

# Tenancy Application Form

Please be advised, this application will only be processed once ALL details have been completed and all copies of all supporting documents attached. Each applicant must submit an individual form.



## A. AGENCY DETAILS

Professionals Armidale

Address: 2/117 Beardy Street, Armidale NSW 2350

Phone: 02 6772 4549

Fax: 02 6772 3878

E-mail: armidale@professionals.com.au

Web: www.professionalsarmidale.com.au

Property Manager

## B. PROPERTY DETAILS

### 1. Address of Property:

### 2. Lease Commencement Date:

<input type="text"/>	Day	<input type="text"/>	Month	<input type="text"/>	Year
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### 3. Lease Term:

<input type="text"/>	Years	<input type="text"/>	Months
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### 4. How many tenants will occupy the property?:

<input type="text"/>	Adults	<input type="text"/>	Children	<input type="text"/>	Ages of Children
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## C. PERSONAL DETAILS

### 5. Please give us your details

Mr  Ms  Miss  Mrs  Dr  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)

### 6. Please provide your contact details

Home phone no.

Mobile phone no.

Work phone no.

Fax no.

Email address

I allow all correspondence to be sent via email throughout the term of my tenancy

### 7. What is your current address?

### 8. How did you find out about this property?

<input type="checkbox"/> Newspaper	<input type="checkbox"/> The Internet	<input type="checkbox"/> Local Paper
<input type="checkbox"/> Office	<input type="checkbox"/> Office Window	<input type="checkbox"/> Sign Board at property
<input type="checkbox"/> Referral	<input type="checkbox"/> Other (specify)	

## D. UTILITY CONNECTIONS

# YourPorter

Telephone: 1300 400 600

Fax: 1300 326 468

www.yourporter.com.au

### YourPorter is a FREE service connecting utilities and other services.

If the Agent approves this application, YourPorter will be contacting you by phone, SMS, or email for the purposes of assisting you to connect your utilities within 24 hours of receiving this application for next business day connection.

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Electricity    | <input type="checkbox"/> Telephone                 | <input type="checkbox"/> Pay TV           |
| <input type="checkbox"/> Gas            | <input type="checkbox"/> Internet                  | <input type="checkbox"/> Health Insurance |
| <input type="checkbox"/> Car Insurance  | <input type="checkbox"/> Home Loans                |   |
| <input type="checkbox"/> Life Insurance | <input type="checkbox"/> Home & Contents Insurance |   |

### DECLARATION AND ACCEPTANCE:

I/We consent to the disclosure of this application form (including any personal information contained in this form) to YourPorter Pty Ltd (ABN 36 252 576 050) for the purpose of allowing YourPorter and its service providers to contact me for the connection of services as offered by YourPorter.

I/We acknowledge that if I/We do not provide my/our personal information, YourPorter will not be able to provide these services to me/us. YourPorter will ensure that my/our personal information is collected, used, held and disclosed in accordance with the requirements of the Privacy Act 1988 (Cth).

I/We acknowledge that YourPorter may receive a benefit in relation to the connection of any of the services listed above. I/We consent to YourPorter contacting me by phone or SMS in relation to the connection of the services listed above. I/We acknowledge that this consent permits YourPorter to contact me even if the numbers listed on this application are listed on the Do Not Call Register. YourPorter will otherwise collect, hold, use and disclose personal information in accordance with their privacy policies, which are available at [www.yourporter.com.au/general/privacy-policy/](http://www.yourporter.com.au/general/privacy-policy/). YourPorter is a free service, but I/We acknowledge that standard connection fees may apply for services connected (in addition to the ongoing service fees).

I/We acknowledge that neither YourPorter nor the Agent accept any responsibility for any delay in or failure to arrange or provide for any connection of a service or for any loss, damage, cost or expense in connection with such delay or failure. By signing this application, I/We understand YourPorter is a value add product and that I/We are under no obligation to use YourPorter.

Signature

Date

## 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 such as NTD, TICA or TRA for the purpose of checking your tenancy history;

I am aware that I may access my personal information by contacting -

- NTD: 1300 563 826
- TICA: 1902 220 346
- TRA: (02) 9363 9244

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.

Signature

Date

## F. APPLICANT HISTORY

9. How long have you lived at your current address?

Years	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/fax no.

Weekly Rent Paid

<input style="width: 95%; height: 24px;" type="text"/>	\$ <input style="width: 45%; height: 24px;" type="text"/>
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12. What was your previous residential address?



13. How long did you live at this address?

Years	Months
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14. Landlord/Agent details of this property (if applicable)

Name of landlord or agent

Landlord/agent's phone/fax no.

Weekly Rent Paid

<input style="width: 95%; height: 24px;" type="text"/>	\$ <input style="width: 45%; height: 24px;" type="text"/>
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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? (circle)

FULL TIME	PART TIME	CASUAL
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Employer's name (accountant if self employed or institution if student)

Employer's address (accountant if self employed or institution if student)



Contact name

Phone no.

<input style="width: 95%; height: 24px;" type="text"/>	<input style="width: 95%; height: 24px;" type="text"/>
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Length of employment

Weekly/Fortnightly Income

<input style="width: 95%; height: 24px;" type="text"/>	Years	<input style="width: 95%; height: 24px;" type="text"/>	Months	\$ <input style="width: 95%; height: 24px;" type="text"/>
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16. Please provide your previous employment details

Occupation?

Employer's name

Length of employment

Weekly/Fortnightly Income

<input style="width: 95%; height: 24px;" type="text"/>	Years	<input style="width: 95%; height: 24px;" type="text"/>	Months	\$ <input style="width: 95%; height: 24px;" type="text"/>
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## H. CONTACTS/REFERENCES

17. Please provide a contact in case of emergency

Surname

Given name/s

<input style="width: 95%; height: 24px;" type="text"/>	<input style="width: 95%; height: 24px;" type="text"/>
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Relationship to you

Phone no.

<input style="width: 95%; height: 24px;" type="text"/>	<input style="width: 95%; height: 24px;" type="text"/>
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18. Please provide 2 personal references (not related to you)

1. Surname

Given name/s

<input style="width: 95%; height: 24px;" type="text"/>	<input style="width: 95%; height: 24px;" type="text"/>
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Relationship to you

Phone no.

<input style="width: 95%; height: 24px;" type="text"/>	<input style="width: 95%; height: 24px;" type="text"/>
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2. Surname

Given name/s

<input style="width: 95%; height: 24px;" type="text"/>	<input style="width: 95%; height: 24px;" type="text"/>
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Relationship to you

Phone no.

<input style="width: 95%; height: 24px;" type="text"/>	<input style="width: 95%; height: 24px;" type="text"/>
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## I. OTHER INFORMATION

19. Car Registration

20. Please provide details of any pets

Breed/type

Council registration / number

1. <input style="width: 95%; height: 24px;" type="text"/>	
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2. <input style="width: 95%; height: 24px;" type="text"/>	
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## J. PAYMENT DETAILS

Property Rental

\$ <input style="width: 95%; height: 24px;" type="text"/>	per week OR	\$ <input style="width: 95%; height: 24px;" type="text"/>	per month
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Rental Bond (4 weeks rent):

First payment of rent in advance (2 weeks rent)

Sub Total

Amount payable on signing tenancy agreement (bank cheque or money order only)

## K. 100 Points of ID Required

We require 100 Points of ID.

You must have:

1. A current drivers Licence or other photo ID
2. Current proof of income
3. Current rent ledger (if renting)

Application without 100 Points of ID will not be accepted.

Your 100 Point Check

Drivers Licence	40 Points
Passport	40 Points
Birth Certificate/Extract	30 Points
Other PhotoID	30 Points
Current proof of income	20 Points
Previous Landlord Reference	20 Points
Rent Ledger from other Agent	20 Points
Motor Vehicle Registration Certificate	10 Points
Bank Statement / Bank Card	10 Points
Phone / Electricity/ Gas Account	10 Points
Pension Card	20 Points
Medicare / Health Care Card	10 Points
Rates Notice (Proof of Ownership)	20 Points

Signature of Landlords Agent

Date

<input style="width: 95%; height: 24px;" type="text"/>	<input style="width: 95%; height: 24px;" type="text"/>
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