



PROPERTY PROFESSIONALS

30 The Boulevard, Toronto NSW 2283

Phone: 4959 1677

Fax: 4950 4402

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## **COMMERCIAL APPLICATION FOR TENANCY**

**Address of premises applied for:** \_\_\_\_\_

**Trading name of business:** \_\_\_\_\_

\_\_\_\_\_

**Type of business:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

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

**Current Annual Business Turnover:** \_\_\_\_\_ **ABN:** \_\_\_\_\_

**GST Reg:** Yes / No

**Guarantor:** (if same write "Same"): **Name:** \_\_\_\_\_

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

**Mobile** \_\_\_\_\_ **Email** \_\_\_\_\_

**Current Landlord/Agent if currently leasing a commercial or residential property please complete either rental reference check attached**

**Solicitor:** \_\_\_\_\_

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

**Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email** \_\_\_\_\_

**Accountant:** \_\_\_\_\_

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

**Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

## **PERSONAL**

### **Applicant**

Full name: Mr/Mrs/Miss/Ms: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Current address: \_\_\_\_\_

Mobile: \_\_\_\_\_ Driver Licence No: \_\_\_\_\_ Car Reg. \_\_\_\_\_

Email address \_\_\_\_\_

Do you own property: YES/NO

Or renting: YES/NO (If Yes please complete  
*Rental Reference Check* attached)

### **Current Occupation Details**

Current occupation: \_\_\_\_\_

Employer's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer's email address \_\_\_\_\_

Weekly gross wage: \_\_\_\_\_ Net wage: \_\_\_\_\_

Period of employment: \_\_\_\_\_ Contact person: \_\_\_\_\_

### **Business/Work Reference**

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

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

Relationship: \_\_\_\_\_ How long known: \_\_\_\_\_

### **Personal References**

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

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

Relationship: \_\_\_\_\_ How long known: \_\_\_\_\_

**Next of Kin**

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

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

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

Mobile \_\_\_\_\_ (H) \_\_\_\_\_

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

I, the applicant, do solemnly and sincerely declare that I am not a bankrupt or an undischarged bankrupt and affirm that the information on the above and previous pages is true and correct. I have inspected the abovementioned premises and wish to take a tenancy for such premises and I confirm that the rental to be paid is within my means. I undertake to pay a rental bond in cash or as requested upon signing of the Commercial Tenancy Agreement. I agree to you phoning and checking my above details.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**NOTICE TO ALL COMMERCIAL TENANCY APPLICANTS**

Before any application will be considered, each applicant must achieve a minimum of 100 check points:

Drivers Licence	30 points
Passport	10 points
Proof of income	30 points
Last tax Group Certificate, wage /pay slip	30 points
Bank Statement	50 points



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## **CURRENT RENTAL REFERENCE CHECK (RESIDENTIAL)**

In accordance with the privacy Act, I/ we authorize the recipient of this fax to give information to Avery Property Professionals regarding my/our rental history. Attention \_\_\_\_\_

Applicants name: \_\_\_\_\_  
Rental address: \_\_\_\_\_  
Period of tenancy: \_\_\_\_\_ Rent paid: \_\_\_\_\_  
Contact name: \_\_\_\_\_ Managing agent: \_\_\_\_\_  
Agent phone number: \_\_\_\_\_ Agent Fax Number: \_\_\_\_\_  
Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### **DEAR AGENT**

**Please complete & return by facsimile to Avery Property Professionals– Fax: 4950 4402  
ALONG WITH COPY OF TENANT/S LEDGER, THANK YOU**

How long were they at the property: \_\_\_\_\_ How much was their weekly rent \$ \_\_\_\_\_

Was rent paid on time? ALWAYS ☐ SOMETIMES ☐ OTHER ☐

If other, please explain \_\_\_\_\_

Were the tenants ever issued with a termination notice?

If yes, please explain \_\_\_\_\_

Name & position of person completing this form: \_\_\_\_\_

Were there any routine inspections done? Yes ☐ No ☐

What was the result of those inspections? \_\_\_\_\_

Were the lawns & gardens kept tidy? Yes ☐ No ☐

Did they have pets? Yes ☐ No ☐

If yes, what kind? \_\_\_\_\_

Did the pets cause any damage to the property? Yes ☐ No ☐

If yes, please explain \_\_\_\_\_

Was the tenant co-operative & easy to deal with? Yes ☐ No ☐

If no, please explain \_\_\_\_\_

Did the tenants breach the tenancy agreement Yes ☐ No ☐

If yes please explain \_\_\_\_\_

Who ended the tenancy? \_\_\_\_\_

Was there a specific reason? If so please explain \_\_\_\_\_

Were the premises left clean & tidy? Yes ☐ No ☐

If no, please explain \_\_\_\_\_

Was the bond returned in full? Yes ☐ No ☐

If no, please explain \_\_\_\_\_

Would you rent to this tenant again? Yes ☐ No ☐

On a scale of 1-10 how would you rate them? (Please circle) 1 2 3 4 5 6 7 8 9 10

Additional comments \_\_\_\_\_

Signature of person completing this form \_\_\_\_\_



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Rental address: \_\_\_\_\_  
Period of tenancy: \_\_\_\_\_ Rent paid: \_\_\_\_\_  
Contact name: \_\_\_\_\_ Managing agent: \_\_\_\_\_  
Agent phone number: \_\_\_\_\_ Agent Fax Number: \_\_\_\_\_  
Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### **DEAR AGENT**

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ALONG WITH COPY OF TENANT/S LEDGER, THANK YOU**

How long were they at the property: _____	How much was their weekly rent \$ _____
Was rent paid on time? ALWAYS <input type="checkbox"/> SOMETIMES <input type="checkbox"/> OTHER <input type="checkbox"/>	
If other, please explain _____	
Were the tenants ever issued with a termination notice? If yes, please explain _____	
Name & position of person completing this form: _____	

Were there any routine inspections done?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
What was the result of those inspections? _____		
Were the lawns & gardens kept tidy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Did they have pets?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what kind? _____		
Did the pets cause any damage to the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please explain _____		

Was the tenant co-operative & easy to deal with?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If no, please explain _____		
Did the tenants breach the tenancy agreement	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes please explain _____		
Who ended the tenancy? _____		
Was there a specific reason? If so please explain _____		

Were the premises left clean & tidy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If no, please explain _____		
Was the bond returned in full?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If no, please explain _____		

Would you rent to this tenant again?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
On a scale of 1-10 how would you rate them? (Please circle) 1 2 3 4 5 6 7 8 9 10		
Additional comments _____		
Signature of person completing this form _____		