



Application for Residential Tenancy

(One application to be completed per person)

PART 1: RENTAL PROPERTY DETAILS

AGENT DETAILS

AGENCY NAME:					
ADDRESS:					
SUBURB:		STATE:		POSTCODE:	
PHONE:		MOBILE:		FAX:	
EMAIL:					

PROPERTY DETAILS

ADDRESS:					
SUBURB:		STATE:		POSTCODE:	
RENT:		RENT PERIOD: (weekly/fortnightly/monthly)		BOND:	
TENANCY TERM:		<input type="checkbox"/> FIXED AGREEMENT <input type="checkbox"/> PERIODIC AGREEMENT			
STARTING ON:		ENDING ON:			

PART 2: APPLICANT DETAILS

CONTACT DETAILS

FULL NAME:				DATE OF BIRTH:	
HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAMES?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF YES, WHAT OTHER NAME(S) HAVE YOU BEEN KNOWN BY?					
WORK PHONE:		MOBILE:		HOME PHONE:	
EMAIL:					
DRIVER'S LICENCE / PASSPORT NO.			STATE:		
NUMBER OF VECHILES:			REGISTRATION NUMBER(S)		

INITIALS (Note: initials not required if signed with Electronic Signature): _____



DEPENDANTS

DO YOU HAVE ANY DEPENDANTS?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
DEPENDANT FULL NAME(S):	RELATIONSHIP TO APPLICANT:	DEPENDANT DATE OF BIRTH:	

SMOKING

ARE YOU OR ANY OF THE DEPENDANTS LIVING WITH YOU A SMOKER?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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PETS

DO YOU INTEND TO KEEP PETS AT THE PROPERTY?		<input type="checkbox"/> YES	<input type="checkbox"/> NO	NUMBER OF PETS:	
TYPE OF PET/S:		ARE YOUR PETS REGISTERED WITH A COUNCIL?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF YES, PLEASE STATE WHICH COUNCIL:		REGO NUMBER/S			
BREED/S		AGE(S)			
NAME(S)					

APPLICANTS ADDRESS HISTORY

CURRENT RESIDENTIAL ADDRESS:					
SUBURB:		STATE:		POSTCODE:	
PERIOD OF OCCUPANCY:		TYPE OF OCCUPANCY: <input type="checkbox"/> RENT <input type="checkbox"/> OWNER <input type="checkbox"/> OTHER			
CURRENT AGENT/LESSOR (If renting):					
AGENT/LESSOR PHONE:		FAX:			
AGENT/LESSOR EMAIL:					
PREVIOUS RENT:		RENT PERIOD:	(weekly/fortnightly/monthly)		
REASON FOR LEAVING:					

INITIALS (Note: initials not required if signed with Electronic Signature): _____



EMPLOYMENT DETAILS

ARE YOU EMPLOYED?: <input type="checkbox"/> YES <input type="checkbox"/> NO (if no, please provide details of previous employer, if any)			
EMPLOYMENT STATUS: <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> CASUAL <input type="checkbox"/> CASUAL <input type="checkbox"/> SELF EMPLOYED			
OCCUPATION:		NET INCOME (per week)	\$
DATE COMMENCED EMPLOYMENT (approx)		DATE TERMINATED EMPLOYMENT (if any)	
EMPLOYER / BUSINESS NAME:			
ADDRESS:			
SUBURB:	STATE:	POSTCODE:	
PHONE:	FAX:		
EMAIL:			
IF SELF EMPLOYED, ACCOUNTANTS NAME:		PHONE:	

CENTRELINK PAYMENTS

ARE YOU RECEIVING ANY REGULAR CENTRELINK PAYMENTS?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
DESCRIPTION OF PAYMENT (\$)			
TOTAL INCOME (per week)	DATE PAYMENTS COMMENCED		

STUDENT DETAILS

ARE YOU STUDYING FULL TIME?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF EDUCATION INSTITUTION YOU ARE CURRENTLY ATTENDING:			
STUDENT ID NUMBER:	ARE YOU AN OVERSEAS STUDENT?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES, VISA EXPIRY DATE:			

PERSONAL REFERENCES - please do not list relatives, another applicant or partners.

REFeree 1:					
ADDRESS:					
SUBURB:	STATE:	POSTCODE:			
PHONE:	RELATIONSHIP				

INITIALS (Note: initials not required if signed with Electronic Signature): _____



REFEREE 2:					
ADDRESS:					
SUBURB:		STATE:		POSTCODE:	
PHONE:			RELATIONSHIP		

PERSONAL REPRESENTATIVE - i.e. preferred person(s) to be contacted in the event of an emergency.

REPRESENTATIVE 1:					
ADDRESS:					
SUBURB:		STATE:		POSTCODE:	
PHONE:			RELATIONSHIP		
REPRESENTATIVE 2:					
ADDRESS:					
SUBURB:		STATE:		POSTCODE:	
PHONE:			RELATIONSHIP		

PART 3: SUPPORTING DOCUMENTS

IDENTIFICATION

YOU ARE REQUIRED TO MEET A 100 POINT IDENTIFICATION CRITERION UPON SUBMISSION OF YOUR APPLICATION. THE AGENT/LESSOR MAY PHOTOCOPY ANY ITEM AND RETAIN AS PART OF YOUR APPLICATION.

Please tick the identifying documents you have provided with your application.

IMPORTANT: At least one form of Photo Identification MUST be provided.

70 Points

☐ Passport ☐ Full birth certificate ☐ Citizenship certificate

40 Points

☐ Australian Driver's Licence ☐ Student Photo ID ☐ Department of Veterans Affairs card
☐ Centrelink card ☐ Proof of age card ☐ State/Federal Government Photo ID

25 Points

☐ Medicare card ☐ Council rates notice ☐ Motor vehicle registration ☐ Telephone Bill
☐ Electricity bill ☐ Gas bill ☐ Tenancy History Ledger ☐ Bank statement
☐ Credit card statement ☐ Last FOUR rent receipts ☐ Rent bond receipt
☐ Previous tenancy agreement

INITIALS (Note: initials not required if signed with Electronic Signature): _____



PROOF OF INCOME

YOU ARE ALSO REQUIRED TO SUPPLY THE AGENT/LESSOR WITH PROOF OF YOUR INCOME UPON SUBMISSION OF YOUR APPLICATION.

Employed:	Last TWO pay slips.
Self employed:	Bank statements, Group Certificate, Tax Return or Accountant's letter.
Not employed:	Centrelink statement.

PART 4: DECLARATION

PLEASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE OR FALSE.

I, the Applicant

1. Have never been evicted by an Agent/Lessor	<input type="checkbox"/> True	<input type="checkbox"/> False
2. Have no known reasons that would affect my ability to pay rent	<input type="checkbox"/> True	<input type="checkbox"/> False
3. Was refunded the rental bond for my last address in full (if applicable) If false, please advise what deductions were made from your bond?	<input type="checkbox"/> True	<input type="checkbox"/> False
4. Have no outstanding debt to another Agent/Lessor? If false, why are you in debt to your past Agent/Lessor?	<input type="checkbox"/> True	<input type="checkbox"/> False

PART 5: TENANCY DATABASES

THE AGENCY MAY USE THE FOLLOWING TENANCY DATABASES TO CHECK THE RENTAL HISTORY OF THE APPLICANT/S:

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PART 6: ACKNOWLEDGEMENT

PLEASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES OR NO
I, the Applicant

1. Acknowledge that my personal contents insurance is not covered under any Lessor insurance policy/s and understand that it is my responsibility to insure my own personal belongings.	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Understand that you as the Agent/Lessor have collected this information for the purpose of determining whether I am a suitable tenant for the property - in particular to check my identification, my ability to care for the property, my character and my creditworthiness.	<input type="checkbox"/> YES <input type="checkbox"/> NO
2.1 for such purposes, I authorise you to contact the persons named in this application, and to undertake such enquiries and searches (including tenancy databases searches) as you consider reasonably necessary.	<input type="checkbox"/> YES <input type="checkbox"/> NO
2.2 In doing so, I understand that information provided by me may be disclosed to, and further information obtained from, referees named in this application and other relevant third parties.	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide reasons as to why.	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the Agent/Lessor to pass my details onto others which may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases.	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), the Standard Terms and any special terms before completing this application.	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. Acknowledge that I have received or have available the Information Statement (Form 17a), body corporate by-laws (if applicable) before completing this application.	<input type="checkbox"/> YES <input type="checkbox"/> NO
7. Acknowledge that I have signed the agency's Privacy Notice and Consent.	<input type="checkbox"/> YES <input type="checkbox"/> NO
8. Acknowledge that the Lessor and Applicant (tenant) are bound by this agreement immediately upon communication of either the lessor or agent's acceptance of the application.	<input type="checkbox"/> YES <input type="checkbox"/> NO
9. Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 of the Electronic Transactions (Queensland) Act 2001 (Qld) and the Electronic Transactions Act 1999 (Cth).	<input type="checkbox"/> YES <input type="checkbox"/> NO
10. Declare that the above information is true & correct and that I have supplied it of my own free will.	<input type="checkbox"/> YES <input type="checkbox"/> NO

Name of Applicant: _____ Date: _____

Signature: _____



PART 7: TERMS AND CONDITIONS

THE TENANT UNDERSTANDS THAT SHOULD PETS BE APPROVED FOR THE PROPERTY THE FOLLOWING CONDITIONS WILL APPLY:

- a. The Tenant shall ensure that the pets are the only pets to enter onto and or to be kept at the premises;
- b. The Tenant shall if required by the Local Council, have the pets registered with said council
- c. The Tenant shall ensure that the pets do not enter the residence unless written approval is given by lessor
- d. The Tenant has satisfied itself that the premises are adequate and suitable for the pets
- e. The Tenant shall ensure that the pets do not behave in a manner which does interfere with or impact upon the peaceful enjoyment of any other person at or near the premises;
- f. The Tenant shall ensure that the pets are adequately restrained and supervised at all times whilst the Lessor or the Agent is attending the premises or alternatively removed from the premises during the Lessor or Agent's attendance at the premises;
- g. The Tenant shall ensure that all pet waste is promptly removed from the premises;
- h. The Tenant shall ensure that the pets are not fed on any carpeted area within the premises;
- i. The Tenant shall ensure that the premises is regularly and professionally treated, cleaned and deodorised (at the Tenant's sole cost) for pet odours, fleas, ticks and all other pet parasites;
- j. The Tenant shall release and forever hold the Lessor and the Agent harmless from all liabilities, debts, claims and demand connected with either this Agreement or the pets at the premises (including but not limited to any personal injury or property damage caused or contributed to by the pets);
- k. The Tenant shall indemnify the Lessor and the Agent for all and any liabilities, debts, claims or demands arising connected with either this Agreement or the pets at the premises (including but not limited to any personal injury or property damage caused or contributed to by the pets);
- l. The Tenant shall promptly pay for all and any damage to the premises caused by said pet
- m. At the end of the Tenant's tenancy of the premises, the tenant must pay for a professional carpet clean and pest control internal & externally. A breach of this Agreement shall constitute a breach of the Tenancy Agreement.
- n. This agreement shall be terminated and end on termination of the Tenancy Agreement.

Acknowledgement by Applicant

Name of Applicant: _____ **Date:** _____

Signature: _____