



ADDRESS APPLIED FOR _____


Full Name of Applicant		Title Mr / Mrs / Ms / Miss / Other	
No of People to Occupy Premises	Adults	Children	Ages
Current Address		Email	
Home No.	Work No.	Mobile No.	
Current Landlord/Agent/Other		Phone No.	
Time Residing at This Address	Rent pw \$	Reason for Leaving?	
Date of Birth	Pets - Yes / No	Outside only/inside & outside	Number Type/ Breed
Emergency Contact Name & Address		Phone No.	

Occupation	Employer	Net Income
Employers Address		Phone No.
Period of Employment	Contact Name	ABN if Self Employed
Previous Employers Name & Address		
Period of Employment	Contact Name	Phone No.

Previous Address	Rent pw \$	When did you leave?
Previous Landlord/Agent/Other		Phone No.

Drivers Licence No. & state of issue	Car Registration No. & State
Number of vehicles to be parked at the premises	Do you have a boat/caravan/trailer? (circle if appropriate)
Referees Name & Address	Phone No.

NOTE: The applicant agrees to the Agent verifying all of the above references



A FREE utilities connection service

Phone: 1300 854 478
 Fax: 1300 854 479
 enquiry@myconnect.com.au
 www.myconnect.com.au

Please tick the utilities required:

<input type="checkbox"/> Electricity	<input type="checkbox"/> Gas
<input type="checkbox"/> Phone	<input type="checkbox"/> Internet
<input type="checkbox"/> Water	<input type="checkbox"/> Pay TV

If this section has been completed I/we: Consent to the disclosure of information on this form to myconnect ABN 34121 892 331 for the purpose of arranging the connection of nominated utility services; consent to myconnect disclosing personal information to utility service providers for the stated purpose and obtaining confirmation of connection; consent to myconnect disclosing confirmation details (including NMI, MRN, utility provider) to the Real Estate Agent, its employees and myconnect may receive a fee/incentive from a utility provider in relation to the connection of utility services; acknowledge that whilst myconnect is a free service, a standard connection fee and/or deposit may be required by various utility providers; acknowledge that, to the extent permitted by law, the Real Estate Agent, its employees and myconnect 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 services or any act or omission by the utility provider or for any loss caused by or in connection with any delay in connection or provision of, or failure to connect or provide the nominated utilities.

Signed _____ Date _____

HOLDING DEPOSIT
 Subject to the acceptance of this application and in the consideration of the payment of \$..... The applicant wishes to reserve the premises fordays **subject** to the terms and conditions set out in this form and any subsequent Residential Tenancy Agreement. This holding deposit acts as an acknowledgment of approval this application and receipt of monies will be credited towards the rent, however should the Tenant/s withdraw their application or not proceed with the application, the **entire** holding deposit will be retained by the Agent. During the holding period, no other fee will be taken from any other applicant nor will the premises be reserved in another Tenant's favour.

THE APPLICANT STATES THAT
 i. The information given in this application is true and correct and this is a fundamental precondition of the owner entering into the Residential Tenancy Agreement
 ii. He/She is not bankrupt or insolvent.
 iii. The premises have been inspected and any rental bond and initial payment of rent will be made in money order or bank/building society cheque

PRIVACY POLICY – PRIVACY ACT 1988 CAN BE VIEWED IN FULL AT THE OFFICE AT 109 NEW ENGLAND HIGHWAY, RUTHERFORD NSW 2320
 The personal information the prospective tenant provides in this application or collected from other sources is necessary for the Agent to verify the Applicants identity, to process and evaluate the application and to manage the tenancy. Personal information collected about the Applicant in this application and during the course of the tenancy if the application is successful may be disclosed for the purpose for which it was collected to other parties including to the landlord, referees, other agents and third party operators of tenancy reference databases. Information already held on tenancy databases may also be disclosed to the Agent and/or Landlord. If the Applicant enters into a Residential Tenancy Agreement, and if the Applicant fails to comply with their obligations under that agreement, the fact and other relevant personal information collected about the Applicant during the course of the tenancy may also be disclosed to the landlord, third party operators of tenancy reference databases and/or other agents. If the Applicant would like to access the personal information the Agent holds, they can do so by contacting the Agent at the address and contact numbers contained in this application. The Applicant can also correct this information if it is inaccurate, incomplete or out-of-date. If the information is not provided, the Agent may not be able to process the application and manage the tenancy.

The applicant acknowledges that the Agent is a subscriber to TICA. The applicant accepts that a database search may be undertaken through TICA. Further, the Applicant is aware that should there be an unresolved breach of the Residential Tenancies Act 1987, the Applicant may be listed as a defaulting tenant, until such time as the matter is resolved in full. You can access details of TICA by post at PO Box 120, Concord NSW 2137 or Ph: 02 9743 1800 or Fax: 9743 4844 or email: enquiries@tica.com.au or web: www.tica.com.au
 in connection with the provision of the utility connection services. P: 1300 664 715 F: 1300 664 185 W: www.directconnect.com.au

TENANCY TERMS – Advise how long a lease you would prefer, when you wish to commence & sign where appropriate.

Period 6 (min) to 12 (max) months, commencing on ___/___/20___ Rent is \$ _____pw

First payment of rent in advance (2 wks)	\$ _____	Please photocopy all identification documents, as we do not provide this service.
Rental Bond (4 weeks rent)	\$ _____	
Sub Total	\$ _____	
Less Reservation Fee	\$ _____	
Total Amount Payable	\$ _____	

Receipt No: _____ Date: ___/___/20___

Signature Applicant _____ Date ___/___/20___ **Real Estate Agent** _____

NOTICE: If you dispute part or all of the amount specified by the Agent in this itemised account, and if you have been unable to resolve the dispute, SECTION 42A of the Property, Stock and Business Agents Act 1941 provides that you may apply to the Department Fair Trading for a determination of the matter. Action to recover the amount must be commenced within 28 days of the statement of claim being made

Each applicant is to complete a separate application form i.e. 2 persons applying for the one property need to complete 2 separate applications in full. Ensure the tenancy terms are completed & signed. Prior to submitting this application, the rental reference privacy disclosure on the back of this form must be signed. All accompanying ID must be submitted with the application. The applicant has read & understood the application in full.

THIS APPLICATION CANNOT BE PROCESSED UNTIL ALL DETAILS ARE COMPLETED IN FULL. I AM APPLYING FOR THIS PROPERTY ON THE UNDERSTANDING THAT IT WILL BE LEASED IN THE CONDITION AS INSPECTED UNLESS ADVISED OTHERWISE

If your application for this property is approved, and you have left a holding deposit, a completed copy of this application must be retained for your records.



(Prospective tenant to complete below)

RENTAL REFERENCE CHECK

In accordance with the Privacy Act 1988 (you can view full details of the Privacy Act at our office upon request), I, the undersigned, authorise the recipient of this fax to give information to Resipro Real Estate regarding my rental history.

Applicants Name: _____

Signature of Applicant: _____ Date: _____

(Prospective tenant's agent to complete below)

Dear Agent,

Please complete & return by facsimile to Resipro Real Estate – Fax: 02 4932 4369

Name & position of person filling out this form: _____

When did the lease commence? _____ Has the lease expired? _____ Rent paid per week: \$ _____

Was rent paid on time? Yes / No: (Comments if necessary) _____ * Please attach a copy of the rent ledger

Was a Termination Notice ever issued? Yes / No Reason (please tick): Arrears ____ Sold ____ Other ____ (comments) _____

Have you or the tenant made an applicant to the CTTT during or after this tenancy? Yes / No (Reasons) _____

Were there any routine inspections? Yes / No (Result – please tick) Good ____ Satisfactory ____ Poor ____

Were the lawns & gardens kept neat & free of rubbish on a regular basis? _____

Did the tenants keep pets? Yes / No – Were pets kept inside? Yes / No – No. & breed if known _____ Any damage known? _____

Were the tenants cooperative to deal with? _____ Were the tenants demanding with repair requests? _____

Do you know why the tenants vacated/are vacating the property? _____

Was the bond refunded in full? Yes / No / N/A If no, what claims were made and for how much? _____

Would you rent to the tenants again? Yes / No / Unsure

Any further comments necessary? _____

Signature of Agent: _____ Date: _____

HOW DID YOU FIND ABOUT THIS PROPERTY? (Please circle where appropriate)

1. Newspaper 3. Signboard 4. Internet – which site? _____ 5. Referral 6. Other

Sufficient ID must be provided which totals 100 Points. You MUST have at least one item marked * next to point.

DRIVERS LICENSE*	30 POINTS	PASSPORT*	30 POINTS
PROOF OF AGE CARD*	30 POINTS	BIRTH CERTIFICATE	20 POINTS
TENANCY HISTORY LEDGER	20 POINTS	PREVIOUS TENANCY AGREEMENT	20 POINTS
RENTAL BOND RECEIPT	20 POINTS	PREVIOUS MONTHLY RENT RECEIPTS	20 POINTS
PAY ADVICE	15 POINTS	MOTOR VEHICLE REGISTRATION	15 POINTS
TELEPHONE ACCOUNT	15 POINTS	ELECTRICITY ACCOUNT	15 POINTS
GAS ACCOUNT	15 POINTS	BANK OR CREDIT CARD STATEMENTS	15 POINTS
PENSION CARD	15 POINTS	COUNCIL OR WATER RATES	15 POINTS
HEALTH CARE CARD	15 POINTS	MEDICARE CARD	15 POINTS