

TENANT APPLICATION

Ph: 9602 2100 Fax: 9602 2900
PO Box 173, Liverpool NSW 1871
3/39 Memorial Ave, Liverpool NSW 2170
Email: liverpool.rentals@raywhite.com

PREMISES FOR LEASE: _____

RENT: \$ _____

P/W _____

PERSONAL DETAILS (Applicant 1)

Surname: Mr/Mrs/Ms _____ Languages Spoken: _____

Given Names: _____ Date of Birth: _____

Address: _____

Phone - Home: _____ Business: _____ Mobile: _____

Employer's Name: _____

Employer's Address: _____

Employer's Phone: _____ Contact: _____

Occupation: _____ Period Employed: _____ Nett Wkly Income: _____

Driver's Licence No: _____ State: _____ Email: _____

PERSONAL DETAILS (Applicant 2)

Surname: Mr/Mrs/Ms _____ Languages Spoken: _____

Given Names: _____ Date of Birth: _____

Address: _____

Phone - Home: _____ Business: _____ Mobile: _____

Employer's Name: _____

Employer's Address: _____

Employer's Phone: _____ Contact: _____

Occupation: _____ Period Employed: _____ Nett Wkly Income: _____

Driver's Licence No: _____ State: _____ Email: _____

TENANCY HISTORY

Name of last/present Landlord/Agent: _____

Address: _____ Phone: _____

Contact: _____ Can a receipt/ledger be supplied: YES / NO

Address of last premises leased: _____

Period of Tenancy: _____ Rent \$ _____ Per Wk

NUMBER OF OCCUPANTS: Adults _____ Children _____ Ages _____ **PET(S):** YES / NO

PERSON TO BE NOTIFIED – In an emergency

Name: _____ Relative / Friend
Address: _____
Phone - Home: _____ Business: _____ Mobile: _____
Next of Kin (1): _____ Phone: _____
Next Of Kin (2): _____ Phone: _____

NOTICE TO APPLICANTS

Prior to any Tenancy Applications being considered, each applicant is required to produce sufficient identification. Should you have any difficulties in providing this identification, please **contact us at the office** prior to completing.

Tenants' Declaration

Documents provided to substantiate the applicant's identity: (please select all applicable items):

- Photo ID e.g. Driver Licence/Passport/Visa/etc.
- Bank Statement
- Rental Ledger
- Centrelink Income Statement
- Utility Account (e.g. gas, electricity, bills, etc.)
- Other- give details _____

- a. I accept that if any of my information is false or misleading, the agent has the right to reject my application & deposit.
- b. I also declare that all of the information I have provided is true and correct to the best of my knowledge:

Full Name:

Signature:

Date:

Declaration & Privacy Statement Consent

IT IS HEREBY ACKNOWLEDGE THAT,

1. I/We state that the written details are true and correct and given in support of my tenancy application to Ray White Liverpool Rentals.
2. I understand the Privacy Act allows Ray White Liverpool Rentals to give certain personal information contained in the tenancy application.
3. I understand this information may be used to assess my application of tenancy, and credit reference or credit application.
4. I authorize Ray White Liverpool Rentals to make enquiries about the information included on my tenancy application from any other source.
5. I consent that any outstanding monies can be passed on to a debt collection agency.
6. I agree to pay one week's rent as holding deposit once my application is has been approved. This deposit will be applied to rent upon signing of the tenancy agreement. If I decide not to take the property after this deposit has been paid, I understand that I forfeit this deposit in full.
7. I/We understand that two weeks rent in advance & four weeks in bond are required upon sign up of the lease.
8. I acknowledge that any refund will be made by **cheque only**.
9. Should my application be declined, I allow the Agent to dispose of all my documentations after 7 days.
10. We have inspected the property I/We applying for: Yes No

Signature 1: _____ Signature 2: _____

Date: _____ Date: _____

Ray White Liverpool Rentals is committed to providing superior Property Management services to our Tenants.

We look forward to providing you a hassle free service.

Office Hours:

Monday - Friday 9.00am to 5.30pm

Saturday 10.00 Am- 2.00 Pm

PH: 9602 2100 Fax: 9602 2900

3/39 Memorial Ave, Liverpool NSW 2170

Email: liverpool.rentals@raywhite.com

Website: www.raywhiteliverpoolrentals.com.au

Please note:

Once the application is received, it will be processed within 24 hours. If approved a deposit of 1 weeks rent will be required on the same day.

OFFICE USE ONLY – (TO BE ATTACHED TO APPLICATION)

Name/s on Lease:	
Period Of Fixed Term: 6/12 Months	
Lease Commencement Date	Lease Sign Up Date & Time:
Direct Debit Form Given: Yes / No	Direct Connect Signed: Yes / No
Total Amount Due (Bond & Rent): \$	Deposit Paid: \$
Balance Due: \$	Method Of Payment Explained : Yes/No
Letting Fee:	Lease Fee: \$