



PROPERTY DETAILS—Property you would like to rent if this application is accepted?

Property you would like to rent?: _____ Post Code: _____

Rent Per Week: \$ _____ Rent Per Calendar Month: \$ _____ Bond Amount: \$ _____

Length of Tenancy: ____ Years ____ Months Tenancy to Commence: ____/____/____

How many tenants will occupy the property?: Adults ____ Children ____ Ages _____

Inspected the property?: Yes ☐ No ☐ Do you accept the property in its current condition? Yes ☐ No ☐

Pets: Yes/No (circle) Types: _____ Reg? Y/N Breed/s: _____ Ages: _____

Applicant & Contact Details

Salutation _____ (Mr, Mrs, Ms, Miss, Dr, Other) First Name: _____

Family/Last Name: _____

Date of Birth : ____/____/____ Drivers Lic #: _____ Expiry Date: ____/____/____ License State: _____

Vehicle Registration: _____ State: _____ Passport No : _____ Passport country: _____

Home Phone: _____ Mob Phone: _____ Work Phone: _____ Fax: _____

Current Address: _____ Suburb: _____ P/Code: _____

E-Mail: _____

Pension No: (if applicable) _____ Type: _____

Current Accommodation History

Are you the: ☐ Owner ☐ Renter How long at Current Address?: _____ Years ____ Months

Reason for Leaving: _____

Landlord/Agent?: _____ Phone: _____ Rent: \$ _____

Previous Accommodation History

Previous Address: _____ Suburb: _____ P/Code: _____

Were you the: Owner ☐ Renter ☐ How long at Previous Address?: _____ Years ____ Months

Reason for Leaving: _____

Landlord/Agent (If Applicable)?: _____ Phone: _____ Rent: \$ _____

Bond Refunded: Yes ☐ No ☐ If not why? _____

FREE UTILITY CONNECTIONS - This is a Free Service that quickly connects your utilities



Upon application, Fast Connect will electronically lodge your request and ensure that your utility provider has all the relevant details to connect on your requested date. Confirmation will be sent to your real estate agent. Both agent and Fast Connect may receive a commission.

	Supplier	Tick to Connect	Tick	Connection Date	Do you require:
WATER	AGL	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	Broadband Internet <input type="checkbox"/>
ELECTRICITY	AGL	<input type="checkbox"/>	<input type="checkbox"/>	<p>Applicants must sign a separate AGL acknowledgment and disclosure document before proceeding. This is signed along with property lease or payment of bond.</p> <p><small>To provide application lodgment services to our customers (you) it is necessary to collect certain information about you. Full policy is with AGL disclosure.</small></p>	Wireless Broadband <input type="checkbox"/>
GAS	AGL	<input type="checkbox"/>	<input type="checkbox"/>		Pay TV (Foxtel) <input type="checkbox"/>
TELEPHONE	TELSTRA	<input type="checkbox"/>	<input type="checkbox"/>		

Current Employment History

Current Occupation: _____ Nature of Employment: **FULL TIME / PART TIME/ CASUAL** (circle)
Employer's Trading Name: _____ Contact Name: _____ Phone: _____
Employer's Address: _____ Suburb: _____ P/Code: _____
Contact Name: _____ Phone: _____
Length of Employment: _____ Years _____ Mths Net Income: \$ _____ Weekly \$ _____ Monthly

If Self Employed

Accountant Name: _____ Ph: _____ Company Name: _____ ABN: _____
Email: _____

Previous Employment History

Previous Occupation: _____ Nature of Employment: **FULL TIME / PART TIME/ CASUAL** (circle)
Employer's Trading Name: _____ Contact Name: _____ Phone: _____
Employer's Address: _____ Suburb: _____ P/Code: _____
Contact Name: _____ Phone: _____
Length of Employment: _____ Years _____ Mths Net Income: \$ _____ Weekly \$ _____ Monthly

If you are a Student

Institution: _____ Dept: _____ Union No: _____ Student ID: _____

If You Receive a Centrelink Payment

Type: _____ Cust No: _____ Amount \$: _____ Per Fortnight

Emergency Contact

Name: _____ **Address:** _____
Home Phone: _____ **Mob Phone:** _____ **Relationship to you:** _____

References

1) Name: _____ **2) Name:** _____
Address: _____ **Address:** _____
Home Phone: _____ **Mobile Phone:** _____ **Home Phone:** _____ **Mobile Phone:** _____

Please provide us with 100 POINTS of IDENTIFICATION

Item	Points	Item	Points
Current Drivers License	50	Copy of Mobile Phone Account	20
Passport	50	Copy of Medicare Card	20
Proof of Age Card	50	Concession / Pension Card	20
Student ID Card	50	Copy of Electricity/Gas/Water account	30 each

100 POINT IDENTIFICATION CHECK—The listed identification has been photocopied and is attached to this application

DECLARATION & AUTHORITY

I hereby offer to rent the property from the owner under 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 Landlord/ Owner. I declare that all information contained in this application (including the front page) is true and correct and given of my own free will. I declare that I have inspected the premises and am not bankrupt.

I also authorize 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 the tenancy default database, and to agents/landlords of properties I may apply for in the future.

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

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 NTD (National Tenancies Database). If you wish to view your records or the information is not accurate, you can contact NTD on 1300 563 826 or www.ntb.net.au to amend or dispute the record.
- (h) Transfer water account details into my name.
- (i) Connect utilities through Fast Connect.

Please ensure you sign above Declaration & Authority

Applicant/Partner: _____ **Dated:** ____/____/____