



first national
REAL ESTATE

Broken Hill

Tenancy Application Form

Before you will be given an appointment to view any property, you must first complete an application for tenancy form and be on our "approved to view" database. Each adult intending to reside at the property must fill out a separate application. This includes current & past tenants, no exceptions.

First National Broken Hill. Email: rent@fnbh.com.au Phone: 08 8088 4488 Fax: 08 8088 5046 Website: www.fnbh.com.au Office: 59 Oxide St, Broken Hill NSW 2880

Personal Information

Last Name	First	Middle	MR/MRS/MISS/MS	Age	Date of Birth
Other Names Used Previously		Mobile Phone	Alternate Phone		
Email Address			Driver's License Number & Expiry		

ALL Other Proposed Occupants

Age

Relationship

1)		
2)		
3)		
4)		
5)		

Residency History

You must provide **5-7 years** or more of residency history whether you have rented, boarded or owned.

	Current Residence	Previous Residence	Prior Residence
Street Address			
City/Suburb			
State & Postcode			
Owner/ Manager Company & Contact Name			
Owner/ Manager Contact Number			
Weekly rent paid	\$	\$	\$
Dates of Residency	From To	From To	From To
Were you asked to leave?			
Reason for Leaving?			
Did you give notice?			
Was rent paid in full to vacate date?			
Was the BOND repaid in full?	YES/NO	YES/NO	YES/NO
If No, Why & how much was claimed			

Employment History

Please **attach a copy of latest available payslip**.

	Current	Previous	Prior
Employer & Company Name			
Address			
Phone			
Occupation/Position/ Job Title			
Name of Immediate Supervisor			
Dates of Employment	From To	From To	From To
Weekly Income			
Reason for Leaving			

Centrelink Payment Information

Please **attach a current Income Statement** obtained from Centrelink.

	Main Payment	Other Payment
Payment/Entitlement Type	1)	2)
Amount Received	\$	\$
Any other entitlement/s?	NO/YES: If yes, how much.	Are you eligible for Rent Assistance? NO/YES \$
Do you owe money to Centrelink?	NO/YES: If yes, give details.	
Will you be seeking assistance from the Department of Housing?	YES/NO	Have you received assistance from the Department of Housing in the past? YES/NO

Personal References

	Name	Phone	Relationship
Reference 1			
Reference 2			

General Background Information

Have any of the occupants listed above:	Been convicted of a Felony?	Been Evicted?	Declared Bankruptcy?	Broken a lease?	Been Party to a lawsuit?	Been listed on TICA?
	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO	YES/NO
If Yes to any of the above, please explain.						

Vehicles

Make/Model		Year		Colour	
Make/Model		Year		Colour	

Vehicle Number Plate & State Registered:

Emergency Contact (do not use a person you will be living with, this is in the case of an emergency)			
Full Name		Relationship	
Address			
Contact Number/s		Email	

Type of Rental Property You Require

House or Unit/Flat?		Unfurnished or Furnished	
How many Bedrooms & Bathrooms?		Maximum rent per week you are prepared to pay	\$
Length of Lease preferred?		How soon do you require a property?	

Do you have any Pets?

NO/YES If YES, please put the details below

If you have a reference for your pet please attach.

Dog or Cat etc.	Sex	Age	Breed	Desexed?	Name	Inside or Outside?
1)						
2)						
3)						

Company Details (if applicable)

Company Name:		ABN:	
Business Type:		Contact Name:	
Company Mailing Address			
Email and/or Phone number:			

I acknowledge that this application is subject to approval by the First National office. I declare that all information contained in this application is true and correct and given of my own free will.

I authorise the agent to obtain personal information from:

- (a) The owner or agent of my current or previous residences.
- (b) My personal referees and employer/s
- (c) Any record listing or database of defaults by tenants such as TICA for the purpose of checking your tenancy history.

I am aware that I may access my personal information by contacting TICA 1902 220 346.

I am aware that the Agent will use and disclose my personal information in order to

- (a) Communication with the owner and the tenant.
- (b) Prepare lease/tenancy documents.
- (c) Allow tradespeople or equivalent organisations to contact me.
- (d) Lodge/claim/transfer to/from a Bond Authority.
- (e) Refer to Tribunals/Courts & Statutory Authorities (where applicable)
- (f) Refer to collection agents/lawyers (where applicable)
- (g) Add my details to the TICA Virtual Manager

If I default under a rental agreement, I agree that 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 understand that if my application is incomplete or misleading in any way, my application will not be considered.

I give permission for the Agent to add my details to the TICA Virtual Manager	YES/NO
I have attached photo identification.	YES/NO
I have provided proof of income.	YES/NO
I have an existing NSW Rental Bonds Online Logon Account that I wish to use for this tenancy	YES/NO
I would like Direct Connect to help connect my Electricity (Information overleaf)	YES/NO
I understand all First National Broken Hill rental properties are to remain Smoke Free.	YES/NO
Signature:	Date:



PO Box 1519, Box Hill, Victoria 3128. P: 1300 664 715 F:1300 664 185.
www.directconnect.com.au

This is a free service that connects your ELECTRICITY.

Direct Connect will make all reasonable efforts to contact you within 24 hours of the nearest working day on receipt of this Application to confirm the information on this Application and explain the details of the services offered. Direct Connect is a utility one stop connection service.

DECLARATION & EXECUTION

By selecting yes on the application form, you agree to:

1. Acknowledge and accept Direct Connect's Terms and Conditions (which are included with this application).
2. Invite Direct Connect to contact you by any means (including by telephone or SMS even if the Customer's telephone number is on the Do Not Call Register) in order to provide Direct Connect's services to you, to enter into negotiations with you relating to the supply of relevant services as an agent for the service providers, and to market or promote any of the services listed above. This consent will continue for a period of 1 year from the date the Customer enters into the Agreement
3. Consent to Direct Connect using the information provided by you in this application to arrange for the nominated services, including by providing that information to service providers for this purpose. Where service providers are engaged by you, they may use this information to connect, supply and charge you for their services.
4. Authorise Direct Connect to obtain the National Metering Identifier and / or the Meter Installation Reference Number for the premises you are moving to.
5. Agree that, except to the extent provided in the Terms and Conditions, Direct Connect has no responsibility to you for the connection or supply (or the failure to connect or supply) any of the services.
6. Acknowledge that Direct Connect may receive a fee from service providers, part of which may be paid to the real estate agent or to another person, and that you are not entitled to any part of any such fee.

By selecting yes on the application form, you warrant that you are authorised to make this application and to provide the invitations, consents, acknowledgements, authorisations and other undertakings set out in the application on behalf of all applicants listed on the application.