



3 / 6 Bacardi Court MERMAID WATERS QLD 4218  
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## APPLICATION FOR RESIDENTIAL TENANCY

<b>Applicant:</b>		<b>Date:</b>	/ /
<b>Property Address:</b>			

### ACKNOWLEDGEMENTS BY APPLICANT/S

I / we, the applicant(s) do solemnly and sincerely declare that I am / we are over 18 years of age, I am / we are not bankrupt and affirm that the information herewith is true and correct in every aspect and without omission.

I / we have inspected the above property and wish to take a tenancy there for a period of \_\_\_\_\_ Number of months.

Starting from \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Proposed start date.

Renting at \$ \_\_\_\_\_ Amount per week.

I / we also undertake, upon signing the Rental Agreement, to pay a Rental Bond of \$ \_\_\_\_\_ Amount of Rental Bond.

I / we declare that the rent to be paid is within my/our means.  YES  NO

Have you ever been evicted by any Landlord or Agent?  YES  NO

Have you a debt to any other Landlord or Agent?  YES  NO

Have deductions ever been made from your Rental Bond?  YES  NO

If deductions have been made from your bond please specify the amount deducted: \$ \_\_\_\_\_

### DECLARATION

I hereby offer to rent the property from the owner under a lease to be prepared by the Agent and that this application is subject to the approval of the owner/lessor. I acknowledge that I will be required to pay first 2 weeks rent as a holding deposit on approval of this application which I understand is not refundable should I choose to not take the lease at the property. I understand that the rental bond is to be paid in full prior to collecting the keys to the property and in advance of occupying the property.

I authorise Property Network Salisbury to disclose the personal information collected about me to the owner of the property even if the owner resides outside Australia. I declare that all information within this entire application is true and correct.

**I DECLARE THAT:**

- I have read and understood all pages of this application and have accepted all conditions herewith.
- I consent to the disclosures set out in the Authority to Release Tenant Information.
- I have read the Privacy Information Statements. All details herewith have been given by my own free will.
- All the information contained in this application is true and correct.
- I authorise Property Network Salisbury to make enquiries considered necessary to verify the information disclosed in this application.
- I accept the property in its current condition, state and repair.

I understand that although Property Network collects and processes applications, the final decision on the successful applicant is made by the owner.

<b>Applicant 1.</b>	<b>Applicant 2.</b>

### UTILITY CONNECTION SERVICE

## UTILITY CONNECTION SERVICE



Phone: 1300 854 478    enquiry@myconnect.com.au  
Fax: 1300 854 479    www.myconnect.com.au

**YES, please contact me**

### **A FREE utility connection service.**

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.

**Tick here to opt out**

**SUPPORTING PROOF OF INCOME - INCLUDING CENTRELINK, MUST BE SUPPLIED WITH APPLICATION.**

<b>APPLICANT 1</b>		<b>APPLICANT 2</b>
	<b>Title</b> (Mr, Mrs, Ms, etc)	
	First Name	
	Middle Name	
	Surname	
	Current Address	
	Current Phone Number	
	Mobile Number	
	E-mail Address	
	Current Landlord or Agent	
	Landlord/Agent Phone:	
	Landlord/Agent Fax:	
	Current Rent / Week	
	Period of Occupancy	
	Reason for Leaving	

	Previous Address	
	Period of Occupancy	
	Previous Landlord/Agent	
	Previous Landlord/Agent Phone:	
	Date of Birth	
	Employer & Phone No.	
	Length of Employment	
	Occupation	
	Employer's Address	
	Personal reference	
	Personal reference	
\$ (Approx)	Salary per Week	\$ (Approx)
	Name & Address of contact in case of Emergency	
	Phone Number	

<b>APPROVED OCCUPANTS</b>		Please name ALL other occupants, including children, who will be residing at the property.	
		1.	age _____
2.	age _____	3.	age _____
		4.	age _____

Please list ALL pets which will live at the property. MUST INCLUDE BREED					
Name	Age	Breed	Name	Age	Breed
1.			2.		

# AUTHORITY TO OBTAIN TENANT INFORMATION

<b>To:</b>		<b>Fax:</b>	
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<b>Tenants Names:</b>
<b>Address:</b>

## RENTAL AGENT'S COMMENTS

**Please provide the tenant's ledger for the duration of their tenancy and respond to the following questions.**

1. Is the applicant on a current lease?	
2. When did/does lease expire?	
3. Amount of rent paid per week?	
4. Is/Was rent paid on time?	
5. Was any Form 11 or 12 Notices issued? If yes, Reason	
6. Condition of property whilst residing there.	
7. Any complaints from neighbours?	
8. Were tenants difficult to deal with?	
9. Would you rent to applicant again?	
10. Was bond fully refunded?	
11. If not, list deductions.	
12. Did the applicant have pets? Inside / Outside	

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for taking the time to provide our office with a reference.