

# **360** PROPERTY MANAGEMENT

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**\*NOTE – ONE APPLICATION FORM MUST BE COMPLETED FOR EACH OCCUPANT OVER 18**

## Property Details:

Date: \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_

Rent Amount per week: \$ \_\_\_\_\_

Date to Commence Lease: \_\_\_\_\_ Term of Lease: 6 months or 12 months

How many Adults \_\_\_\_\_ will be residing at the property?

How many Children under 18 will be residing at the property? (\*Please provide ages of all children under 18): \_\_\_\_\_

Pets:  Yes  No If yes Pet Application on pages 7 & 8 MUST be completed

## Applicant:

Full Name: \_\_\_\_\_

Previous Name (if applicable): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

I.D 18+Card: \_\_\_\_\_ Passport: \_\_\_\_\_

Medicare Card #: \_\_\_\_\_ Vehicle Registration #: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Email: \_\_\_\_\_

## Current Residential Situation:

Are you  Owner  Renter  other (please specify) \_\_\_\_\_

Address: \_\_\_\_\_

If Owner, what will you be doing with your property?

Rent, Private or Real Estate?  Sell, Private or Real estate?

How long have you lived at your current address? \_\_\_\_\_ Years \_\_\_\_\_ Months

Name if Agent/Landlord (if applicable) \_\_\_\_\_

Phone number: \_\_\_\_\_ Rent paid per week: \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Was bond repaid in full?  Yes  No

If No, please specify \_\_\_\_\_

**NOTE - \*Please Supply at least 2 years worth of tenancy history**

**Previous Residential Details:**

Did you  Own  Rent  other (please specify) \_\_\_\_\_

Address: \_\_\_\_\_

How long did you live at this address? \_\_\_\_\_ Years \_\_\_\_\_ Months

Name of Agent/Landlord (if applicable) \_\_\_\_\_

Phone Number: \_\_\_\_\_ Rent Paid per week: \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Was bond refunded in full?  Yes  No

(If no, please specify): \_\_\_\_\_

**Previous Residential Details:**

Did you  Own  Rent  other (please specify) \_\_\_\_\_

Address: \_\_\_\_\_

How long did you live at this address? \_\_\_\_\_ Years \_\_\_\_\_ Months

Name of Agent/Landlord (if applicable) \_\_\_\_\_

Phone Number: \_\_\_\_\_ Rent Paid per week: \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Was bond refunded in full?  Yes  No

(If no, please specify): \_\_\_\_\_

**Current Employment:**

Occupation: \_\_\_\_\_  Full Time  Part Time  Casual

Employers Name (company): \_\_\_\_\_

Business address: \_\_\_\_\_

Contact Name (manager): \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Commenced: \_\_\_\_\_

Nett Income (after Tax) (excl overtime) \$ \_\_\_\_\_ per  Week  Fortnight  Month

**Previous employment:**

Occupation: \_\_\_\_\_  Full Time  Part Time  Casual

Employers Name (company): \_\_\_\_\_

Business address: \_\_\_\_\_

Contact Name (manager): \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Commenced: \_\_\_\_\_ Date Finished: \_\_\_\_\_

Nett Income (after Tax) (excl overtime) \$ \_\_\_\_\_ per  Week  Fortnight  Month

**If self employed (please attach a business card)**

Name of Business: \_\_\_\_\_ ABN: \_\_\_\_\_

Business Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Industry: \_\_\_\_\_

Length of time in Business: \_\_\_\_\_ month's \_\_\_\_\_ years

List one major creditor: \_\_\_\_\_ Phone: \_\_\_\_\_

Accountant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Last tax return statement or profit & loss statement or bank statement (please attach)

**Students- Please attach Student ID card**

Institution: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Faculty/ Department: \_\_\_\_\_

Expected duration: \_\_\_\_\_ Income Source: \_\_\_\_\_

Nett Income (after Tax) (excl overtime) \$ \_\_\_\_\_ per  Week  Fortnight  Month

**Centrelink Recipient**

Type of Payment & CRN: \_\_\_\_\_

Total Centrelink Payment/Fortnight \_\_\_\_\_

Will you be applying for a bond loan? Y/N Will you be applying for rent assistance? Y/N

**References:**

Complete all 3 Reference Blocks Below and include either of the following:

- 1) Your parents or guardians
- 2) Your nearest relative not living with you
- 3) At least 2 must be permanent residents of Australia
- 4) At least 1 established trade, business or colleague reference
- 5) Same person must not be used twice

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Home Ph:** \_\_\_\_\_ **Mobile Ph:** \_\_\_\_\_ **Business Ph:** \_\_\_\_\_

**How long known:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Home Ph:** \_\_\_\_\_ **Mobile Ph:** \_\_\_\_\_ **Business Ph:** \_\_\_\_\_

**How long known:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Home Ph:** \_\_\_\_\_ **Mobile Ph:** \_\_\_\_\_ **Business Ph:** \_\_\_\_\_

**How long known:** \_\_\_\_\_

**Emergency contact details-** (must not reside with you)

**1) Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**2) Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Disclaimer/Authority: Please read before signing**

- 1) I, the said applicant, do solemnly declare that the information provided in this application is true and correct and that all of the information given was of my own free will.
- 2) I consent to the lessor/agent contacting and/or conducting any enquiries and/or searches with regard to the information and references supplied which is required to process my application for tenancy.
- 3) I, the said applicant, do solemnly declare that I am over the age of 18 years
- 4) I confirm I have inspected the said property I am applying for and found it to be in a reasonably clean condition (applicable unless a Sight Unseen form is attached)
- 5) I have been informed, understand and agree that the rental for the said property is \$\_\_\_\_\_per week and is within my means of support
- 6) I acknowledge that this is an application to rent the said property and that it is subject to the landlords' final approval. I understand and agree that should this application not be accepted, the agent is not required or obligated to disclose why or supply any reason for the rejection of this application, unless the application is declined as a result of my name being listed with a tenancy default database
- 7) I acknowledge, understand and agree that should my application be successful, I will pay a two week holding deposit immediately. Furthermore I agree to pay 4 weeks bond and sign the tenancy agreement within 48hours of approval.

Applicant Name: \_\_\_\_\_ Signed: \_\_\_\_\_

Dated: \_\_\_\_/\_\_\_\_/2011

**BEFORE ANY APPLICATION WILL BE CONSIDERED, EACH  
 APPLICANT MUST ACHIEVE A MINIMUM OF 100 POINTS OF ID  
 AND PROVIDE PROOF OF INCOME TO SUPPORT EACH APPLICATION.**

<b>Source</b>	<b>Points</b>
If you owned your own property copy of rates notice	50
DRIVERS LICENCE	50
LAST 4 RENT RECEIPTS	40
PHOTO I.D (Eg: 18+, Student card etc)	30
PASSPORT	30
MEDICARE	20
BIRTH CERTIFICATE	10
SAVINGS/CREDIT CARD	10
CURRENT VEHICLE REGO PAPER	10
References from Previous Landlord or Selling Agent	10
Total Number of Points	

**PROOF OF INCOME MUST BE PROVIDED**

Two (2) recent payslips, letter of offer from employer or Centrelink Statement.

If self employed please provide a statement of income from your accountant or a bank statement to show proof of income.

# PET APPLICATION AND AGREEMENT

<b>AGENCY DETAILS</b>	360 Property Management		
<b>PROPERTY ADDRESS</b>			
<b>TENANT NAME</b>			
<b>GENERAL</b>	Use this form only for Properties where the Lessor has indicated that pets may be accepted. If unsure please contact our Agency prior to completing this application form.		
<b>PET DETAILS</b> If more than 2 pets, print and complete separate Pet Agreement.	<b>ITEM</b>	<b>PET 1</b>	<b>PET 2</b>
	TYPE OF PET/S		
	NAME/S		
	AGE		
	DESEXED	YES / NO	YES / NO
	COUNCIL REG #		
	DESCRIPTION		
	PHOTO PROVIDED <b>(Photo must be provided)</b>	YES (copy for file) / NO	YES (copy for file) / NO
<b>EMERGENCY PET CARER</b> The Tenant provides the following information for use in the case of an emergency.	Name		
	Address		
	Phone Number	Work Number	Mobile Number
<b>VETERINARIAN</b> The Tenant provides the following information for use in the case of an emergency.	Name		
	Address		
	Phone Number	Fax Number	After Hours Number
<b>TERMS AND CONDITIONS</b>	<p>The Tenant/s acknowledges and agrees to the following terms:</p> <ol style="list-style-type: none"> <li>1. The Lessor has agreed to permit pet/s at the premises as specified in the General Tenancy Agreement and this Pet Agreement.</li> <li>2. Any pet other than the approved pet/s specified in the General Tenancy Agreement and this Pet Agreement must first be requested by Tenant/s in writing giving full details and then be approved in writing by the Lessor PRIOR to the pet/s being allowed onto the premises. Pet approval may be subject to specific criteria and must be complied with. Approval is NOT guaranteed.</li> <li>3. The Tenant shall be liable for any damage or injury whatsoever caused by the pets on the Property, whether they are the pet of a Tenant or guest, Tenant's pets or their guests pets and regardless of their approval status.</li> <li>4. The Tenant accepts full responsibility and indemnifies the Lessor for any claims by or injuries to third parties or their Property caused by, or as result of actions by their pet/s or their guests pet/s, and regardless of their approval status.</li> <li>5. The Tenant agrees to arrange for Flea Fumigation at the end of the tenancy or at a time during the tenancy as required or requested by the Lessor / Lessor's Agent to be carried out by a Company complying with Australian Standards.</li> <li>6. The pet/s are to be outside at all times, unless specified otherwise in the General Tenancy Agreement or this Pet Agreement.</li> <li>7. By signing below you are only asking for approval of the above-mentioned pet/s to</li> </ol>		

	<p>be accepted at the property for which you are applying.</p> <p>8. If approved, you are required to, at the time of signing the Tenancy Agreement and associated paperwork, sign the Tenant Agreement section.</p>		
<b>ACKNOWLEDGEMENT BY APPLICANT</b>	<b>Applicant Name</b>	<b>Signature</b>	<b>Date</b>
<b>AFTER PROCESSING APPLICATION</b>			
<b>APPLICATION RESULT</b>	<p><input type="checkbox"/> Application for Pet/s – <b>DECLINED</b></p> <p><input type="checkbox"/> Application for Pet/s – <b>APPROVED</b></p> <p>The abovementioned pet/s have been approved by the Lessor of the property stated in this Agreement. This Agreement now forms part of the General Tenancy Agreement and the Tenant/s are now bound by the acknowledgement set out in the Application above.</p>		
<b>AUTHORISATION ON BEHALF OF LESSOR / AGENT</b>	<b>Agent</b>	<b>Signature</b>	<b>Date</b>
	360 Property Management		
<b>TENANT AGREEMENT</b>  To be signed only if pet/s are approved.	<b>Tenant Name</b>	<b>Signature</b>	<b>Date</b>





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### **PRIVACY ACT ACKNOWLEDGEMENT**

**\*NOTE – THIS MUST BE SIGNED BEFORE THIS APPLICATION CAN BE PROCESSED**

In accordance with the privacy act I/We the undersigned authorise the recipient of this form to provide any information requested to 360 Property Management regarding our/my rental history or to confirm employment details. I/We understand that this information will be used to assess my/our application.

**All information supplied to 360 Property Management is treated confidentially.**

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Signature: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date Signed: \_\_\_\_\_ Date Signed: \_\_\_\_\_

{Nb – one application form must be completed for each occupant over 18 years of age}