Tenancy Application Form

Please be advised, this application will only be processed once ALL details have been completed and all copies of all supporting documents attached. Each applicant must submit an individual form.



#### A. AGENCY DETAILS

#### **Elders Property Management Property Manager** Address: 202 Hume Street, Toowoomba, Qld, 4350 Phone: 07 4633 9400 07 4633 6555 Fax: toowoombareception@eldersre.com.au Email: PROPERTY DETAILS В. Address of Property: fortnight Rent: Day **Months** Month Year Lease Term: Years Lease Commencement Date: How many tenants will occupy the property?: Adults Children Ages of Children PERSONAL DETAILS C. Please give us your details Ms Miss Mrs Other **Date of Birth** Surname Given Name/s **Driver's licence state** Driver's licence number Driver's licence expiry date Passport no. Passport country Please provide your contact details Mobile phone no. Home phone no. **Email address** Work phone no. What is your current address? APPLICANT HISTORY D. How long have you lived at your current address? **Years Months** Why are you leaving this address? Landlord/Agent details of this property (if applicable) **Weekly Rent Paid** Landlord/agent's phone no. Name of landlord or agent What was your PREVIOUS residential address? How long did you live at this address? **Years Months** Landlord/Agent details of this property (if applicable) **Weekly Rent Paid** Name of landlord or agent Landlord/agent's phone no. \$ Was bond refunded in full? If not why not?

E. EMPLOYMENT HISTORY					
Please provide your employment details		What is the nature of your employment? (circle)			
What is your occupation?		FULL TIME PART TIM	ME CASUAL		
Employer's name (BAS if self employed, institution if stu	dent, or Centrelink)				
Employer's address (accountant if self employed, insti	tution if student, or Centre	link)			
Contact name		Phone no.			
Length of employment Years	Months	NETT Weekly Income \$			
Please provide your PREVIOUS employmen	t details				
Occupation?		Employer's name			
Length of employment Years	Months	NETT Weekly Income			
	F. CONTA	CTS/REFERENCES			
Please provide a emergency contact in case of er	nergency				
Full name	Phone	Relationship to yo	u		
Please provide 2 personal references (not re	elated to you)				
1. Surname Given name	/s	2. Surname	Given name/s		
Relationship to you Phone no.		Relationship to you	Phone no.		
	G. OTHE	R INFORMATION			
Car Registration(s)		Please provide details of any pets Breed/type Council			
Are you a smoker? No Yes					
H. PAYMENT DETAI	LS	I. 100 Points o	f ID Required		
Property Rental		We require 100 Points of ID.			
\$ per week		You must have: 1. A current drivers Licence or other 2. Current proof of income 3. Current rent ledger (if renting)	photo ID		
Rental Bond (4 weeks rent):	\$	Application without 100 Points	of ID will not be accepted.		
·		Your 100 Poi			
First payment of rent in advance (3 weeks rent)	\$	Drivers Licence Passport	40 Points ☐ 40 Points ☐		
Sub Total	\$	Birth Certificate/Extract	30 Points		
Amount payable on signing tenancy agreement	\$	Other PhotoID Current proof of income	30 Points ☐ ☐ ☐ ☐		
	*	Previous Landlord Reference Rent Ledger from other Agent	20 Points ☐ 20 Points ☐		
		Motor Vehicle Registration Certifica	te 10 Points 🗌		
		Bank Statement / Bank Card Phone / Electricity/ Gas Account	10 Points ☐ 10 Points ☐		
		Pension Card	20 Points		
		Medicare / Health Care Card Rates Notice (Proof of Ownership)	10 Points ☐ 20 Points ☐		
			_		
		Signature of Landlords Agent	Date		

## Once we have received this application we will call you to

Direct Connect will make all reasonable efforts to contact you within 24 hours of the nearest working day on receipt of this Application to confirm the information on this Application and explain the details

3	DIRECT CONNECT

Please	tick	utilities	as	required
riease	LICK	uunnes	as	reduired

Please tick ut	ilities as re	equired					
Electricity	Gas	Internet	Phone	Pay TV	Insurance	Removals	MAKES MOVING EAS

**DECLARATION AND EXECUTION:** By signing this application, I/we: consent to Direct Connect arranging for the connection and disconnection of the nominated utility services and to providing information contained in this application to utility providers for this purpose; acknowledge having been provided with terms and Conditions of Supply of Direct Connect and having read and understood them together with the Privacy Collection Notice set out below; declare that all the information contained in this application is true and correct and given of their own free will; expressly authorise Direct Connect to provide any information disclosed in this Application to a supplier or potential supplier of the Services in accordance with the Privacy Collection Notice and to obtain any information necessary in relation to the Services; expressly authorise Direct Connect to provide any information disclosed in this Application to an information provider for the purpose of that information provider disclosing it to a supplier or potential supplier of the Services in accordance with the Privacy Collection Notice and to obtain any information necessary in relation to the Services; consent to Direct Connect contacting me by telephone or by SMS in relation to the marketing or promotion of all of the services listed under the heading "Utility Connections" above even if we/I have not applied for the connection of those services in this application. This consent will continue [for a period of 1 year from the date of our/my execution of this application/until [28] days after we/l disconnect the last of the services in respect of which this application is made]; acknowledge that this consent will permit Direct Connect to contact us/me even if the telephone numbers listed on this application form are listed on the Do Not Call Register; understand that under the requirements of the Privacy Act 1988, Direct Connect will ensure that all personal information obtained about me/us will be appropriately collected, used, disclosed and transferred and will be stored safely and protected against loss, unauthorised access, use, modification or disclosure and any other misuse; authorise the obtaining of a National Metering Identifier (NMI) for my residential address to obtain supply details; consent to Direct Connect disclosing my/our details to utility providers (including my/our NMI and telephone number); declare and undertake to be solely responsible for all amounts payable in relation to the connections and/or supply of the Services and hereby indemnify Direct Connect and its officers, servants and agents and hold them indemnified against any charges whatsoever in respect of the Services; acknowledge that, to the extent permitted by law, Direct Connect 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 the services or any act or omission by the utility provider or for any loss caused by or in connection with any delay in connection, disconnection or provision of, or failure to connect or disconnect or provide, the nominated utilities; acknowledge that whilst Direct Connect is a free service I/we may be required to pay standard connection fees or deposits required by various utility providers; acknowledge that the Services will be provided according to the applicable regulations and that the time frames and terms and conditions of the nominated utility providers bind me/us and that after hours connections may incur additional service fees from utility providers; acknowledge that the real estate agent listed on this application form may receive a benefit from Direct Connect in connection with the provision of the service being provided to me/us by Direct Connect; and acknowledge the entitlement of Direct Connect and its associates, agents and contractors, to receive a fee or remuneration from the utility provider and that such fee or remuneration will not be refunded to me as a rebate in connection with the provision of the utility connection services. By signing this application form, I warrant that I am authorised to make this application and to provide the consents, acknowledgements, authorisations and other undertakings set out in this application form on behalf of all applicants listed in this application form.

Signature	Date	
	<b>'</b>	

PO Box 1519, Box Hill, Victoria 3128. P: 1300 664 715 F:1300 664 185. www.directconnect.com.au

## **DECLARATION**

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;
- 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) complete a credit check with TICA (Tenancy Information Centre Australia)

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. I am aware that I may access personal information on the contact details above.

Signature	Date	

## **RENTAL REFERENCE REQUEST**



# Elders Real Estate 202 Hume Street Toowoomba 4350

PH: 4633 9400 Fax:4637 9599 email: toowoombareception@eldersre.com.au

	I		
authorise the below information to be provided			rmation to be provided
to Elders Toowoomba to allow processing of my			allow processing of my
rental application for tenancy.	rental ap	plication for ter	nancy.
Signed:	Signed:		
Date:	Date:		
Date.	Date.		
ATTN: Property Management Department	PLEASE F	AX BACK ASAP	TO: (07) 4637 9599
Date:			
Dutc.			
From: Elders Real Estate Toowoomba			
Tenants Name:			
Tenunes Nume.			
Rental Property Address:			
Rented from to			
Rent Paid per week:			
Is the above applicant an approved occupant or tenant?	2	Occupant/Ten	ant
Is the above applicant an approved occupant of tenant:		Yes/No	anı
Did your office terminate the tenancy?	iciit;	Yes/No	
During the tenancy was the applicant ever in arrears?		Yes/No	
Was the applicant issued with Notices to Remedy?		Yes/No	If yes, how many:
Was the applicant issued with Notices to Kemedy!  Was the applicant issued with Notices to Leave?		Yes/No	If yes, how many:
Were periodics inspections satisfactory?		Yes/No	11 yes, 110w 111any.
Were pets kept on the premises?		Yes/No	
If vacated, were there any deductions from the rental be	ond?	Yes/No	
If yes, please give reasons for deductions:	,01141.	103/110	
77,1			
References:			
Would your agency rent to the applicant again?		Yes/No	
Signature on behalf of agency		-	
Property Manager Name:			
Signatura			
Signature:			