

## RESIDENTIAL TENANCY APPLICATION FORM

PROPOSED PROPERTY ADDRESS: \_\_\_\_\_

RENT PER WEEK: \$ \_\_\_\_\_

LENGTH OF TENANCY  12 MONTHS  6 MONTHS LEASE COMMENCEMENT DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

### APPLICATION PROCESS

- Complete one Tenancy Application Form Per Person. Children may be included on a parent or guardian's application form
- The Tenancy Application Form must be completed in full, signed and all supporting documents submitted to our office. Please note we will not process any incomplete Tenancy Application Form
- A copy of the General Tenancy Agreement and any Special Terms are on display in our office; alternatively we can send you a PDF copy for your perusal via email if requested
- In most instances, we are able to process your application within 48 hours and advise the outcome of the applicant by telephone. If we are unable to contact all of your referees, this process may take longer.

### DOCUMENTS REQUIRED FOR IDENTIFICATION CHECK

#### SECTION A: PLEASE PROVIDE ONE THE FOLLOWING DOCUMENTS

Drivers Licence                      18+ Card                      Defence Force Identification Card  
Passport                                  Birth Certificate

#### SECTION B: PLEASE PROVIDE THE FOLLOWING DOCUMENTS

4 X CURRENT WAGE ADVISE      CENTRELINK INCOME STATEMENT

#### SECTION C: PLEASE PROVIDE THE FOLLOWING DOCUMENTS

If Rented Property: Copy of Tenant Ledger / Last 2 Current Rent Receipts

If Owned Property: Council rates notice

#### SECTION D: PLEASE PROVIDE 2 OF THE FOLLOWING DOCUMENTS

Motor Vehicle Registration Certificate      Gas Account                      Telephone Account  
Electricity Account                                  Bank Statement

### PROPERTY SOLUTIONS PLACE—OFFICE DETAILS

**Office Address: T10, Circa One, 1 Aspinall Street, Nundah QLD 4012**

**Email: [leasing@propsolplace.com.au](mailto:leasing@propsolplace.com.au)**

**Office Number: 07 3266 4455**

**Website: [www.propertyolutionsplace.com.au](http://www.propertyolutionsplace.com.au)**

Our office is opened, Monday through Friday 9:00am – 5:00pm, and outside of these hours by appointment.



## PERSONAL DETAILS

Title: Miss/Mrs/Ms/Mr    First Name: \_\_\_\_\_    Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_    DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Have you been known by any other name?    Yes/No  
If yes, what other name have you been known by? \_\_\_\_\_  
Marital Status \_\_\_\_\_  
Contact Details:  
Phone: \_\_\_\_\_    Work: \_\_\_\_\_    Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_  
Drivers Licence No: \_\_\_\_\_    State: \_\_\_\_\_  
18+ Card No: \_\_\_\_\_  
Passport: \_\_\_\_\_    Country: \_\_\_\_\_

## ADDRESS DETAILS

PRESENT Address: \_\_\_\_\_    Own/Rent/Sold  
Weekly Rent or Monthly Mortgage: \$ \_\_\_\_\_  
Name of Agent/Owner: \_\_\_\_\_  
Address of Agent/Owner: \_\_\_\_\_    Phone: \_\_\_\_\_  
Agent/Owner Email: \_\_\_\_\_  
Date First Lease Commenced: \_\_\_\_/\_\_\_\_/\_\_\_\_    Date Current Lease Expires (If Applicable): \_\_\_\_/\_\_\_\_/\_\_\_\_  
If Own Property, Date Property Purchased: \_\_\_\_/\_\_\_\_/\_\_\_\_  
If Own Property, Has Property Been Sold or Investment Property: \_\_\_\_\_

PREVIOUS Address: \_\_\_\_\_    Own/Rent/Sold  
Weekly Rent or Monthly Mortgage: \$ \_\_\_\_\_  
Name of Agent/Owner: \_\_\_\_\_  
Address of Agent/Owner: \_\_\_\_\_    Phone: \_\_\_\_\_  
Agent/Owner Email: \_\_\_\_\_  
Date First Lease Commenced: \_\_\_\_/\_\_\_\_/\_\_\_\_    Date Current Lease Expires (If Applicable): \_\_\_\_/\_\_\_\_/\_\_\_\_  
If Own Property, Date Property Purchased: \_\_\_\_/\_\_\_\_/\_\_\_\_  
If Own Property, Has Property Been Sold or Investment Property: \_\_\_\_\_

## VEHICLE DETAILS

Make of Vehicle: \_\_\_\_\_ Vehicle Model: \_\_\_\_\_ Registration: \_\_\_\_\_

How many vehicles will be housed at the property including your own? \_\_\_\_\_

## DEPENDENTS

Do you have any dependants? Yes/No Of so, How Many? \_\_\_\_\_

Name of Dependants other than applicant/s who will be residing at the property:

Name: \_\_\_\_\_ Age: \_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Relationship to applicant: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Relationship to applicant: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Relationship to applicant: \_\_\_\_\_

## WORK/EMPLOYMENT

### Current Employment:

Are you employed? Yes/No Occupation: \_\_\_\_\_

On what terms? Fulltime/Part-time/Casual/Contract

Date Employment Commenced: \_\_\_/\_\_\_/\_\_\_

Gross Salary: \$\_\_\_\_\_ per week/fortnight/month Next Payment Date: \_\_\_/\_\_\_/\_\_\_

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Employer's Email Address: \_\_\_\_\_

### If Current Employment is less than 6 months - Previous Employment:

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Employer's Email Address: \_\_\_\_\_

**Government Pension and Allowances:** Yes/No CRN: \_\_\_\_\_

Type of Payment/Allowance: \_\_\_\_\_ Date of Grant: \_\_\_/\_\_\_/\_\_\_

Gross Payment: \$\_\_\_\_\_ per week/fortnight

Type of Payment/Allowance: \_\_\_\_\_ Date of Grant: \_\_\_/\_\_\_/\_\_\_

Gross Payment: \$\_\_\_\_\_ per week/fortnight

## SELF EMPLOYED

Registered Name of Business: \_\_\_\_\_

ABN: \_\_\_\_\_ Length of Time in Business: \_\_\_\_\_

Type of Business: \_\_\_\_\_

If Receive Wages: Gross Salary: \$\_\_\_\_\_ per week/fortnight/month

Accountant's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

List One Major Creditor: \_\_\_\_\_ Name of Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_

\*Please attach past 3 month's bank statements and letter from accountant

## IF STUDENT

If you are a student:  FULL TIME  PART TIME

Are you an overseas student? Yes/No

Visa Expiry Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name of Learning Institution: \_\_\_\_\_ Department: \_\_\_\_\_

Student Identification Number: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Income Source: Who is responsible for your rental payments? \_\_\_\_\_

If person other than you is responsible for your rental payments please provide full details:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## PET DETAILS

Do you own a Pet? Yes/No Type of Pet: \_\_\_\_\_ Weight of Pet: \_\_\_\_\_ kg

Microchip Number: \_\_\_\_\_ Council Registration Number: \_\_\_\_\_

If you intend to have a pet residing at the property, please complete a Pet Application Form and attached with a photo of your pet.

Pet Application Attached

Photo of Pet Attached

Council Registration

## PERSONAL REFERENCES: These references cannot be family members

### Reference One:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

### Reference Two:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

## EMERGENCY CONTACTS

### Emergency One:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

### Emergency Two:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

**DECLARATIONS: Applicant to complete and provide details as required:**

Have you ever been evicted by any Landlord or Agent	YES	NO
Are you in debt to another Landlord or Agent	YES	NO
Was your bond at your last address refunded in full?	YES	NO
Was the property in a satisfactory condition when you inspected it?	YES	NO
Is there any reason known to you that would affect your ability to pay? If yes, please explain?	YES	NO
I acknowledge and agree that this is a non-smoking premises and smoking indoors is prohibited at all times	YES	NO

**ACKNOWLEDGEMENT: I, the Applicant:**

Acknowledge that my personal contents is not covered under any lessor insurance policy/s and understand that it is my responsibility insure my own belongings	YES	NO
Understand that you as the agent have collected this information for the purpose of determining whether I am a suitable tenant for the dwelling—in particular to check my identification, my ability to care for the dwelling, my character, my creditworthiness and my NRAS eligibility (if applicable)	YES	NO
- for such purposes, I authorise you to contact the persons named in this application, and to undertake such enquiries and searches (including Tenancy database) as you consider reasonable necessary	YES	NO
- In doing so, I understand that information provided by may be disclosed to, and further obtained from, referees named in this application and other relevant third parties	YES	NO
Acknowledge that Applications and supporting documentation provided by the Applicant, will not be returned and will be destroyed	YES	NO
Acknowledge and accept that if this application is denied, the agent is not legally obligated to provide reasons as to why	YES	NO
Acknowledge that I have received or have available and reviewed the General Tenancy Agreement (Form 18a), the standard terms and conditions and any special conditions before completing this application www.propertyolutionsplace.com.au	YES	NO
Acknowledge that I have received or have available the Information Statement (17a), body corporate by-laws and building covenants (if applicable), before completing this application www.propertyolutionsplace.com.au	YES	NO
Acknowledge that I have been made aware of the Agency’s Privacy and Collection Policies	YES	NO

**PRIVACY POLICY**

**PRIVACY DISCLOSURE STATEMENT:** we are an independently owned and operated business. We are bound by the *National Privacy Principles*. We collect personal information about you in this form for the purposes of assessing your application for residential tenancy. We may collect information about you from previous landlords, tenancy and property managers, your employer and your referees. We will also check whether any details of tenancy defaults by you are held on tenancy databases, including those operated by TICA Default Control Pty Ltd (TICA). You can find out more about this database on their website: [www.tica.com.au](http://www.tica.com.au)

**COLLECTION NOTICE** – the personal information provided in this application or collected from other sources is necessary for us to verify your identity, to confirm your NRAS eligibility, to process and evaluate your application, and to manage the tenancy. Personal Information collected about you in this application and during the course of the tenancy, should your application be successful, may be disclosed for the purpose for which it was collected to other parties including the owner, referees, other agents and third party operators of tenancy reference databases, NRAS Participant’s, and State and Federal Governments. Information already held on tenancy databases may also be disclosed to the Agent and/or Owner. If you enter a Residential Tenancy Agreement, and if you fail to comply with your obligations under that agreement, the facts and other relevant personal information collected about you during the course of the tenancy may also be disclosed to the owner, referees, other agents and third party operators of tenancy reference databases, NRAS Participant’s, and State and Federal Governments.

You can view the personal information collected about you and can request access to this information by contacting our Business Manager. You can also correct this information if it is inaccurate, incomplete or out of date.

If your application is not successful Property Solutions Place will destroy your documents in a secure manner – *please do not provide original copies of documents* – unless otherwise arranged. If you do not complete this form or sign the consent below then your application for residential tenancy may not be considered by the owner of the relevant property or, if considered, may be rejected.

**PRIVACY CONSENT** - I, the applicant, acknowledge that I have read the above Privacy Disclosure Statement and Collection Notice of Property Solutions Place to collect information about me, from:

- a) my previous letting agents and/or landlords;
  - b) my personal referees, employers and all other references on this application;
  - c) any Tenancy Default Database (including TICA) which may contain personal information about me. I also authorise Property Solutions Place to disclose details about any defaults by me under the tenancy to which this application relates to any tenancy default database to which it subscribes including TICA.
- authorise Property Solutions Place to refer my name and contact details to an arranger or service provider including trades-people (to attend to work required at this property), salespeople (primary or secondary agents), valuers, the owner, other agents, data base operators, other property managers, body corporate offices, insurance companies (for contents insurance and other insurance products), financial services products (to assist with home loan applications, if required in the future).

I have read and understand the Privacy Policy of Property Solutions Place and authorise them to collect information deemed necessary for the purpose of my application, and management of the tenancy, without limitation

Applicants Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_