



Application for Residential Tenancy (One application to be completed per person) PART 1: RENTAL PROPERTY DETAILS ITEM 1: **AGENT DETAILS** AGENCY NAME: Surfers Paradise First National Real Estate ADDRESS: Shop 4 "St Tropez North " 33 - 35 Orchid Avenue 33 - 35 Orchid Avenue SUBURB: SURFERS PARADISE STATE: QLD POSTCODE: 4217 PHONE: EMAIL: FAX: 07 5538 5777 07 5538 5375 rentals@surfersparadisefn.com.au ITEM 2: PROPERTY DETAILS ADDRESS: SUBURB: POSTCODE: Rent: ← weekly / fortnightly / monthly Bond: \$ Tenancy Term: Fixed term agreement Periodic agreement Starting on: Ending on: PART 2: APPLICANT DETAILS ITEM 3: **CONTACT DETAILS** FULL NAME: DATE OF BIRTH: Have you been known by any other name(s)? ☐ Yes No If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL: Driver's Licence/passport number: State: Number of vehicles: Registration number(s): ITEM 4: **DEPENDANTS** ☐ No Do you have any dependants? ☐ Yes DEPENDANT FULL NAME(S): RELATIONSHIP TO APPLICANT: DEPENDANT DATE OF BIRTH: ITEM 5: **SMOKING** Are you or any of the dependants living with you a smoker? ITEM 6: PETS Do you intend to keep pets at the property? Yes No Number of pets: Type of Pet/s: Yes Are your pets registered with a council? ☐ No

INITIALS (Note: initials not required if signed with Electronic Signature)

If Yes, please state which council:

ITEM 7:	APPLICANTS ADDRESS HISTORY							
	CURRENT RESIDENTIAL ADDRESS:	¥						
	SUBURB:					STATE:	POSTCODE:	
	PERIOD OF OCCUPANCY:	TYPE OF OCCUPA	_		O+b >			
	CURRENT AGENT/LESSOR (If renting)	Rent	Owner Owner		Other: →			
	AGENT/LESSOR PHONE:	FAX:	EMAIL	<u>.</u>				
	CURRENT RENT \$ Rent period:	: weekly / fortnightly / monthly			REASON FOR LEAVING:			
		· we	ekiy / Torungnuy / T	HOHILIN				
	PREVIOUS RESIDENTIAL ADDRESS:							
	SUBURB: PERIOD OF OCCUPANCY:	TYPE OF OCCUPA	NCV-			STATE:	POSTCODE:	
	PERIOD OF OCCOPANCY.	Rent	Owner		Other: →			
	PREVIOUS AGENT/LESSOR:	Kent			Outer.			
	AGENT/LESSOR PHONE:	FAX:	EMAIL					
	PREVIOUS RENT:				REASON FOR	R LEAVING:		
	\$ Rent period:	← we	ekly / fortnightly / r	monthly	TLD TOOK TO	CELLY (VIII)		
ITEM 8:	EMPLOYMENT DETAILS							
II LINI O.	Are you employed? Yes	□ No (if no n	ease provide deta	ile of pro	vious amplava	r if any		
				iis or pre				
	Employment status: Full tin	ne	Casual		Contract	Self employe	ed	
	OCCUPATION:				NET INCOME	(per week)		
	\$ PATE COMMENCED EMPLOYMENT (construi)							
	DATE COMMENCED EMPLOYMENT (approx.) DATE TERMINATED EMPLOYMENT (if							
	EMPLOYER/BUSINESS NAME:				/ 			
	ADDRESS:							
							_	
	SUBURB:				STATE:	POSTCODE:	_	
	PHONE:	FAX:	EMAIL	.;				
	IF SELF EMPLOYED, ACCOUNTANT'S	NAME:	 -				PHONE:	
ITEM O.	CENTRE! INK DAVAGAITE							
ITEM 9:	CENTRELINK PAYMENTS	F-1	7 V	M				
	Are you receiving any regular Centre	elink payments?	Yes	No				
	DESCRIPTION OF PAYMENT(S):							
		5 5 th 43						
	TOTAL INCOME (PER WEEK): \$	DATE PAYMENTS	COMMENCED:					
ITEM 10:	STUDENT DETAILS							
	Are you studying full time?	Yes	No					
	NAME OF EDUCATION INSTITUTION Y	OU ARE CURRENTLY AT	TENDING:	STUDEN	T IDENTIFICATI	ON NUMBER:		
	A		a	IE				
	Are you an overseas student?	Yes	No	ır yes, Vi	sa expiry date:			

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ITEM 11:	PERSONAL REFE	RENCES							
	Please do not list relatives, another applicant or partners and provide business hours contact numbers. REFEREE 1:					RELATIONSHIP:			
	ADDRESS:					-			
	SUBURB:			STATE:	POSTCODE:	PHONE/MOBILE:			
	REFEREE 2:					RELATIONSHIP:			
	ADDRESS:					PHONE/MOBILE:			
	SUBURB:			STATE:	POSTCODE:				
ITEM 12:	PERSONAL REPR	RESENTATIVE							
	i.e. preferred pers	son(s) to be contac							
	REPRESENTATIV	E 1:				RELATIONSHIP:			
	ADDRESS:					PHONE/MOBILE:			
	SUBURB:			STATE:	POSTCODE:	PHONE/MOBILE.			
	REPRESENTATIV	E 2:				RELATIONSHIP:			
	ADDRESS:					DIJONEWOD! F.			
	SUBURB:			STATE:	POSTCODE:	PHONE/MOBILE:			
	PART 3: SU	PPORTING L	OCUMENTS						
ITEM 13:	IDENTIFICATION								
	You 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.								
	Please tick the identifying documents you have provided with your application.								
	IMPORTANT: At	IMPORTANT: At least one form of Photo Identification MUST be provided.							
	70 Points								
	Passport		Full birth certificate	c	itizenship certificate				
	40 Points								
	Australian Dri	iver's Licence	Student Photo ID	D	epartment of Veterans Af	fairs card			
	Centrelink ca	rd	Proof of age card	S	tate/Federal Government	Photo ID			
	25 Points								
	Medicare care	d	Council rates notice	M	otor vehicle registration				
	Telephone bil	lt .	Electricity bill	G	as bill				
	Tenancy Hist		Bank statement		redit card statement				
	Last FOUR re	ent receipts	Rent bond receipt	∐ Pi	revious tenancy agreeme	nt			
ITEM 14:	PROOF OF INCOM	E							
	You are also required to supply the Agent/Lessor with proof of your income upon submission of your application.								
	Employed:	Last TWO pay slips.							
	Self employed:	Bank statements	Group Certificate, Tax Retu	rn or Accountan	t's letter.				
	Not employed:	Centrelink statem	ent.						

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PART 4: DECLARATION

PLEASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE or FALSE

	I, the Applicant		
1.	Have never been evicted by an Agent/Lessor	True	False
2.	Have no known reasons that would affect my ability to pay rent	True	False
3.	Was refunded the rental bond for my last address in full (if applicable)	True	False
	If false, please advise what deductions were made from your bond?		
1	Have no cutstanding debt to enother Agentil ecces?		
4.	Have no outstanding debt to another Agent/Lessor? If false, why are you in debt to your past Agent/Lessor?	True	False
DΔ	RT 5: TENANCY DATABASES		
	Agency may use the following tenancy databases to check the rental history of the Applicant/s;		
TIC			
PA	RT 6: ACKNOWLEDGEMENT		
PLE	ASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES OF NO		
1.	I, the Applicant		
Τ.	Acknowledge that my personal contents insurance is not covered under any Lessor insurance policy/s and understand that it is my responsibility to insure my own personal belongings.	Yes	☐ No
2.	Understand that you as the Agent/Lessor have collected this information for 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.	✓ Yes	☐ No
	2.1 for such purposes, I authorise you to contact the persons named in this application, and to undertake such enquiries and searches (including tenancy databases searches) as you consider reasonably necessary.	✓ Yes	☐ No
	2.2 in doing so, I understand that information provided by me may be disclosed to, and further information obtained from, referees named in this application and other relevant third parties.	√ Yes	☐ No
3.	Acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide reasons as to why.	✓ Yes	☐ No
4.	Consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the Agent/Lessor to pass my details onto others which may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases.	✓ Yes	☐ No
5.	Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), the Standard Terms and any special terms before completing this application.	✓ Yes	☐ No
6.	Acknowledge that I have received or have available the Information Statement (Form 17a), body corporate by-laws (if applicable) before completing this application.	✓ Yes	☐ No
7.	Acknowledge that I have signed the agency's Privacy Notice and Consent.	✓ Yes	☐ No
8.	Acknowledge that the Lessor and Applicant (tenant) are bound by this agreement immediately upon communication of either the lessor or agent's acceptance of the application.	✓ Yes	☐ No
9.	Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 of the Electronic Transactions (Queensland) Act 2001 (Qld) and the Electronic Transactions Act 1999 (Cth).	✓ Yes	☐ No
10.	Declare that the above information is true & correct and that I have supplied it of my own free will.	✓ Yes	☐ No
	Name of Applicant:		
	Signature: Date:		

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