



Please note: This application will not be processed unless it is filled out completely with copies of all supporting documents attached.

Please read prior to completing your application.

1. The application must be accompanied by relevant supporting documentation.
2. If you are approved you will be required to pay bond and the first two weeks rent to secure the property within 48 hours of acceptance.

Rent Payment

Direct Debit is our preferred rent payment method and is a free option for tenants.

Applicants Checklist

Before I submit this application, I/we have,

Attached photocopies of supporting documents (see below)

Inspected the property both internally & externally

Completed all details in full on the application form

Provided all contact details and documentation for confirmation of income source

Read and signed all the Privacy Disclosure Statement and Privacy Consent

Supporting Documentation

When submitting an application you must include at least one item from each section per applicant.

Section One Drivers Licence
Proof of Age Card
Passport
Bank Statement

Section Two Current Pay Slips (minimum of 2)
If new job - Letter of confirmation incl. salary
Statement of Centrelink Entitlements

Section Three Previous 4 rent receipts (or ledger)
Council Rates
Motor vehicle registration
Utilities or phone account

ADDRESS OF PROPERTY YOU ARE APPLYING FOR

Preference 1

Preference 2

CURRENT ADDRESS DETAILS

Length of tenancy months Rent \$ per week Lease start date

Names & ages of children (if any)

No. of pets (including breed & age)

Do you own an investment property in Australia? Yes No

Have you applied for NT Housing? Yes No - If so, when?

PRIMARY CONTACT

First Name	Last Name	Email
Phone	Mobile	Date of Birth
Drivers Licence No.	State of Issue	Passport
Country of Issue	No. of Vehicles	Car Rego

EMERGENCY CONTACT

Please provide an emergency contact not living with you fog: Next of Kin)

Name	Relationship to you	Contact Phone
Address		

CURRENT ADDRESS DETAILS

If owner occupier include details here, including current rates notice and agent details if leased/sold

Current rent / mortgage per week How long have you lived there years months

Current Address

Agent/ Landlord Phone Fax

Email Reason for Leaving

Was your bond refunded in full? Yes No If No, please specify

PREVIOUS RENTAL DETAILS

Rent per week How long have you lived there years months

Property Address

Agent/ Landlord Phone Fax

Was your bond refunded in full? Yes No If No, please specify

CURRENT EMPLOYMENT / SELF EMPLOYED

If less than 12 months in current job, please also provide employment details.

Company Name Your position

Payroll/Accountant Payroll/Accountant work phone

Company Address Net Income (after tax) per week / fortnight / month

Length of Employment Business Type/ ABN (if applicable)

PREVIOUS EMPLOYMENT DETAILS

Company Name Your position

Contact Name Contact No.

Company Address Net Income (after tax) per week / fortnight / month

Length of Employment Reason for leaving

CENTRELINK BENEFITS

Type Income \$ per fortnight

PERSONAL REFEREE (CANNOT BE RELATED)

Referees Name Occupation

Relationship to you Phone

APPLICANT TWO (FOR ADDITIONAL APPLICANTS PLEASE COPY THIS PAGE)

First Name	Last Name	Email
Phone	Mobile	Date of Birth
Drivers Licence No.	State of Issue	Passport
Country of Issue	No. of Vehicles	Car Rego

EMERGENCY CONTACT

Please provide an emergency contact not living with you (eg: Next of Kin)

Name	Relationship to you	Contact Phone
Address		

CURRENT ADDRESS DETAILS

If owner occupier include details here, including current rates notice and agent details if leased/sold

Current rent / mortgage	\$	per week	How long have you lived there		years		months
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Current Address

Agent/ Landlord	Phone	Fax
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Email	Reason for Leaving
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Was your bond refunded in full? Yes No If No, please specify

PREVIOUS RENTAL DETAILS

Rent	\$	per week	How long have you lived there		years		months
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Property Address

Agent/ Landlord	Phone	Fax
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Was your bond refunded in full? Yes No If No, please specify

CURRENT EMPLOYMENT / SELF EMPLOYED

If less than 12 months in current job, please also provide employment details.

Company Name	Your position
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Payroll/Accountant	Payroll/Accountant work phone
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Company Address	Net Income (after tax)	\$	per week / fortnight / month
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Length of Employment	Business Type/ ABN (if applicable)
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PREVIOUS EMPLOYMENT DETAILS

Company Name	Your position
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Contact Name	Contact No.
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Company Address	Net Income (after tax)	\$	per week / fortnight / month
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Length of Employment	Reason for leaving
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CENTRELINK BENEFITS

Type	Income	\$	per fortnight
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PERSONAL REFEREE (CANNOT BE RELATED)

Referees Name	Occupation
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Relationship to you	Phone
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Confirmation

I acknowledge that this rental application is subject to the Landlord’s approval and I consent to the information provided in this application being verified and a reference check on VEDA being undertaken.

Privacy Act Acknowledgement for Tenants

I provide consent for the Agency as part of application processing to contact all necessary people (such as referees, other agents, tenancy databases) to verify the Application information provided and understand that all Privacy Acts requirements and the Australian Privacy Principles will be adhered to by the Agency.

I consent to my personal information being passed on during the tenancy (should it commence) and after the tenancy if required to other third parties which include however are not limited to tradespeople/contractors, agents, payroll, HR corporate companies, tenancy databases and other relevant parties in full compliance with the Federal Privacy Act and any other relevant information. The Lessor of the property will be provided all relevant information as the tenancy agreement is between the lessor and the tenant; the agency manages the property on behalf of the lessor. The agreement should it commence is a contract between the lessor and the tenant; personal information will be passed onto the lessor as the owner of the property.

I also acknowledge that:

I am responsible for ensuring the connection of power at the property once the application is approved and the tenancy agreement is signed The premises is a “Smoke Free Zone” and I/we will ensure there is no smoking inside the premises.

Primary Contact

Name:..... Signature:..... Date:.....

Secondary Contact

Name:..... Signature:..... Date:.....