

Tenancy Application Form

Please be advised that 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.

PROPERTY DETAILS

Address of Property:	
Lease commencement date:	Lease term:
Rent per week:	Number and type of pets:
Names of all other occupants for the property:	
Names and ages of any children to occupy the property:	

PERSONAL DETAILS

Given Name(s):	Surname:
Current Address:	
Home Phone:	Work Phone:
Mobile:	Fax:
Email:	Date of Birth:
Drivers Licence No:	Drivers Licence State:
Passport No:	Passport Country:

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Given Name(s):	Surname:	
Relationship:		
Address:		
Phone:	Mobile:	Email:

CURRENT TENANCY DETAILS

Length of time at current address:	Rent Paid:
Reason for leaving:	
Name of Landlord / Agent:	Phone:

PREVIOUS RENTAL HISTORY 1

Previous Address:		
Length of time at above address: From	to	Rent Paid:
Name of Landlord / Agent:		Phone:
Was Bond refunded in full?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If No, please specify reasons why:		

PREVIOUS RENTAL HISTORY 2 (IF CURRENT TENANCY IS LESS THAN 6 MONTHS)

Previous Address:		
Length of time at above address: From	to	Rent Paid:
Name of Landlord / Agent:		Phone:
Was Bond refunded in full?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If No, please specify reasons why:		

CURRENT EMPLOYMENT DETAILS

Occupation:	Current Employer:
Employer's Address:	
Contact Name (payroll / manager):	Contact Number:
Length of Employment:	

SELF EMPLOYMENT DETAILS

Company Name:	Business Type:
Business Address:	
Position Held:	ABN:
Accountant Name:	Phone:
Accountant Address:	

INCOME

Net weekly employment income:
Net weekly income from other sources:
Source(s) of other income:

PREVIOUS EMPLOYMENT (IF CURRENT EMPLOYMENT IS LESS THAN 6 MONTHS)

Occupation:	Previous Employer:
Employer's Address:	
Contact Name (payroll / manager):	Contact Number:
Length of Employment: From to	Net weekly income:

STUDENT INFORMATION

Place of Study:	Course Name:
Course Length:	Enrolment / Student No:
Campus Contact:	Contact Number:
Course Co-ordinator:	Contact Number:

REFEREES

Business referee:	Relationship:
Phone:	Mobile:
Personal referee:	Relationship:
Phone:	Mobile:

RAY WHITE CONNECT – FREE SERVICE

To save you time when you're moving house, Ray White can assist you by arranging your utility connections, discounts on your insurance and discounts on removal and self storage services.

It's a FREE service and there's NO obligation. Please tick the box below if you would like Ray White Connect, Ray White Insurance, Ray White Concierge to call you and explain how the service works.

Yes, I would like to be contacted by Ray White Connect, Ray White Insurance and Ray White Concierge

Ray White Connect:

Phone: 1300 556 325 Email: connect@raywhite.com Fax: 1300 256 837 Web: www.raywhiteconnect.com.au

Ray White Insurance :

Phone : 1800 221 773 Email : insurance@raywhite.com Fax : 07 3257 4386 Web : www.raywhiteinsurance.com.au

Ray White Connect, Ray White Insurance will use the information in this application to explain the services offered and to undertake any connection and disconnection services authorized (including the provision of information to utility companies). Personal information collected by Ray White Connect, Ray White Insurance may be accessed by contacting them on the contact details above. While the Ray White Connect service is FREE, normal service provider fees or bonds may apply for utility connections.

OFFICE USE ONLY

100 POINT IDENTIFICATION CHECK - The following identification has been photocopied and is attached to this application

Item	<input type="checkbox"/>	Points	Initial		<input type="checkbox"/>	Points	Initial
Drivers License	<input type="checkbox"/>	40		Medicare Card	<input type="checkbox"/>	20	
Passport	<input type="checkbox"/>	40		Bank Debit/Credit Card	<input type="checkbox"/>	20	
Other Photo ID	<input type="checkbox"/>	20		Bank Statement	<input type="checkbox"/>	20	
Current Wage Advice	<input type="checkbox"/>	30		Telephone Account	<input type="checkbox"/>	20	
Previous Tenancy Reference	<input type="checkbox"/>	20		Electricity Account	<input type="checkbox"/>	20	
Previous 2 Rent Receipts	<input type="checkbox"/>	20		Gas Account	<input type="checkbox"/>	20	

Item	<input type="checkbox"/>	Initial		<input type="checkbox"/>	Initial
Personal Reference Checked	<input type="checkbox"/>		Previous Agent Lessor Checked	<input type="checkbox"/>	
Tenancy Database Checked	<input type="checkbox"/>		Lessor Notified - Approved	<input type="checkbox"/>	
Employment Checked	<input type="checkbox"/>		Applicant Notified	<input type="checkbox"/>	

Property Manager Name

Signature

Date