

APPLICATION TO ENTER INTO RESIDENTIAL TENANCY AGREEMENT

Identification Required:

100 points of ID is required and can be satisfied by providing one primary document and two secondary documents.

Primary:

- Passport (70 points),
- Birth Certificate (70 points)
- Citizenship Certificate (70 points) Secondary:
- Copy of Credit Card (25 points),
- Utility Bill (25 points)
- Copy of Medicare Card (25 points)
- Copy of Australian Driver's Licence (40 points)

Proof of Income - Only One of the Below is Required.

- Last two payslips.
- Employment contract.
- One month's bank statement

Applicants must inspect the inside of the property prior to being accepted.

All parties will be required to attend a sign-up appointment within 24-48 hours of acceptance if possible.

APPLICANTS INFORMATION

TENANCY DETAILS

Property Address:

The period you require the tenancy for is months starting dateending date

At a rent of per week

Total number of persons to occupy the Premises Adults Children Ages

Pets - Type of Pet Number Breed Age

Type of Pet Number Breed Age

Do you intend applying for a residential tenancy bond from a State Government Department? Yes No

If yes bond amount \$..... Department

Special Conditions (If Required)

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Note: The lessor is not obliged to accept any of the Special Conditions.

Initials:

APPLICANT 1

Name:
 (Given Names) (Surname)

Present Address:

Phone No Work: Phone No Home: Mobile:

Email: Date of Birth: Australian Citizen: Yes No

Drivers Licence No: State: Passport No:

Other ID: Vehicle Type & Registration No:

Anything Else to Support Your Application:

..... Smoker: Yes No

PERSONAL REFERENCES (Note: Not to be Friends or Family)

a)
 Name Telephone

b)
 Name Telephone

Name of Current Lessor or Managing Agent: Phone No:

Address: Rent Paid:

Reason For Leaving: Rented From: To:

Previous Address of Applicant:

Name of Previous Lessor or Managing Agent: Phone No:

Address: Rent Paid:

Reason For Leaving: Rented From: To:

OCCUPATION (Note: Your Employer may be contacted to verify employment)

Employer: Period of Employment:

Phone No: Annual Salary:

If less than 12 months, name and address of previous employer

Explanation if no employment:

Note: Please attach a copy of last pay slip and if self-employed a statement of income must be provided. If receiving Centrelink Benefits, a statement of income from Centrelink must be provided.

NEXT OF KIN (Note: These people may be contacted to verify particulars)

First Next of Kin:
 Name Address Telephone

Second Next of Kin:
 Name Name Address Telephone

Initials:

APPLICANT 2

Name:
(Given Names) (Surname)

Present Address:

Phone No Work: Phone No Home: Mobile:

Email: Date of Birth: Australian Citizen: Yes No

Drivers Licence No: State: Passport No:

Other ID: Vehicle Type & Registration No:

Anything Else to Support Your Application:

..... Smoker: Yes No

PERSONAL REFERENCES (Note: Not to be Friends or Family)

c)
Name Telephone

d)
Name Telephone

Name of Current Lessor or Managing Agent: Phone No:

Address: Rent Paid:

Reason For Leaving: Rented From: To:

Previous Address of Applicant:

Name of Previous Lessor or Managing Agent: Phone No:

Address: Rent Paid:

Reason For Leaving: Rented From: To:

OCCUPATION (Note: Your Employer may be contacted to verify employment)

Employer: Period of Employment:

Phone No: Annual Salary:

If less than 12 months, name and address of previous employer

.....
Explanation if no employment:

Note: Please attach a copy of last pay slip and if self-employed a statement of income must be provided. If receiving Centrelink Benefits, a statement of income from Centrelink must be provided.

NEXT OF KIN (Note: These people may be contacted to verify particulars)

First Next of Kin:
Name Address Telephone

Second Next of Kin:
Name Address Telephone

Initials:

APPLICANT 3

Name:
 (Given Names) (Surname)

Present Address:

Phone No Work: Phone No Home: Mobile:

Email:..... Date of Birth: Australian Citizen: Yes No

Drivers Licence No: State: Passport No:

Other ID: Vehicle Type & Registration No:

Anything Else to Support Your Application:

..... Smoker: Yes No

PERSONAL REFERENCES (Note: Not to be Friends or Family)

a)
 Name Telephone

b)
 Name Telephone

Name of Current Lessor or Managing Agent: Phone No:

Address: Rent Paid:

Reason For Leaving: Rented From: To:

Previous Address of Applicant:

Name of Previous Lessor or Managing Agent: Phone No:

Address: Rent Paid:

Reason For Leaving: Rented From: To:

OCCUPATION (Note: Your Employer may be contacted to verify employment)

Employer: Period of Employment:

Phone No: Annual Salary:

If less than 12 months, name and address of previous employer

Explanation if no employment:

Note: Please attach a copy of last pay slip and if self-employed a statement of income must be provided. If receiving Centrelink Benefits, a statement of income from Centrelink must be provided.

NEXT OF KIN (Note: These people may be contacted to verify particulars)

First Next of Kin:
 Name Address Telephone

Second Next of Kin:
 Name Name Address Telephone

Initials:

By signing this document you are making an application to enter into a Residential Tenancy Agreement in relation to the premises.

You declare that you are over 18 years of age, you are not bankrupt and that all of the information supplied in this Application is true and correct and is not misleading in anyway. Your application may or may not be successful.

Your Signature (First Person): Date:

Your Signature (Second Person): Date:

Your Signature (Third Person): Date:

INFORMATION FOR TENANT

- Thank you for your application to rent. Please ensure that your application is fully completed to ensure prompt processing
- **If your application is successful, prior to signing the lease we require the first two weeks rent and bond amount (equivalent to 4/6 weeks rent plus pet bond if applicable) to be paid by either Bank Transfer, Australian Money Order or Bank Cheque prior to signing your lease and keys being provided.**
- Monies required to be paid in full prior to taking possession of the property.
- All tenants must sign the lease and pay the total monies owing prior to the keys being handed over.
- All applications received are subject to the landlord’s approval.
- If you require a telephone line connected to the premises it is your responsibility to make enquiries with a telephone provider/company for this information. You will be responsible for making any telephone connections and/or line connections.
- The owner/agent makes no warranties that the previous occupants have or have not had a telephone connection during their occupation of the premises.
- If you are applying for a Bond from a State Government Department ie. Ministry of Housing Bond, our office policy is to receive all monies prior to moving any tenants into the property. This means you can either pay your monies by Bank Cheque, Australian Money Order or provide in writing confirmation of authority from the Government Department concerned confirming payment of the bond and rent from that department to Limestone Real Estate. Alternatively you may be able to delay your lease commencement date until the agency is in receipt of full payment of the security bond, (subject to the owners approval).
- You acknowledge that you have inspected the Premises and you will accept possession of the Premises in the condition it was in as at the date of inspection.
- Please note that if your application is unsuccessful, the owner/agent is not obliged to explain why your application was not accepted.

Initials:

PRIVACY DISCLOSURE STATEMENT OF GC CLEVES PTY LTD T/AS LIMESTONE REAL ESTATE

Limestone Real Estate are bound by the Australian Privacy Principals. We collect personal information about you in this form to assess your application for a residential tenancy. We may need to collect information about you from your previous landlords/letting agents, current employer, and referees. We will also check whether any details of tenancy defaults by you are held on a tenancy default database. We use the databases National Tenancy Database and TICA Default Tenancy Control Pty Ltd. You can find out more information about this database from their website at www.tica.com.au. TICA can be contacted by phone on 1902220346 or by fax or by mail to PO Box 120, Concord NSW 2137 (stamped self-addressed envelope to be included). Your consent to us collecting this information is set out below.

We may disclose personal information about you to the owner of the property to which this lease agreement relates. We may disclose your details to service providers relevant to the tenancy relationship including gas, electricity, water, maintenance contractors and the landlord's insurers.

The tenant is invited to review a copy of the complete terms of the Agent's Privacy Policy enacted pursuant to the Privacy Act, 1988. Further details regarding the purposes for which the information is collected, the disclosures that are usually made of personal information collected by the Agent, the situations where the Agent is required to collect information by law, and any disclosure of information that may be made by the Agent overseas, can be obtained from the more detailed collection notice on the Agent's website.

You have the right to access personal information that we hold about you by contacting our privacy officer. If you do not complete this form or do not sign the consent below then your application for a residential tenancy may not be considered by the owner of the relevant property or, if considered, may be rejected.

PRIVACY CONSENT

I, the tenant acknowledge that I am over 18 years of age, I have read and understand the Privacy Notice of Rental Management Australia Pty Ltd Trading as Rental Management Australia, I authorise Rental Management Australia to collect information about me from:

My previous letting agents and or landlords and their insurers;

My personal referees; and Any tenant default database, which may contain personal information about me. I also authorise Rental Management Australia to disclose details about any defaults by me under the tenancy to which this application relates, to any tenancy default database to which Rental Management Australia subscribes.

I also authorise Rental Management Australia to refer my details to any arranger of utilities (to arrange connection or transfer of telephone, gas, electricity, water, furniture etc.).

Tenant Signed: **Date:**

Tenant Signed: **Date:**

Tenant Signed: **Date:**

.....

Initials:

URGENT REQUEST FOR RENTAL REFERENCE

Agency: _____ Email /Fax: _____

Our Agency has received an application for tenancy. The applicant has provided your details as a current or previous Lessor or Lessor/s Agent and has authorised us to collect information about the tenancy from you – the agency. A copy of the applicants signed Privacy consent is above.

Please complete the details below and return the form to our Agency today, as time is critical to both the Applicant and lessor to finalise the processing of this application.

Tenants name: _____

Property rented: _____

Period of time rented through your agency ____/____/____ to ____/____/____

Rent amount paid per week \$ _____

Was the tenant listed as a lessee? YES / NO

Did you / your agency terminate the tenancy? YES / NO

During the tenancy, was the lessee ever in arrears? YES / NO

Did the tenant receive any Notice to Remedy's YES / NO

If Yes – Reason/s _____ YES / NO

Were periodic inspections conducted during the tenancy? YES / NO

Was any damage noted during the inspections? YES / NO

Were pets kept on the premises without permission? YES / NO

Did the lessee leave the property clean and tidy? YES / NO

Was the bond refunded in full? YES / NO

If No – Reason/s _____

Would you or your agency rent to them again?

Completed by: _____ Position: _____

Please return the completed form with a copy of the tenant ledger TODAY.

Please complete all sections of this application to enable us to connect your utilities.

Applicant Details

Mr Ms Miss Mrs Other Given Name/s: _____

Surname: _____ Date of Birth: ____/____/____

Phone Number: _____ Mobile Number: _____

Property Details

Property Manager: _____

New Property Address: _____

Move in date: ____/____/____

Connection date: ____/____/____

FREE UTILITY CONNECTIONS - This is a Free Service that quickly connects your utilities

YourPorter

Phone: 1300 400 600

Fax: 1300 326 468

YourPorter is a FREE service connecting utilities and other services.

If the Agent approves this application, 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 Gas Telephone Internet Pay TV
 Car Life Health Home & Contents Home Loans

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, and the Agent, 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 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 are under no obligation to use YourPorter.

Signature: _____

Date: ____/____/____