



APPLICATION FOR TENANCY



In order to process this application all questions must be answered fully. The completion of this application is not an acceptance. Failure to fully complete this application may result in the application not being processed.

PROPERTY YOU ARE APPLYING FOR:			
DATE INSPECTED:		LEASE COMMENCEMENT DATE:	
LENGTH OF TENANCY:	<input type="checkbox"/> 6 months	<input type="checkbox"/> 12 months	<input type="checkbox"/> other: <input type="text"/>
WEEKLY RENT:	\$ <input type="text"/>		

ENTRY COST:	BOND (4x weeks rent unfurnished or 6x weeks rent furnished)	\$ <input type="text"/>
	RENT IN ADVANCE (2x weeks)	\$ <input type="text"/>
	LEASE PREPARATION FEE (\$15)	\$ <input type="text"/>
	TOTAL:	\$ <input type="text"/>

PLEASE NOTE: All initial payments must be made by either Cash / Bank Cheque / Money Order / Direct Deposit

HOW MANY OCCUPANTS ARE APPLYING?	<input type="text"/> Adults	<input type="text"/> Children
LIST OTHER NAMES (each adult applicant must fill out their own form):	<input type="text"/>	
<input type="text"/>		

HOW DID YOU FIND OUT ABOUT THE PROPERTY?	<input type="checkbox"/> www.pfrealestate.com.au	<input type="checkbox"/> www.realestate.com	<input type="checkbox"/> www.domain.com.au
	<input type="checkbox"/> Called into Office	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Sign

PRIVACY 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 is true and correct and given of my own free will.
 I declare that I have inspected the premises.
 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 organizations 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/We the applicant/s declare that I/We am/are not bankrupt and that I/We have not entered into any scheme of arrangement for payment of monies to any creditors. I/ We further declare that I/We am/are not paying off any previous rental debt.
 I/We agree and understand that in the event of this application being rejected there is no requirement at law for the agent to disclose to me/us any reason for any rejection of this application.
 I/We agree to allow the agent to photocopy the information supplied by me/us for their records.

SIGNATURE:	<input type="text"/>	PRINT NAME:	<input type="text"/>
WITNESS:	<input type="text"/>	DATE:	<input type="text"/>



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PETER FITZGERALD REAL ESTATE - 02 4226 3733

PERSONAL DETAILS:

FULL NAME:		DATE OF BIRTH:	
ADDRESS:			
HOME PHONE:		MOBILE PHONE:	
WORK PHONE:		EMAIL ADDRESS:	
DRIVERS LICENCE NUMBER:		EXP DATE:	
		STATE:	
PASSPORT NUMBER:		EXP DATE:	
		COUNTRY OF ISSUE:	
ARE YOU AN AUSTRALIAN RESIDENT? <i>(If not attach a copy of current VISA)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	ARE YOU A SMOKER?
			<input type="checkbox"/> YES <input type="checkbox"/> NO
MOTOR VEHICLE MAKE & MODEL:			
MOTOR VEHICLE REGISTRATION No:		OWNED OR FINANCED:	
DO YOU HAVE PETS:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	TYPE:
BREED:		REGISTRATION No:	

EMERGENCY CONTACT:

FULL NAME:		RELATIONSHIP TO YOU:	
ADDRESS:		PHONE NUMBER:	

PERSONAL CONTACT (Not Relative):

FULL NAME:		RELATIONSHIP TO YOU:	
ADDRESS:		PHONE NUMBER:	

CURRENT EMPLOYMENT:

ARE YOU?	<input type="checkbox"/> EMPLOYED	<input type="checkbox"/> UNEMPLOYED	<input type="checkbox"/> SELF EMPLOYED	<input type="checkbox"/> STUDENT	GROSS INCOME PER YEAR:	\$
OCCUPATION:			POSITION:			
EMPLOYERS NAME: <i>(Include accountant if self employed)</i>						
CONTACT NAME:		CONTACT NUMBER:				
LENGTH OF EMPLOYMENT:		TYPE:	<input type="checkbox"/> FULL TIME	<input type="checkbox"/> PART TIME	<input type="checkbox"/> CASUAL	



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YOUR PREVIOUS EMPLOYMENT:

WERE YOU?	<input type="checkbox"/> EMPLOYED	<input type="checkbox"/> UNEMPLOYED	<input type="checkbox"/> SELF EMPLOYED	<input type="checkbox"/> STUDENT	GROSS INCOME PER YEAR:	\$
OCCUPATION:				POSITION:		
EMPLOYERS NAME: <i>(Include accountant if self employed)</i>						
CONTACT NAME:				CONTACT NUMBER:		
LENGTH OF EMPLOYMENT:				TYPE:	<input type="checkbox"/> FULL TIME	<input type="checkbox"/> PART TIME <input type="checkbox"/> CASUAL
DO YOU RECEIVE GOVERNMENT ASSISTANCE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, HOW MUCH DO YOU RECEIVE WEEKLY?			\$
WHAT BENEFITS DO YOU RECEIVE?:	<input type="checkbox"/> UNEMPLOYED	<input type="checkbox"/> PENSION	<input type="checkbox"/> STUDENT	<input type="checkbox"/> OTHER:		
DO YOU RECEIVE RENT ASSISTANCE FROM CENTRELINK?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, HOW MUCH?			\$
WILL YOU BE APPLYING FOR BOND ASSISTANCE FROM THE DEPARTMENT OF HOUSING?				<input type="checkbox"/> YES	<input type="checkbox"/> NO	

RENTAL HISTORY: (Please complete if you are currently renting)

CURRENT ADDRESS:						
HOW LONG HAVE YOU LIVED HERE?				RENT PER WEEK:		
NAME OF AGENT / LANDLORD:				BOND PAID:		
CONTACT PHONE NUMBER:				CONTACT FAX NUMBER:		
WHY ARE YOU LEAVING THIS ADDRESS?						

PREVIOUS ADDRESS:						
HOW LONG DID YOU LIVE HERE?				RENT PER WEEK:		
NAME OF AGENT / LANDLORD:				BOND PAID:		
CONTACT PHONE NUMBER:				CONTACT FAX NUMBER:		
REASON FOR LEAVING?						
WAS YOUR BOND REFUNDED IN FULL?	<input type="checkbox"/> YES	<input type="checkbox"/> NO				
IF NO, WHAT WAS WITHHELD & WHY?						

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PLEASE COMPLETE IF YOU CURRENTLY OWN OR ARE PAYING OFF YOUR PROPERTY:

ADDRESS:			
HOW LONG HAVE YOU LIVED HERE?		REASON FOR LEAVING:	
HAVE YOU SOLD THIS PROPERTY?	<input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU LEASED THIS PROPERTY?	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, WHAT IS THE WEEKLY RENT?			

PLEASE COMPLETE IF YOU ARE A STUDENT:

PLACE OF STUDY:			
COURSES BEING UNDERTAKEN:		COURSE LENGTH:	
STUDENT NUMBER:		HOW ARE YOU FUNDING THIS COURSE?	

IF YOUR PARENTS ARE FUNDING YOUR COURSE PLEASE PROVIDE THE FOLLOWING:

PARENTS NAME:		PARENTS CONTACT NUMBER:	
PARENTS ADDRESS:		MONTHLY ALLOWANCE:	

THE FOLLOWING QUESTIONS MUST BE ANSWERED:

1. HAS YOUR TENANCY EVER BEEN TERMINATED BY A LANDLORD OR AGENT?	YES / NO
IF YES, GIVE DETAILS:	
2. HAVE YOU EVER BEEN REFUSED A PROPERTY BY A LANDLORD OR AGENT?	YES / NO
IF YES, GIVE DETAILS:	
3. ARE YOU IN DEBT TO ANOTHER LANDLORD OR AGENT?	YES / NO
IF YES, GIVE DETAILS:	
4. HAVE ANY DEDUCTIONS EVER BEEN MADE FROM YOUR RENTAL BOND?	YES / NO
IF YES, GIVE DETAILS:	
5. IS THERE ANY REASON KNOWN TO YOU THAT WOULD AFFECT YOUR FUTURE RENTAL PAYMENTS?	YES / NO
IF YES, GIVE DETAILS:	
6. I ACKNOWLEDGE THAT THE LANDLORD AND LANDLORDS AGENT WILL RELY ON THE TRUTH OF THE ABOVE ANSWERS IN ASSESSING THE APPLICATION FOR TENANCY:	YES / NO



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DOCUMENTATION THAT MUST BE PROVIDED:

PHOTOGRAPHIC IDENTIFICATION (at least one of these):

- DRIVERS LICENCE
- PASSPORT
- PROOF OF AGE CARD

EMPLOYMENT AND INCOME (at least one of these if applicable):

- 3 CONSECUTIVE PAY SLIPS
- BANK STATEMENT SHOWING WAGE DETAIL
- LETTER FROM EMPLOYER STATING INCOME & LENGTH OF EMPLOYMENT
- SELF EMPLOYED - ACCOUNTANT DETAILS AND FINANCIAL YEAR TAX SUMMARY

IF YOU OWN YOUR HOME (at least 2 of these if applicable):

- COUNCIL RATES
- WATER RATES
- SELLING / LEASING AGENTS AGREEMENT

IF YOU ARE A STUDENT (all required if applicable):

- CURRENT UNIVERSITY ACCEPTANCE LETTER
- OVERSEAS STUDENT - COPY OF VISA DETAILS
- IF PARENT / GUARDIAN WILL BE RESPONSIBLE FOR YOUR RENT PAYMENT, WE MUST RECEIVE LETTER FROM THEM STATING THIS

PROOF OF GOVERNMENT BENEFIT (all required if applicable)

- CENTRELINK STATEMENT
- BANK STATEMENT SHOWING GOVERNMENT ASSISTANCE

OTHER DOCUMENTS REQUIRED (at least two of these):

- MEDICARE CARD
- BIRTH CERTIFICATE
- CURRENT CREDIT / DEBIT CARD
- UTILITY BILL SHOWING YOUR CURRENT ADDRESS

IF YOU ARE RENTING (all required if applicable):

- COPY OF CURRENT LEASE
- RENTAL LEDGER OR 3 CONSECUTIVE RENT RECEIPTS





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UTILITY CONNECTIONS (if required)

THIS IS A FREE SERVICE THAT CONNECTS ALL YOUR UTILITIES



Once Direct Connect have received this application they will call you to confirm your details. Direct Connect will make all reasonable efforts to contact you within 24 hours of the nearest working day on receipts of the Application to confirm the information on this Application and explain the details of the services offered. Direct Connect is a utility one stop connection service.

PLEASE TICK UTILITIES AS REQUIRED:

- ELECTRICITY
- GAS
- PHONE
- INTERNET
- INSURANCE
- PAY TV
- REMOVALS

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/I 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.

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

