Please be advised that your application will be processed once the tenant has signed both the red X and initialed the secondary purposes on this page. Each applicant must submit an individual Application form via email or fax. Email: info@metropm.com.au Fax: 03 9836 3433



RESIDENTIAL TENANCIES ACT 1997 Section 439C NOTICE OF USUAL USE OF DATABASE

Important information for the person completing this notice You must complete this Notice and give it to the applicant when the application for the tenancy agreement is, made, whether or not you intend to use this residential tenancy database(s) for deciding whether a tenancy agreement should be entered into with the applicant.

The name(s) of the residential tenancy database(s) the landlord usually uses, or may use, for deciding whether a tenancy agreement should be entered into with a person are as follows:

Residential tenancy database:

National Tenancy Database (NTD)

How to contact and obtain information from the operator of this database: (NB: these are NOT MetroPM's contact details)

1/191 Johnston Street, Fitzroy Vic 3065

Phone: (03) 9416 2366 Email: info@ntd.net.au

Why does the landlord use a residential tenancy database?

The reason the landlord uses a residential tenancy database is for checking an applicant's tenancy history.

Dated: ____/ 20____

Name x

Applicant(s) signature

Would you like to keep a copy of your application form? Yes \Box No \Box

(NB: make a photocopy of this completed Notice and attach it to the tenancy application)

IMPORTANT INFORMATION – PLEASE READ

Once your application has been approved, you are required to transfer the bond payment and first months rent into Metro's Trust Account. The account details will be provided to you via email.

These payments must be made within 24 hours of your application being approved.

Keys will not be handed over until the Lease Agreement has been signed by all applicants and the bond and first months rent is paid.

This application is accepted subject to the availability of the property on the provision that the following information is provided.

In order for your application form to be processed, YOU MUST:

$\hfill\square$ View the property internally	$\hfill\square$ Provide a copy of your drivers license
Provide 3 recent pay slips	Initial & Sign the Privacy Declaration

PRIMARY PURPOSE

NTD collects your personal information to provide to its members and others listed below, historical tenancy and public record information on individuals and companies who/which lease residential and commercial property from or through licensed real estate agent members of NTD. NTD also provides credit information on companies/directors applying for commercial leases. The real estate agent/property manager will advise NTD of your conduct throughout the lease/tenancy, and that information will form part of your tenant history.

NTD usually discloses information to: * Licenced real estate agent members

Signature X

* NTD's parent company, Collection House Limited ABN 74010230716 and its subsidiaries and related entities

Credit bureaus

If your personal information is not provided to NTD, the real estate agent/property manager will not be able to carry out their professional responsibilities and will not be able to provide you with a lease/ tenancy of the premises.

Disclaimer:

T Ν

1	hereby authorize Metro Property
ſ	Management to disclose this information to the landlords, to perform all
(credit and other checks as may be deemed appropriate by Metro Property
ľ	Management and in accordance with the Tenant Privacy Statement.

Date

DECLARATION & PRIVACY STATEMENT

Due to changes in the Privacy Laws, from December 21 2001, all property managers must ensure that you fully understand the National Privacy Principles and the manner in which we must use your private information in order to carry out our role as professional property managers. Please take the time to read this Privacy Statement carefully, and once completed, return it to this office with your tenancy application.

As professional property managers Metro Property Management Pty Ltd collects personal information about you. To ascertain what personal information we have about you, you can contact us by:

Telephone: (03) 9831 3000 Facsimile: (03) 9836 3433 Email: info@metropm.com.au In person: 461 Whitehorse Rd, Balwyn 3103 Visit website: www.metropm.com.au This information will be made available from 21st December 2001.

PRIMARY PURPOSE

As professional property managers, we collect your personal information to assess the risk in providing you with the lease/tenancy of the premises you have requested and if the risk is considered acceptable, to provide you with the lease/tenancy of the premises.

To carry out this role, and during the term of your tenancy, we usually disclose your personal information to:

- The Landlord
- * The Landlord's Lawyers * The Landlord's mortgagee
- * Referees you have nominated
- * Organisations/Trades people required to carry out maintenance to the premises * Residential Tenancies Bond Authority (RTBA)
- * Victorian Civil and Administrative Tribunal (VCAT) Collection Agents
- * National Tenancy Database Pty Ltd (ABN 65 079 105 025) ("NTD")
- * Other Real Estate Agents and Landlords * Staff member of Metro Property Management Pty Ltd

SECONDARY PURPOSES

We also collect your personal information to: Please initial if you consent to the use and disclosure to:

- * Enable us, or the Landlord's lawyers, to prepare the lease/tenancy documents for the premises
- * Allow organizations/trades to contact you in relation to maintenance
 - matters relating to the premises * Pay/release rental bonds to/from Rental Bond Authorities
 - * Refer to Tribunals, Courts & Statutory Authorities (where necessary) * Refer to Collection Agents/Lawyers (where default/enforcement
 - action is required
 - * Provide confirmation details for organizations contacting us on your behalf i.e. Banks, Utilities (Gas, Electricity, Water, Phone), Employers etc.

<u>Please Note:</u> If your personal information is not provided to us, and you do not consent to the users to which we put your personal information, we cannot properly assess the risk to our client, or carry out our duties as professional property managers. Consequently, we then cannot provide you with the lease/tenancy of the premises.

Please initial

Rental Application Form	Passport Name Pension type (if applicable)
A. AGENT DETAILS Metro Property Management Pty Ltd Ground Floor, 461 Whitehorse Road Balwyn Vic 3103 Ph: (03) 9831 3000 Fax: (03) 9836 3433 Email: info@metropm.com.au	10. Please provide your contact details Home phone number Mobile phone number
Fax: (03) 9836 3433	
Website: www.metropm.com.au	Work phone number Fax number
1. What is the address of the property you would like to rent?	
First preference:	Email address
Postcode	D. RENTAL HISTORY
Second preference:	11. What is your current address?
Postcode	Postcode
Third preference:	12. How long have you lived at your current address?
	Years Months
Postcode	13. Why are you leaving this address?
2. Rental per week Rental per month Inspected the property?	
\$ Yes No 3. Date Inspected	14. Landlord/Agent details of this property (if applicable)
	Name of Landlord or Agent
4. Lease start date? 5. Lease term	
Years Months	Landlord/Agent's phone number Weekly rent paid
6. How many people will normally occupy the property?	\$
Adults Children & ages	15. What was your previous residential address?
Name(s) of other adults applying:	Postcode
	16. How long did you live at this address?
7. Is the cleanliness of the property?	17. Why did you leave this address?
□ Satisfactory □ Needs attention	
8. Where did you find out about this property?	18. Landlord/Agent details of this property (if applicable)
□ metropm.com.au □ realestate.com.au □ realestateview.com.au Other, please specify	Name of Landlord or Agent
C. PERSONAL DETAILS	
9. Please give us your details	Landlord/Agent's phone number Weekly rent paid
Mr Ms Miss Mrs Dr Surname Given name/s	\$
	Was Bond refunded in full? If no, why not? Yes No
Date of birth Driver's Licence No.	
Driver's Licence Expiry Driver's Licence State	
Passport Number Passport Country	

E. EMPLOYMENT HISTORY		26. Source of income – copies of recen		
19. Please provide your employment details – what is your occupation?		guarantees or Austudy documents to be supplied.		
		How much per week?	How much per month?	
Full time Part time Casual	Other 🗌	\$	\$	
Employer's full name (inc. accountant if se	elf employed or institution if a student)	27. Contacts in home country. Contact	: name & address.	
Employer's address				
	Postcode	I. UTILITY CONNECTIONS This is a free service that connects all of you	Direct Connect	
	FOSICOUE	PO Box 1519, Box Hill Vic 3128 F: 1300 664 185	P: 1300 664 715 www.directconnect.com.au	
Contact name	Phone number	Once we have received this application we will call y Direct Connect will make all reasonable efforts to co	ontact you within 24 hours of the nearest	
		working day on receipt of this Application to confirm explain the details of the services offered. Direct Co Please tick utilities as required:		
Length of employment	Net Income	Electricity Gas Water Ph	one 🗌 Internet 🗌 Pay TV	
Years Months	\$	DECLARATION AND EXECUTION: By signing this ap	pplication, I/we: consent to Direct Connect	
		arranging for the connection and disconnection of the nor information contained in this application to utility provide required with target and Conditions of Symply of Direct	ers for this purpose; acknowledge having been	
20. Please provide your previous em	ployment details – occupation?	provided with terms and Conditions of Supply of Direct C together with the Privacy Collection Notice set out below application is true and correct and given of their own free	; declare that all the information contained in this	
		any information disclosed in this Application to a supplie with the Privacy Collection Notice and to obtain any info	rmation necessary in relation to the Services;	
Contact name	Phone number	expressly authorise Direct Connect to provide any inform information provider for the purpose of that information supplier of the Services in accordance with the Privacy C	provider disclosing it to a supplier or potential	
		necessary in relation to the Services; consent to Direct Corelation to the marketing or promotion of all of the service	es listed under the heading "Connection Details"	
Length of employment	Net Income	above even if we/I have not applied for the connection of continue [for a period of 1 year from the date of our/my e we/I disconnect the last of the services in respect of whic	execution of this application/until [28] days after	
	\$	consent will permit Direct Connect to contact us/me even form are listed on the Do Not Call Register; understand the	hat under the requirements of the Privacy	
Years Months	Ψ	Act 1988, Direct Connect will ensure that all personal inf appropriately collected, used, disclosed and transferred ar unauthorised access, use, modification or disclosure and	nd will be stored safely and protected against loss,	
F. CONTACTS/REFERENCES 21. Please provide a contact in case	of emergency:(not living with you)	National Metering Identifier (NMI) for my residential add Connect disclosing my/our details to utility providers	dress to obtain supply details; consent to Direct	
Surname	Given name/s	(including my/our NMI and telephone number); declare a amounts payable in relation to the connections and/or sup Connect and its officers, servants and agents and hold the	oply of the Services and hereby indemnify Direct	
		respect of the Services; acknowledge that, to the extent p for any loss or damage (including	ermitted by law, Direct Connect shall not be liable	
Relationship to you	Phone number	consequential loss and loss of profits) to me/us or any oth provision of the services or any act or omission by the uti connection with any delay in connection, disconnection of	ility provider or for any loss caused by or in	
		or provide, the nominated utilities; acknowledge that whi required to pay standard connection fees or		
22. Please provide two personal refe	rences (not related to you)	deposits required by various utility providers; acknowled the applicable regulations and that the time frames and te providers bind me/us and that after hours connections ma	erms and conditions of the nominated utility	
1. Surname	Given name/s	providers; acknowledge that the real estate agent listed on Direct Connect in connection with the provision		
		of the service being provided to me/us by Direct Connect Connect and its associates, agents and contractors, to rece	eive a fee or remuneration from the utility provider	
Relationship to you	Phone number	and that such fee or remuneration will not be refunded to the utility connection services By signing this application application and to provide the consents, acknowledgement	form, I warrant that I am authorised to make this	
		this application form on behalf of all applicants listed in t	his application form.	
2. Surname	Given name/s	Signature:	Date:	
Relationship to you	Phone number	Do you own an investment property?	Yes 🗌 No 🗌	
G. OTHER INFORMATION		Would you like to subscribe to our ema	ail newsletter? Yes 🗌 No 🗌	
23. Car Make/Model/Registration		Would you like to become a member or www.metrowealth.com.au or use the c		
		(using your iPhone or Smart Phone)	oue below to be taken to the site	
24. Pet details – please provide detai Breed/type	ils of any pets: Council Registration Number			
1.				
2.				
H. STUDENT INFORMATION				
25. Place of study and course being	undertaken			
			motro	
			property management	