

TENANCY APPLICATION FORM

Please complete One Application Form per person.

Please refer to the Terms and Conditions before applying.

Please email completed applications to sue@sunshinebeachrealestate.com.au or bev@sunshinebeachrealestate.com.au

PLEASE ENSURE EMAIL ADDRESSES ARE PROVIDED WHERE REQUESTED. THANK YOU

PROPERTY ADDRESS :			
DATE APPLICATION RECEIVED:	/	/	RENT P/W: \$
PROPOSED LEASE START:	/	/	LEASE DURATION: MTHS

FULL NAME OF APPLICANT:		
CONTACT NUMBER:		DATE OF BIRTH:
EMAIL:		
NUMBER OF OCCUPANTS TO RESIDE AT THE PROPERTY (Include details of other occupants below):		
NAME:	AGE:	
NAME:	AGE:	
NAME:	AGE:	
NAME:	AGE:	
PETS TO RESIDE AT PROPERTY:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, provide details	TYPE:	BREED:
	TYPE:	BREED:
COUNCIL REGISTERED	<input type="checkbox"/> Yes	<input type="checkbox"/> No

CURRENT RESIDENTIAL ADDRESS:		
OWNER OCCUPIER	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, please provide a copy of CURRENT rates and/or water notices		
NAME OF RENTAL AGENCY / LESSOR / OTHER:		
PHONE NUMBER:	FAX NUMBER:	
EMAIL:		
DURATION AT PROPERTY:	/YRS	/ MTHS
		RENT P/W: \$
Please sign the Rental Tenancy Reference form on the back of this application		



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PREVIOUS RESIDENTIAL ADDRESS(If less than 12 months at current address):		
OWNER OCCUPIER	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, please provide a copy of CURRENT rates and/or water notices		
NAME OF RENTAL AGENCY / LESSOR / OTHER:		
PHONE NUMBER:	FAX NUMBER:	
EMAIL:		
DURATION AT PROPERTY:	/YRS / MTHS	RENT P/W: \$
Please sign the Rental Tenancy Reference form on the back of this application		

CURRENT EMPLOYMENT BUSINESS NAME:	
PAYROLL CONTACT:	CONTACT NO:
EMAIL:	
NET WEEKLY INCOME (\$):	
DURATION WITH EMPLOYER:	/YRS / MTHS
YOUR JOB DESCRIPTION / OCCUPATION:	
PREVIOUS EMPLOYMENT (If less than 12 months) BUSINESS NAME:	
PAYROLL CONTACT:	CONTACT NO:
EMAIL:	
NET WEEKLY INCOME (\$):	
DURATION WITH EMPLOYER:	/YRS / MTHS
YOUR JOB DESCRIPTION / OCCUPATION:	

SELF EMPLOYED BUSINESS / COMPANY NAME:	
BUSINESS ACCOUNTANT:	CONTACT NO:
EMAIL:	
Where possible, please provide CURRENT copies of proof of income . This may include Bank Statements, confirmation letter from your Accountant or Pay Slips	
NET WEEKLY INCOME (\$):	
DURATION OF SELF-EMPLOYMENT:	/YRS / MTHS

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OTHER INCOME (Please indicate by circling the below options) SUPERANNUATION / INVESTMENTS / RENTALS / CENTRELINK ALLOWANCE / CHILD SUPPORT / OTHER		
Please provide CURRENT copies of Centrelink or INCOME statement documents as proof		
NET WEEKLY INCOME (\$):		
PAYMENT PROOF ATTACHED	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If No, provide details		

PERSONAL REFERENCE 1	CONTACT NO:
NAME:	
EMAIL:	
RELATIONSHIP TO YOU:	
PERSONAL REFERENCE 2	CONTACT NO:
NAME:	
EMAIL:	
RELATIONSHIP TO YOU:	

PROOF OF IDENTITY

I agree to provide 100 point identification – requirements are as follows;

ORIGINAL I.D. WILL NEED TO BE SIGHTED AND COPIES PROVIDED

<input type="checkbox"/> Driver licence showing current address	60 points	<input type="checkbox"/> Passport	60 points
<input type="checkbox"/> Recent utilities account showing current address	30 points	<input type="checkbox"/> Last 4 rent receipts or mortgage payments	40 points
<input type="checkbox"/> Birth Certificate	20 points	<input type="checkbox"/> Medicare Card	10 points
<input type="checkbox"/> Student Identification	20 points	<input type="checkbox"/> Student Visa	30 points
<input type="checkbox"/> Credit card with signature	20 points	<input type="checkbox"/> Bank cards with signature	20 points

If you are unable to meet the 100 point criterion listed above, please speak with the Property Manager.



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TERMS AND CONDITIONS

I understand that should my application be accepted, that the Agency (on behalf of the lessor) will require a General Tenancy Agreement signed and monies rent and/or bond) paid within a reasonable time frame (in most cases within 24 hours of acceptance). I understand that all required Tenancy documents will be given to me prior to monies being taken upon acceptance.

I consent to the use of email or fax before the tenancy commences and during the tenancy (if the application is accepted by the lessor) – I understand that the tenancy agreement and required tenancy information may be emailed to me if I am unable to attend the office at an agreed Appointment time. *(If you do not consent to the use of email or fax, please cross this term out and initial the paragraph plus insert the date)*

I understand that should my application be denied by the lessor, that there is not a legal requirement to disclose reasons as to why.

I understand that if I have any questions about the Tenancy or the Application process, that the Agency welcomes and encourages enquiries prior to applications being made. I further understand that I can request a copy of the General Tenancy Agreement including all standard terms and special terms (Form 18a) and Tenancy Information Statement (Form 17a) prior to making the application. A copy shall be provided if the tenancy application is successful before any monies (rent or bond are taken)

I understand that I will be required to pay a full bond of 4 weeks rent and 2 weeks rent prior to commencing the tenancy. (Please ask the property manager if you are unsure of the total amount required to be paid if the Application is accepted by the lessor).

I provide consent for the Agency as part of application processing to contact all necessary people (such as referees, other agents, tenancy databases) to verify the Application information provided and understand that all Federal Privacy Act requirements will be adhered to by the Agency.

I consent to my information being passed on during the tenancy (should it commence) to other third parties such as the lessor, tradespeople/contractors, salespeople, bodies corporate, tenancy databases and other relevant parties in full compliance with the Federal Privacy Act and any other relevant information.

By signing this form, I have read and understood clearly all of the information outlined above.

IMPORTANT: PLEASE COMPLETE THE TOP SECTION OF AND SIGN PAGE FIVE (5) OF THIS DOCUMENT IF YOU HAVE PROVIDED A REAL ESTATE AGENT AS A RENTAL REFERENCE.

Name of Applicant	
Signature	Date

Our aim is to under promise and over deliver. We will endeavour to exceed your expectations by processing the application within one business day. This will depend on named referee availability and lessor response. We shall be in contact as soon as we can to advise you of the application outcome. Please ensure your best contact details are noted on Page 1 of this Application;

Contact by our Agency may be made via phone, sms or email.



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RENTAL TENANCY REFERENCE

**FOR COMPLETION BY RENTAL AGENCIES ONLY
 APPLICANTS PLEASE ONLY SIGN FORM AT BOTTOM**

Agency Staff: Thank you for completing this form within 24 hours.
 Please contact our Sunshine Beach Real Estate on 07 5447 2999 or info@sunshinebeachrealestate.com.au if you require further details.

PLEASE PROVIDE A COPY OF THE TENANT LEDGER

Name of Rental Agency:		
Fax Number:	Email Address:	
Name of Applicant/s:		
Property Address:		
Length of Tenancy:		
Rental per week (\$):		
Please confirm that the Applicant named above was a named tenant on the lease?	Yes	No
If no, please confirm that they were an approved occupant?	Yes	No
Were inspections carried out?	Yes	No
Were inspections satisfactory?	Yes	No
Were Notice to Remedy Breaches issued during the tenancy?	Yes	No
IF yes, Were they for rent?	Yes	No
If Yes and not issued for rent, what were Notice to Remedy Breach issued for?		
Please advise of Breaches		
Was there a pet kept at the premises?	Yes	No N/A
If Yes, were there any concerns or problems in relation to the pet kept?	Yes	No
IF yes, please provide details		
If a final inspection has been carried out, was the property returned satisfactorily?	Yes	No N/A
If no, please provide details		
Was the bond refunded in full?	Yes	No
IF no, please provide details		
Would you rent to this tenant again? Yes/No Please circle your rating Good 10 9 8 7 6 5 4 3 2 1 Not good		
Please provide any other comments or information that is important when assessing the application, thank you		

I provide consent for the Agency as part of application processing to contact all necessary people (including previous or current Agents) to verify the application and understand that all Privacy Act requirements will be adhered to by the Agency. This document will be sent to your current and/or previous Agency

Signature of Applicant

Date