

# Residential Application Form

For your application to be processed you must answer all questions  
(Including the reverse side)

# Ray White<sup>TM</sup>

## A. AGENT DETAILS

**Applicants: please return this form to:**

**Ray White Copper Coast**

8 Hallett St, KADINA SA 5554

Phone: (08) 8821 3211

Fax: (08) 8821 1833

email: melb@raywhite.com

## B. PROPERTY DETAILS

1. What is the address of the property you would like to rent?

Postcode

2. Lease commencement date?

Day	Month	Year	
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3. Lease term?

Years	Months		
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4. How many tenants will occupy the property?

Adults	Children
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5. Names & ages of children

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## C. APPLICANT ONE DETAILS

6. Please give us your details

Mr  Mrs  Miss  Ms  Other

Surname	Given Name/s
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Date of Birth	Driver's licence number
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Driver's licence expiry date	Driver's licence state
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Passport no.	Passport country
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Pension no. (if applicable)	Pension type (if applicable)
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Pension payment amount \$	Medicare no.
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7. Please provide your contact details

Home phone no.	Mobile phone no.
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Work phone no.	Fax no.
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Email address
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8. What is your current address?

Postcode

## D. UTILITY CONNECTIONS

**Direct Connect** This is a FREE service that connects all your utilities  
*make a connection*

**Once we have received this application we 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 receipt of this 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.

<input type="checkbox"/> Electricity	<input type="checkbox"/> Mains Gas	<input type="checkbox"/> Phone	<input type="checkbox"/> Internet
<input type="checkbox"/> Insurance	<input type="checkbox"/> Pay TV	<input type="checkbox"/> Removalist	<input type="checkbox"/> Cleaning

**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.

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

## E. 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 NTD (National Tenancies Database)

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

Signature	Date
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Property Manager Name **Melissa Bussenschutt**

Application sent to Direct Connect (If Required)

Electricity meter number if known \_\_\_\_\_

**F. APPLICANT ONE- HISTORY****9. How long have you lived at your current address?**

<input type="text"/>   <input type="text"/>	Years	<input type="text"/>   <input type="text"/>	Months
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**10. Why are you leaving this address?****11. Landlord/Agent details of this property (if applicable)**

Name of landlord or agent

Landlord/agent's phone no.

Weekly Rent

\$ **12. What was your previous residential address?**

Postcode

**13. How long did you live at this address?**

<input type="text"/>   <input type="text"/>	Years	<input type="text"/>   <input type="text"/>	Months
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**14. Landlord/Agent details of this property (if applicable)**

Name of landlord or agent

Landlord/agent's phone no.

Weekly Rent

\$ 

Was bond refunded in full?

If not why not?

**G. EMPLOYMENT HISTORY****15. Please provide your employment details**

What is your occupation?

What is the nature of your employment?  
(FULL TIME/PART TIME/CASUAL)

Employer's name (inc. accountant if self employed or institution if student)

Employer's address

Postcode

Contact name

Phone no.

Length of employment

<input type="text"/>   <input type="text"/>	Years	<input type="text"/>   <input type="text"/>	Months
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Net Income

\$ **16. Please provide your previous employment details**

Occupation?

Employer's name

Length of employment

<input type="text"/>   <input type="text"/>	Years	<input type="text"/>   <input type="text"/>	Months
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Net Income

\$ **OFFICE USE ONLY****Property Rental**

\$ <input type="text"/>	per week	\$ <input type="text"/>	per month
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**H. CONTACTS / REFERENCES****17. Please provide a contact in case of emergency**

Surname

Given name/s

Relationship to you

Phone no.

**18. Please provide 2 personal references (not related to you)**

1. Surname

Given name/s

Relationship to you

Phone no.

2. Surname

Given name/s

Relationship to you

Phone no.

**19. Please provide at least 1 BUSINESS reference**

1. Surname

Given name/s

Relationship to you

Phone no.

2. Surname

Given name/s

Relationship to you

Phone no.

**I. OTHER INFORMATION****20. Car Registration****21. Please provide details of any pets**

Breed/type

Council registration / number

1. 2. **PLEASE NOTE**

Initial payments must be made by cash, bank cheque or money order within 24 hours after approval of application. No Personal Cheques accepted.

Keys will not be handed over until the lease agreement has been signed by all applicants.

This application is accepted subject to the availability of the property on the due date and no action shall be taken by the applicant against the landlord and the agent should any circumstances arise whereby the property is not available for occupation on the due date.

**HOW DID YOU FIND OUT ABOUT THIS PROPERTY?**

- The Advertiser       Internet       Counter list  
 Country Times       Referral       Other (specify)

**PLEASE PROVIDE US WITH 100 POINTS OF IDENTIFICATION**

Driver's Licence	50
Passport	50
Proof of Age Card	50
Student ID Card	50
Copy of Mobile Phone Account	20
Copy of Medicare Card	20
Concession / Pension Card	10
Copy of Gas/Water/Electricity account	30 each

**J. APPLICANT TWO- DETAILS****21. Please give us your details**Mr  Mrs  Miss  Ms  Other Surname  Given Name/s Date of Birth  Driver's licence number Driver's licence expiry date  Driver's licence state Passport no.  Passport country Pension no. (if applicable)  Pension type (if applicable) Pension payment amount  
\$ **22. Please provide your contact details**Home phone no.  Mobile phone no. Work phone no.  Fax no. Email address **23. What is your current address?**  
 Postcode **K. APPLICANT HISTORY****24. How long have you lived at your current address?** Years  Months**25. Why are you leaving this address?****26. Landlord/Agent details of this property (if applicable)**Name of landlord or agent Landlord/agent's phone no.  Weekly Rent   
\$**27. What was your previous residential address?**  
 Postcode **28. How long did you live at this address?** Years  Months**29. Landlord/Agent details of this property (if applicable)**Name of landlord or agent Landlord/agent's phone no.  Weekly Rent Was bond refunded in full?  If not why not? **L. EMPLOYMENT HISTORY****30. Please provide your employment details**What is your occupation? What is the nature of your employment?  
(FULL TIME/PART TIME/CASUAL) Employer's name (inc. accountant if self employed or institution if student) Employer's address Postcode Contact name  Phone no. Length of employment  Years  Months  Net Income   
\$**31. Please provide your previous employment details**Occupation? Employer's name Length of employment  Years  Months  Net Income   
\$**32. Please provide 2 personal references (not related to you)**1. Surname  Given name/s Relationship to you  Phone no. 2. Surname  Given name/s Relationship to you  Phone no. **33. Please provide at least 1 BUSINESS reference**1. Surname Relationship to you  Phone no. 2. Surname  Given name/s Relationship to you  Phone no. **M. OTHER INFORMATION****33. Car Registration****34. Please provide details of any pets**Breed/type  Council registration / number 1. 2.