERSONAL (cannot include family members)

NAME:	RELATIONSHIP:
ADDRESS:	CONTACT NO:
NAME:	RELATIONSHIP:
ADDRESS:	CONTACT NO:
NAME:	RELATIONSHIP:
ADDRESS:	CONTACT NO:

DISCLAIMER/AUTHORITY

- I, _____ declare that the information contained in this application is true and correct, and that all the information was given of my own free will.
- I have on my own accord decided I wish to rent the property at _____ for a lease term of _____ months, commencing on _____ and acknowledge the rent of \$_____ per week is within my means of support.
- I have been informed, understand and agree that the acceptance of my application is subject to a satisfactory report being obtained and I further consent to the Agent carrying out any enquiries necessary to process my application for tenancy.
- I understand that if this application is not successful, the agency is not required to provide a reason for rejection. Unsuccessful applications will be shredded within 24 hours of notification.
- If this application for tenancy is successful I acknowledge that if the Tenancy Agreement is not signed by me within 24 hours, the agency may terminate this arrangement and select another tenant.
- I understand and agree that the Lessor/Agent will carry out a Routine Inspection of the property every 3-4 months, and I further agree that I will cooperate fully to allow this inspection to be carried out.
- By signing this document, the applicant/tenant agrees to the use of electronic communications, as per the email address supplied, as a method of communication with the Agent.
- I have understand and agree that should the Landlord be put to any expense during, or at the end of my tenancy as a consequence of a breach by me in the performance and observance of my obligations under the Tenancy Agreement (including but not limited to: evictions, payment of rent, 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).
- I have been informed and understand that this property may be covered by the Barclay MIS Protect and 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 and understand that Elders Real Estate Mackay may conduct a search on Tenancy Information Centre Australia (TICA) and in this case, I further consent to the Agent supplying my personal information to TICA.

APPLICANT NAME: _____

APPLICANT SIGNATURE: _____

WITNESS NAME: _____

WITNESS SIGNATURE: _____

DATE: _____

PRIVACY DISCLAIMER

Elders Real Estate Mackay collects personal information about individuals for a range of purposes necessary for our functions or activities as a real estate agency. Our Privacy policy is available on the internet at <http://www.eldersrealestate.com.au/office/mackay/> or you can obtain a copy from our office. We are collecting this information from you for the primary purposes of assisting you in purchasing a property, assisting you to sell a property or assisting you to lease a property (either lessee or lessor). We may also directly market to you. If you do not provide your personal information to us, we may not be able to assist you. We may disclose your personal information to a number of other providers consistent with assisting you, details of which are contained in our privacy policy. Our privacy policy contains information on how you can access your personal information, seek correction of your personal information, how you may complain if you think we may have breached the Australian Privacy Principles and how we deal with complaints. Your personal information may be disclosed to overseas recipients.

In accordance with the Privacy Act, I authorise the recipient of this request to give information to ELDERS REAL ESTATE MACKAY, regarding my personal information. I understand this information will only be used to assess my application.

APPLICANT NAME: _____

APPLICANT SIGNATURE: _____

DATE: _____

OFFICE USE ONLY

Our Agency has received an Application for Tenancy of a rental property. The Applicant has provided your details as the current or previous Lessor or Lessor/s Agent, and has authorised us to collect information about the Tenancy from you / the Agency.

PLEASE COMPLETE THE DETAILS BELOW AND RETURN THE FORM TO OUR AGENCY TODAY, AS TIME IS CRITICAL TO BOTH THE APPLICANT AND LESSOR TO FINALISE THE PROCESSING OF THE TENANCY APPLICATION.

Tenant Name		
Property Rented		
QUESTIONS		ANSWERS
Period of Time Rented Through Agent	From	To
Rent Amount Paid Per Week	\$	per week/calender month
Was the Tenant listed as a lessee?	YES	NO
Did you / your Agency terminate the tenancy?	YES	NO
During the tenancy, was the Tenant ever in arrears?	YES	NO
Did the Tenant receive any Notice to Remedy's?	YES	NO
If Yes	Number of NTR's	
	Reason/s	
Were periodic inspections conducted during the tenancy?	YES	NO
Please comment on the standard of periodic inspections		
Were pets kept on the premises without permission?	YES	NO
Did the Tenant leave the property clean and tidy?	YES	NO
Was the Bond refunded in full?	YES	NO
If No – Reason/s Bond was not refunded in full		
Would you/your Agency rent to this person again?	YES	NO

PLEASE RETURN COMPLETED FORM AND A COPY OF THE TENANT LEDGER TODAY

Email: rentals@eldersmackay.com.au.

All sections of this application, including phone and fax numbers, must be completed or your application may not be processed.