Residential Application Form

For your application to be processed you must answer all questions (including the reverse side)

A. AGENT DETAILS

Austrump Hosting Office

Office: 15 24 Lakeside Drive **Burwood East VIC 3151**

Phone: 0413 360 827

Email: rentals austrumpglen.com.au

B. IDENTIFICATION Driver's licence 50 points Passport 50 points Proof of age card 50 points Student ID card 50 points Copy of mobile phone account 50 points Copy of Medicare card 50 points Concession / pension card 10 points Copy of gas / water / electricity account 50 points each

C. PROPERTY DETA 1. What is the address	NLS s of the property you would like to rent?
	Postcode
2. Property Rental?	Don'd
\$ per week	\$ per month \$ Bond
3. Preferred move in o	date?
Day	Month Year
4. Lease Term?	
Years	Months
5. How many people v	will normally occupy the property?
Adults	Children, Ages:
D. PERSONAL DETA	AILS
6. Please give us your	
6. Please give us your	details.
6. Please give us your Given Name/s	details.
6. Please give us your Given Name/s Date of Birth	details.
6. Please give us your Given Name/s Date of Birth	details.
6. Please give us your Given Name/s Date of Birth Driver's licence expiry o	details.
6. Please give us your Given Name/s Date of Birth Driver's licence expiry o	Driver's licence state Driver's licence state
6. Please give us your Given Name/s Date of Birth Driver's licence expiry of Passport number	Driver's licence number Driver's licence state Passport country
6. Please give us your Given Name/s Date of Birth Driver's licence expiry of Passport number	Driver's licence number Driver's licence state Passport country
6. Please give us your Given Name/s Date of Birth Driver's licence expiry of the second part of the second	Driver's licence number Driver's licence state Passport country r contact details. Mobile phone number
6. Please give us your Given Name/s Date of Birth Driver's licence expiry of the second part of the second	Driver's licence number Driver's licence state Passport country r contact details.
6. Please give us your Given Name/s Date of Birth Driver's licence expiry of the second part of the second	Driver's licence number Driver's licence state Passport country r contact details. Mobile phone number
6. Please give us your Given Name/s Date of Birth Driver's licence expiry of the second sec	Driver's licence number Driver's licence state Passport country r contact details. Mobile phone number

Postcode

E. UTILITY CONNECTIONS



Telephone: 1300 400 600 Fax: 1300 326 468 www.vourporter.com.au

YourPorter is a FREE service connecting utilities and other services.

If the Agent approves this application, YourPorter will connect your water for the purpose of usage charges at your new property on behalf of the Real Estate Agent. YourPorter will be contacting you by phone, SMS, or email for the purposes of assisting you to connect your utilities within 24 hours of receiving this application for next business day connection.

☐ Electricity ☐ Telephone	☐ Gas ☐ Pay TV	☑ Water □ Internet
☐ Car Insurance ☐ Life Insurance	☐ Home & Contents ☐ Home Loans	☐ Health Insurance

DECLARATION AND ACCEPTANCE: I/We consent to the disclosure of this application form (including any personal information contained in this form) to YourPorter Pty Ltd (ABN 36 252 576 050) for the purpose of allowing YourPorter and its service providers to contact me for the connection of services as offered by YourPorter.

I/We acknowledge that if I/We do not provide my/our personal information, YourPorter will not be able to provide these services to me/us. YourPorter will ensure that my/our personal information is collected, used, held and disclosed in accordance with the requirements of the Privacy Act 1988 (Cth)

I/We acknowledge that YourPorter may receive a benefit in relation to the connection of any of the services listed above. I/We consent to YourPorter contacting me by phone or SMS in relation to the connection of the services listed above. I/We acknowledge that this consent permits YourPorter to contact me even if the numbers listed on this application are listed on the Do Not $\label{lem:continuous} \textbf{Call Register. YourPorter will otherwise collect, hold, use and disclose personal information in}$ accordance with their privacy policies, which are available at www.yourporter.com.au/general/ privacy-policy/. YourPorter is a free service, but I/We acknowledge that standard connection fees may apply for services connected (in addition to the ongoing service fees)

I/We acknowledge that neither YourPorter nor the Agent accept any responsibility for any delay in or failure to arrange or provide for any connection of a service or for any loss, damage, cost or expense in connection with such delay or failure. By signing this application, I/We understand YourPorter is a value add product and that I/We as

Signature	Date
Χ	

F. 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 Residential Tenancies Agreement pursuant to the Residential Tenancies Act 1997.

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:
 (a) 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.

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:

- (a) communicate with the owner and select tenant
- (b) prepare lease/tenancy documents
- (c) allow tradespeople or other persons authorised by the Austrump Hosting Office or the owner to contact me for the purpose of carrying out inspections, valuations, appraisals, repairs and/or maintenance on a property tenanted by me if my application is successful
- (d) lodge/claim/transfer to/from the Residential Tenancies Bond Authority undertake and/or enforce legal process/decisions of a Tribunal/Court and/or Statutory Authority (where applicable)
- (e) instruct collection agents/lawyers with respect to rental or other similar tenancy a related matters (where applicable)
- complete a credit check with a residential tenancy database provider or other credit reporting agency
- (g) register or transfer water account details into my name
- (h) provide me with information from time to time that may be of interest to me including via

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 am aware that my personal information will be added to the Austrump Hosting Office databases and that this involves disclosure to third parties who manage the Austrump Hosting Office databases and email marketing. I am aware that I can opt-out of the Austrump Hosting Office email marketing program at any time.

I am aware that the Austrump Hosting Office Privacy Policy contains information about access to the Personal Information that the Austrump Hosting Office holds about me, how to seek correction of such information, how to complain about an alleged breach of the Australian Privacy Principles; how the Austrump Hosting Office will deal with such a complain; and that the Privacy Policy can be viewed without charge at http://www.austrumpglen.com.au

Date	
	Date

G. APPLICANT HISTORY	I. CONTACTS / REFERENCES		
9. How long have you lived at your current address?	17. Please provide a contact in case of emergency.		
Years Months	Surname Given name/s		
10. Why are you leaving this address?			
The state of the s	Relationship to you Phone number		
11. Landlord/Agent details of this property (if applicable).	18. Please provide three personal references (not related to you).		
Name of landlord or agent	1. Surname Given name/s		
Landlord/agent's phone number Weekly rent paid	Relationship to you Phone number		
\$			
12. What was your previous residential address?	2. Surname Given name/s		
Strict was your previous residential address.			
	Relationship to you Phone number		
Postcode	The state of the s		
13. How long did you live at this address?			
Years Months	3. Surname Given name/s		
14. Landlord/Agent details of this property (if applicable).			
Name of landlord or agent	Relationship to you Phone number		
Traine or landiord or agent			
Landlord/agent's phone number Weekly rent paid	J. OTHER INFORMATION		
	19. Please provide details of any vehicles.		
\$	Registration number Make/model		
Was bond refunded in full? If NO, why not?			
YES NO	20. Please provide details of any pets.		
	Breed/Type Council registration / number		
H. EMPLOYMENT HISTORY	1.		
15. Please provide your employment details.			
What is your occupation?	2.		
What is the nature of your employment?	** PLEASE NOTE**		
(FULL-TIME / PART-TIME / CASUAL)	Initial payments must be made by cash, bank cheque or money order within 24 hours after approval of application.		
Employer's name (inc. accountant if self-employed or institution if a student)	NO PERSONAL CHEQUES PLEASE.		
	Keys will not be handed over until the lease agreement has been signed by all		
Employer's address	applicants. This application is accepted subject to the availability of the property on the		
	due date and no action shall be taken by the applicant against the landlord and		
	the agent should any circumstances arise whereby the property is not available for occupation on the due date.		
Postcode	·		
Contact name Phone number	MOVING CHECKLIST		
	Discontinue these services:		
Length of employment Net Income (PA)	Electricity & Gas		
Years Months \$	Arrange connection for these services:		
16. Please provide your previous employment details.	Electricity & Gas		
Occupation	Foxtel Notify your change of address to:		
	Notify your change of address to: The Electoral Commission □ Bank □		
	Post Office (mail redirection) Consultants/Advisors		
Employer's name	Insurance company Health Insurance Fund		
	VicRoads for car registration □		
Length of employment Net Income (PA)	Reminder:		
Years Months \$	Cancel house insurance/have a new policy for your next residence		
Years Months \$ Update your Will or POA			