

PROPERTY MANAGEMENT TELEPHONE (07) 4123 3555

Email: admin@walpavey.com.au Web: www.walpavey.com.au

OFFICE USE ONLY	
Date Received:	_
Outcome:	_
Applicant Notified:	_
Start Date:	_
Rent: \$ Bond \$	
Sign Up:	

Residential Tenancy Application

Please be advised that this application will only be processed once ALL details have been completed with copies of supporting documents attached. Each adult who will be residing at the property must complete below and supply documentation required.

ease commencement:	Lease term:	Rent per week: \$
APPLICANT 1: PERSONA	AL DETAILS	
iven Name(s):		Surname:
ave you ever been known b	y any other name?: (eg. Maid	en name)
		er: Expiry date:
ome Phone:	Work Phone:	Mobile:
URRENT ADDRESS DE	TAILS	
urrent Address:		Rent per week:
		Length of time at current address:
		Phone:
BENIUIS VUUBECC UE	TAILS (DIEASE DROVIDE ANA	IIMUM OF THE LAST 5 YEARS HISTORY)
	-	
		Rent per week: Length of time at current address:
		Phone:
		please specify reason why:
ame of Landlord / Agent: _	Length of time at current address: Phone: Yes□ No□ If no, please specify reason why:	
		picase speemy reason why.
URRENT EMPLOYMEN	II DETAILS	
\ . - . •	_	O
-	-	Current Employer:
mployer's Address:		
mployer's Address: ontact Name:		Contact Number:
mployer's Address: ontact Name:		
mployer's Address:ontact Name: ength of employment: other source of income: (eg. C	Nett w	Contact Number: reekly income: \$ Centrelink number:
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mployer's Address: ontact Name: ength of employment: wher source of income: (eg. Clett weekly income: \$ IEXT OF KIN iven Name(s):		Contact Number: reekly income: \$Centrelink number:Surname:
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mployer's Address: ontact Name: ength of employment: wher source of income: (eg. Clett weekly income: \$ IEXT OF KIN iven Name(s): elationship: hone:	Nett w entrelink) Address:Mobile:	Contact Number:
mployer's Address: ontact Name: ength of employment: wher source of income: (eg. Complete weekly income: \$ IEXT OF KIN viven Name(s): elationship: hone: EFFREES usiness referee:	Nett w entrelink) Address:Mobile:	Contact Number:
mployer's Address: ontact Name: ength of employment: ther source of income: (eg. Clett weekly income: \$ IEXT OF KIN iven Name(s): elationship: hone: EFFREES usiness referee: hone:		Contact Number:

APPLICANT 2: PERSONAL D Given Name(s):		name:	<u></u>
Have you ever been known by any	other name?: (eg. Maiden nan	ne)	
Date of Birth:	Orivers Licence number:	Expiry date:	
		Mobile:	
Email Address:		Do you smoke? Yes \square	
CURRENT ADDRESS DETAILS	•		
		Rent per week:	
Reason for leaving:		Length of time at current address:	
		Phone:	
_			
PREVIOUS ADDRESS DETAIL			
		Rent per week:	
		Length of time at current address:	
		Phone:	
Was bond refunded in full:	☐ Yes ☐ No If no	o, please specify reason why:	
PREVIOUS ADDRESS DETAIL	S (PLEASE PROVIDE MINIMU	VI OF THE LAST 5 YEARS HISTORY)	
		Rent per week:	
		Length of time at current address:	
		Phone:	
Was bond refunded in full:	☐ Yes ☐ No If no	o, please specify reason why:	
		· · · · · · · · · · · · · · · · · · ·	
CURRENT EMPLOYMENT DI	_		
		Current Employer:	
mployer's Address:			
		Contact Number:ncome: \$	
Nett weekly income: \$ NEXT OF KIN Given Name(s):		ıme:	
Relationship:			
Phone:		Email:	
REFEREES			
Business referee:		•	<u> </u>
Phone:		Mobile:	
Personal referee:		ionship:	
Phone:		Mobile:	
EPENDANTS - Do you have dep	endants? YES NO (If yes,	please list below)	
ull Name/s	Relationship to Applica	nt Dependant Date of Birth	1
ETS - Do you have pets? YES N	O (If yes, please list below)	·	
Type of Pet/s	Number of Pet/s	Registered with Council	
<u> </u>		Tion to the state of the state	
	1		

SUPPORTING DOCUMENTS

IDENTICATION - Each applicant are required to meet a 100 point identification criterion upon submission of your application. The Agent/Lessor may photocopy any item and retain as part of your application. If required our office will provide a photocopy service at a cost of 10 cents per page

Please tick the identifying documents you have provided with your application.

IMPORTANT: At least one form of Photo Identification MUST be provided

70 points		
☐ Passport	☐ Full Birth Certificate	☐ Citizenship Certificate
40 points		
☐ Australian Driver's Licence	☐ Student Photo ID	☐ Department of Veterans Affairs card
☐ Centrelink Card	☐ Proof of age card	☐ State/Federal Government Photo ID
25 points		
☐ Medicare Card	☐ Council rates notice	☐ Motor vehicle registration
☐ Telephone Bill	☐ Electricity bill	☐ Gas Bill
☐ Tenancy History Ledger	□ Bank Statement	☐ Credit Card Statement
☐ Last FOUR rent receipts	☐ Rent bond receipt	☐ Previous tenancy agreement
PROOF OF INCOME – you are also r	equired to supply the Agent.	Lessor with proof of your income upon
submission of your application.		
☐ Employed: Last TWO pay slips	i.	
☐ Self employed: Bank Stateme	nt, Group Certificate, Tax Ret	urn or Accountant's Letter
☐ Not Employed: Centrelink Sta	tement	

PRIVACY DISCLOSURE STATEMENT

Wal Pavey Real Estate is an independently owned and operated business and are bound by the National Privacy principles. We collect personal information about you in this form to assess your Application for tenancy. We may need to collect information about you from your previous Lessors or Letting Agent/s, your Employer and Referees. We will also use the TICA database to check the rental history of the Applicant/s.

COLLECTION NOTICE

The personal information you provide in this Application or our Agency collects from other sources is necessary for Wal Pavey Real Estate to verify your identity, to process and evaluate the Application and to manage the tenancy. If the Application is successful, personal information collected about you in this Application and during the course of your tenancy, may be disclosed for the purpose of which it is collected to other parties including the Lessor, Referees, other agents and third party operators of Tenancy Databases. Information already held on Tenancy Databases may also be disclosed to our Agency and/or the Lessor. If you enter into a General Tenancy Agreement and if you fail to comply with your obligations under the Agreement, the facts and other relevant personal information collected about you during the course of your Tenancy may be disclosed to the Lessor, third party operators of Tenancy Databases and/or other Agents.

You have the right to access personal information that we hold about by contacting our office. You can also correct this information if it is inaccurate, incomplete or out of date. If your Application is not successful it will be stored securely for a period of 3 weeks only. If you decide not to collect your Application, we will destroy your documents to comply with Privacy Legislation.

If you do not complete this form or do not sign the consent below, then your Application for the Tenancy may not be considered by the owner of the relevant property or, if considered, may be rejected, due to insufficient information to assess the Application.

PRIVACY CONSENT

I acknowledge that I have read the above Privacy Disclosure Statement and Collection Notice of Wal Pavey Real Estate. I authorise Wal Pavey Real Estate to collect information about me from: My previous letting Agents and/or Lessors; My personal referees, employers and all other references on this application; Tenancy Databases to which Wal Pavey Real Estate subscribes. I can refer to their Privacy Disclosure Statement via: www.tica.com.au

I authorise Wal Pavey Real Estate to refer my name and contact details to tradespeople (to attend to work required at this property), salespeople, valuers, the Lessor, other agents, database operators, other Property Managers, Body Corporate, Insurance companies, Financial services, if required in the future, and to Authorities as required by law.

DECLARATION

Please declare the following by selecting either TRUE or FALSE

-	pplicant,	_		_	
1.	Have never been evicted by an agent/lessor	Ш	True		False
2.	Was refunded the rental bond for my previous address in full	П	True	П	False
	If false, please advise what deductions were made from your bond:				
3.	Have no outstanding debt to any other agent/lessor		True		False
٠.	If false, please supply a reason as to why you have not paid this debt	ш		ш	. 4.50
	i raise, please supply a reason as to willy you have not paid this debt				
4.	Have no known reasons that would affect my ability to pay rent		True		False
ACKN	OWLEDGEMENT				
Please	acknowledge the following by selecting either YES or NO				
I. the A	pplicant,				
	Understand that you as the agent/lessor have collected this information for	П	Yes		No
	the purpose of determining whether I am a suitable tenant for the property,	_			
	in particular to check my identification, my ability to care for the property,				
	my character and my creditworthiness.				
	1.1 For such purposes, I authorise you to contact the persons named in this	Ш	Yes	Ш	No
	application, and to undertake such enquiries and searches as you				
	consider reasonably necessary.				
2.	Acknowledge and accept that if this application is denied, the agent is not		Yes		No
	legally obliged to provide a reason as to why.				
3.	Acknowledge that I have been made aware of the agency's Privacy Policy.		Yes		No
4.	Acknowledge that the lessor and applicant (tenant) are bound by this		Yes		No
	agreement immediately upon communication of either the lessor or agent's	Ш		Ш	
	acceptance of this application.				
5	Acknowledge that my personal contents insurance is not covered under and		Yes		No
J.			163		140
	lessor insurance policy/s and understand that it is my responsibility to insure my own personal belongings.				
6	Consent to the use of email and facsimile in accordance with the provisions		Yes		No
0.	Set out in Chapter 2 of the Electronic Transactions (Qld) Act 2001 and the		163		140
	•				
-	Electronic Transactions Act 1999 (cth).		V		NI -
7.	Declare that the above information is true and correct and that I have	Ш	Yes	Ш	No
_	supplied it of my own free will.				
8.	Understand that I have inspected the property and am satisfied with the	Ш	Yes	Ш	No
	current condition and cleanliness of the property.				
NAN	ME OF APPLICANT				
14714	IL OI AITLICAN				
CICA	LATURE				
וטוכ	IATURE DATE				



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INFORMATION RELEASE AUTHORITY Applicant/s to complete top boxed area only.

Applicant 1			Applicant 2			
Name:	N	lame:				
Signature: Date: Date:						
		ate:				
Agent/Lessor:	Email:					
Property Address:						
Please complete the foll	owing to the best of your know	ledge relating to t	he above, and return the			
•	ail to admin@walpavey.com.au	•	•			
QUESTIONS		ANSWERS				
Was this applicant/s lis		Yes	No			
Was the applicant/s th	e sole lease holder?	Yes	No			
Period of occupancy:			to			
Weekly rent amount pa		•	per week/calendar month			
Did your office termina	ite the tenancy?	Yes	No			
If yes, why?						
Was the tenant ever in	arrears?	Yes	No			
Was a Notice to Remed	dy Breach ever issued	Yes	No			
If yes	Number of NTR's					
	Reason/s					
Was a Notice to Leave	ever issued?					
If yes	Number of NTR's					
	Reason/s					
Was the property well	maintained by the tenant/s?	Yes	No			
Was the tenant/s abus	ive towards staff?	Yes	No			
Would you put this tenant in a property which is for sale?		le? Yes	No			
Were any pets kept on the property?		Yes	No			
If yes, what type of pet	and how many?		•			
Were there any deduct	•	Yes	No			
If yes, why?			l			
• •	y rent to this applicant/s again?	Yes	No			
Additional Comment:		1	l			
our assistance is great	ly appreciated.					