



TENANCY APPLICATION FORM

Please note that this office is a member of Tenancy Information Centre Australia PTY LTD (TICA)

This application will not be processed until it is filled out completely with copies of all supporting documents attached.

PROPERTY ADDRESS (1st Preference)	
PROPERTY ADDRESS (2nd Preference)	
I WOULD LIKE TO MOVE IN DATE:	
OFFICE MOVE IN DATE:	

Please read prior to completing your application.

1. All intended occupants over the age of 18 must complete an application form.
2. The application must be accompanied by relevant supporting documentation (see below).
3. Only Bank Cheque, Money Order, Personal Cheque or Credit Card will be taken as initial payment.
4. If you are approved you will be required to pay bond (equivalent of 4 weeks rent) plus first 2 weeks rent.
5. You will be required to attend a sign-up appointment and pay the minimum of 2 weeks rent within 48 hours of approval to sign lease.

In most instances, we are able to process your application within 48 hours. If we are unable to contact references/referees, this process may take longer.

I / WE AGREE TO PAY MY RENT ON OR BEFORE THE DUE DATE BY ONE OF THESE OPTIONS:		
<input type="checkbox"/> YES	Rental Rewards -Direct debit	\$3.00 per month unlimited transactions
<input type="checkbox"/> YES	Credit Card	1.45% of the transaction value for Visa/Mastercard
<input type="checkbox"/> YES	Money Order / Bank Cheque	Approx. cost from \$5 - \$10
<input type="checkbox"/> YES	Personal Cheque	

Please Supply the following documents (both applicants)

Please note your application WILL NOT be processed until we have all the documents required.

- | | |
|---|--|
| <input type="checkbox"/> Current Drivers Licence, Passport or 18+ Card | <input type="checkbox"/> Proof of Current Address – phone bill, utilities |
| <input type="checkbox"/> Copy of Medicare Card | <input type="checkbox"/> Proof of Income- Last months pay slip |
| <input type="checkbox"/> Bank Statement – Full current month (Must show name) | <input type="checkbox"/> Photo of Pets to reside at the property (If Applicable) |
| <input type="checkbox"/> Centerlink <u>Income Statement</u> (If Applicable) | |

OFFCIE USE ONLY:	VIEWING: _____
APPROVED BY: _____ YES / NO / MAYBE	SIGN UP DATE: _____ TIME: _____
APPROVED BY PM: _____ YES / NO / MAYBE	MOVE IN DATE: _____ RENT: _____
APPROVED BY OWNER: _____ YES / NO	LEASE LENGTH APPROVED: 6 MONTHS: _____

APPLICANT 1 PERSONAL DETAILS:

Drivers Licence: _____ Passport: _____

Full Name: _____ D.O.B _____ / _____ / _____

Have you been known by any other name? YES / NO Previous Name: _____

Ph: Home _____ Ph: Work _____ Ph: Mobile _____

Email: _____

Are you a Smoker? YES / NO	No. of Vehicles:
Model/s:	Rego Number/s:

APPLICANT 1 EMPLOYMENT DETAILS:

Occupation: _____ Net Weekly Income: \$ _____

Employer: _____ Period Employed: _____

Employers Address: _____ Phone: _____

APPLICANT 1 CURRENT PROPERTY DETAILS:

Address: _____

Period of Occupancy: _____ years _____ months (Please Circle) RENTING / OWNED / BOARDING

Reason for Leaving: _____

Name of Agency or Owner: _____ Phone: _____

APPLICANT 1 PREVIOUS PROPERTY DETAILS:

Address: _____

Period of Occupancy: _____ years _____ months (Please Circle) RENTING / OWNED / BOARDING

Reason for Leaving: _____

Name of Agency or Owner: _____ Phone: _____

APPLICANT 1 EMERGENCY CONTACT: Name of Relative or other NOT applying in case of emergency

Full Name: _____ Relationship: _____

Address: _____ State: _____ Postcode: _____

Ph: Home _____ Ph: Work _____ Ph: Mobile _____

Email: _____

APPLICANT 1 REFERENCES: Name of Personal Reference

Full Name: _____ Relationship: _____

Address: _____ State: _____ Postcode: _____

Ph: Home _____ Ph: Work _____ Ph: Mobile _____

Email: _____

APPLICANT 2 PERSONAL DETAILS:

Drivers Licence: _____ Passport: _____

Full Name: _____ D.O.B _____ / _____ / _____

Have you been known by any other name? YES / NO Previous Name: _____

Ph: Home _____ Ph: Work _____ Ph: Mobile _____

Email: _____

Are you a Smoker? YES / NO	No. of Vehicles:
Model/s:	Rego Number/s:

APPLICANT 2 EMPLOYMENT DETAILS:

Occupation: _____ Net Weekly Income: \$ _____

Employer: _____ Period Employed: _____

Employers Address: _____ Phone: _____

APPLICANT 2 CURRENT PROPERTY DETAILS:

Address: _____

Period of Occupancy: _____ years _____ months (Please Circle) RENTING / OWNED / BOARDING

Reason for Leaving: _____

Name of Agency or Owner: _____ Phone: _____

APPLICANT 2 PREVIOUS PROPERTY DETAILS:

Address: _____

Period of Occupancy: _____ years _____ months (Please Circle) RENTING / OWNED / BOARDING

Reason for Leaving: _____

Name of Agency or Owner: _____ Phone: _____

APPLICANT 2 EMERGENCY CONTACT: Name of Relative or other NOT applying in case of emergency

Full Name: _____ Relationship: _____

Address: _____ State: _____ Postcode: _____

Ph: Home _____ Ph: Work _____ Ph: Mobile _____

Email: _____

APPLICANT 2 REFERENCES: Name of Personal Reference

Full Name: _____ Relationship: _____

Address: _____ State: _____ Postcode: _____

Ph: Home _____ Ph: Work _____ Ph: Mobile _____

Email: _____

WILL YOU BE APPLYING FOR A DEPARTMENT OF HOUSING LOAN?	YES PROCESSING / PRE-APPROVED / NO
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CHILDREN under 18 years of Age		
Full Name:	Date of Birth / Age:	Relationship to Applicants:

PETS				
Breed:	Inside / Outside	Registered with Council	De-sexed YES / NO	Age:

Both Applicants please answer the following Questions:	Applicant 1	Applicant 2
Have you ever been evicted by any lessor or agents?	YES / NO	YES / NO
Have you ever been refused a property by any lessor or agent?	YES / NO	YES / NO
Are you in debt to another lessor or agent?	YES / NO	YES / NO
Is there any reason known to you that would affect your Rental Payment?	YES / NO	YES / NO
Was your rental bond at your last address refunded in full?	YES / NO	YES / NO

Rental Affordability - PER WEEK

NOTE: If more than one applicant on this application please combine all figures together per week.

Type of Income	Amount per Week	Type of Liabilities	Amount per Week
Income / Wage per week	\$ _____	Car Payments	\$ _____
Government Benefits	\$ _____	Personal Loans	\$ _____
Child Support Received	\$ _____	Credit Card Re-Payments	\$ _____
Rental Income	\$ _____	School Fees	\$ _____
Share Dividends	\$ _____	Child Support Payment	\$ _____
Any other Income	\$ _____	Home Loan	\$ _____
_____	\$ _____	Phone / Mobile / Internet	\$ _____
_____	\$ _____	Electricity / Water	\$ _____
_____	\$ _____	Fuel / Rego / Insurance	\$ _____
		Day to Day Living Expenses	\$ _____
Total Income per Week	\$ _____	Total Liabilities per Week	\$ _____

Any Extra details you think we may need to process your application:

Collection & Disclosure of Personal Information

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 for the ongoing management of your tenancy agreement. To carry out this role when processing your application, during the term of your tenancy and for some time thereafter, we are often required to disclose your personal information to one or more of the following:

- The Landlord
- The Landlord's lawyers, mortgagee or insurer
- Referees you have nominated
- Organisations or trades people required to carry out maintenance to the premises
- Rental bond authorities or rent bond insurance providers
- Residential Tenancy Tribunals & Courts (RTA)
- Mercantile Agents
- National Tenancy Database (NTD) a division of Veda Advantage Information Services and Solutions Limited ABN 26 000 602 862
- Other Real Estate Agents & Landlords

If your personal information is not provided to us and you do not consent to the uses 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. We request that you please sign below to acknowledge that you fully understand the National Privacy Principles and the manner in which your private information may be used.

Applicant 1 Full Name: _____ Signature: _____ Date: ___/___/___

Applicant 2 Full Name: _____ Signature: _____ Date: ___/___/___

**We thank you for applying through Caboolture REALTY.
You are welcome to return your application via the following methods:**

Email: rentals@caboolturerealty.com.au

(please email all documents in one email or clearly label the subject line with your Name)

In Person: Caboolture REALTY 17 King Street, Caboolture QLD 4510 we are
Open Mon-Fri 9.00am-5.00pm 07 5495 4733

Please provide copies of all documents for us to keep - we can photocopy for you but for a fee.

Post: Caboolture REALTY 17 King Street, Caboolture QLD 4510



"Come discover the **Caboolture REALTY** *Difference"*
17 King Street, Caboolture QLD 4510

Ph: 07 5495 4733 | Fax: 07 5495 7665
ABN 34 106 376 845
Website: www.caboolturerealty.com.au



DIRECT CONNECT PROVIDES A FREE SERVICE THAT TAKES THE HASSLE OUT OF MOVING.

Simply complete the form below, select the services you would like organized and return this form to your Agent.

Direct Connect will then contact you to confirm your details and service request.



 ELECTRICITY	 GAS	 INSURANCE	 INTERNET	 PHONE	 PAY TV	 REMOVALISTS	 CLEANING	 TRUCK HIRE
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Please tick this box if you would like Direct Connect to contact you in relation to any of the above utilities and other services.

PERSONAL DETAILS:

Full Name: _____ D.O.B _____ / _____ / _____

Ph: Home _____ Ph: Work _____ Ph: Mobile _____

Email: _____

NEW CONNECTION Details - I'm moving to: _____	Connection Date: _____
DISCONNECT Details - Address you are moving out of: _____	Disconnection Date: _____



We guarantee that when you connect with one of our market leading electricity and gas suppliers, your services will be connected on the day you move in. Please refer to Direct Connect's Terms & Conditions for further information.

Once Direct Connect has received this application Direct Connect 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 your information and explain the details of the services offered. Direct Connect is a one stop connection service. Direct Connect's services are free. However, the relevant service providers may charge you a standard connection fee as well as ongoing service charges.

DECLARATION AND EXECUTION: By signing this application, you:

1. Acknowledge and accept Direct Connect's Terms and Conditions (which are included with this application).
2. Invite Direct Connect to contact you by any means (including by telephone or SMS even if the Customer's telephone number is on the Do Not Call Register) in order to provide Direct Connect's services to you, to enter into negotiations with you relating to the supply of relevant services as agent for the service providers, and to market or promote any of the services listed above. This consent will continue for a period of 1 year from the date the Customer enters into the Agreement.
3. Consent to Direct Connect using the information provided by you in this application to arrange for the nominated services, including by providing that information to service providers for this purpose. Where service providers are engaged by you, they may use this information to connect, supply and charge you for their services.
4. Authorize Direct Connect to obtain the National Metering Identifier and / or the Meter Installation Reference Number for the premises you are moving to.
5. Agree that, except to the extent provided in the Terms and Conditions, Direct Connect has no responsibility to you for the connection or supply (or the failure to connect or supply) any of the services.
6. Acknowledge that Direct Connect may receive a fee from service providers, part of which may be paid to the real estate agent or to another person, and that you are not entitled to any part of any such fee.

By signing this application form, I warrant that I am authorized to make this application and to provide the invitations, consents, acknowledgements, authorizations and other undertakings set out in this application on behalf of all applicants listed on this application.

Signature: _____ Date: _____ / _____ / _____

