

# 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

### Gold Coast Property Sales & Rentals

Shop 3 195 Ron Penhaligon Way Robina QLD 4226

Ph: 07 5593 3111 Fax: 07 5593 3299

Web: www.gcsr.com.au

Email: pm1@gcsr.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

<input type="text"/>	<input type="text"/>
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Date of Birth

Driver's licence number

<input type="text"/>	<input type="text"/>
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Driver's licence expiry date

Driver's licence state

<input type="text"/>	<input type="text"/>
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Passport no.

Passport country

<input type="text"/>	<input type="text"/>
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Pension no. (if applicable)

Pension type (if applicable)

<input type="text"/>	<input type="text"/>
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### 6. Please provide your contact details

Home phone no.

Mobile phone no.

<input type="text"/>	<input type="text"/>
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Work phone no.

Fax no.

<input type="text"/>	<input type="text"/>
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Email address

### 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



**on the move**

Let **On The Move** reduce your stress and save you time by arranging your utility connections at the property .... at no extra cost! We will contact you within 2 hours to confirm.

**ELECTRICITY, GAS, TELEPHONE, INTERNET, NBN, FOXTEL, TENANCY INSURANCE**

Ph: 1300 850 360 Fax: 1300 661 160

**Terms & Conditions** – By not ticking the box below, you are consenting to On The Move contacting you to arrange your service. On The Move may need to disclose personal information to utility companies to arrange your services. On The Move and your agent may receive a benefit for arranging your services. On The Move & your agent do not accept responsibility for any delay or failure to connect you services. Standard connection fees & bonds may apply.

No, I will connect the required utilities of my own accord.

## 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 Tenancies 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:

- the owner or the Agent of my current or previous residence;
- my personal referees and employer/s;
- any record, listing or database of defaults by tenants such as NTD, TICA or TRA for the purpose of checking my 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, 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:

- communicate with the owner and select a tenant
- prepare lease/tenancy documents
- allow organisations/trades people to contact me
- lodge/claim/transfer to/from the Residential Tenancies Bond Authority
- refer to Tribunals/Courts & Statutory Authorities (where applicable)
- refer to collection agents/lawyers (where applicable)
- complete a credit check with NTD (National Tenancies Database - Phone 1300 563 826 – Email info@ntd.net.au)

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.

I consent to the disclosure of this page of the application form to **On The Move** ABN 84 101 648 257 for the purpose of enabling **On The Move** to offer the connection and disconnection services to me. Where **On The Move** is requested to arrange for the provision of the services, I consent to **On The Move** disclosing personal information it has collected about me to utility service providers for that purpose and to obtain confirmation of the connection or disconnection. I acknowledge that neither **On The Move** nor the Agent accept any responsibility for: any delay in, or failure to arrange or provide for, any connection or disconnection of a utility, or for any loss in connection with such delay or failure. I acknowledge that the Agent, its employees and **On The Move** may receive a benefit in relation to the connection of a utility service.

Signature

Date

## PROPERTY MANAGER (OFFICE USE ONLY)

Property Manager:

Application forwarded to On The Move (if required).

## 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/Agents Email

Landlord/Agent's phone/fax no.

Weekly Rent Paid

	\$
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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/Agents Email

Landlord/Agent's phone/fax no.

Weekly Rent Paid

	\$
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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)

Employer's Email

Contact name

Phone no.

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Length of employment

Net Income

Years	Months	\$
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16. Please provide your previous employment details

Occupation

Employer's name

Length of employment

Net Income

Years	Months	\$
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## H. CONTACTS/REFERENCES

17. Please provide a contact in case of emergency

Surname

Given name/s

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Relationship to you

Phone no.

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18. Please provide 2 personal references (not related to you)

1. Surname

Given name/s

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Relationship to you

Phone no.

--	--

2. Surname

Given name/s

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Relationship to you

Phone no.

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## I. OTHER INFORMATION

19. Car Registration

20. Please provide details of any pets

Breed/type

Council registration / number

1.
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2.
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## J. PAYMENT DETAILS

Property Rental

\$ per week OR \$ per month

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

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