

Tenancy Application Form.

Separate application forms are to be completed by each applicant.

This application will only be processed when it is fully completed including all sections, signed and all supporting documents attached including 100 Points of Identification and current proof of income.

Property Address

Applicant Details

Full Name

Date of Birth

Drivers Licence or Passport Number

Issuing State or Country

Expiry

Smoker

☐

Yes

☐

No

Email

Phone Number

Home

Work

Mobile

Vehicles to be kept at property

Please Note: Unregistered vehicles are prohibited at the property.

Registration

Make and model

Colour

Vehicle 1

Vehicle 2

Vehicle 3

Pets

Leave blank if no pets will be at the property

Pet 1

Pet 2

Type & breed of pet

Age

Name

Council registered with

Council registration number

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Other Occupants

	Full Name	Date of Birth	Smoker?
Person 1	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Person 2	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Person 3	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Dependants

Do you have any dependants? ☐ Yes ☐ No

	Full Name	Relationship	Date of Birth
Person 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Person 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Person 3	<input type="text"/>	<input type="text"/>	<input type="text"/>

Centrelink Payments

Are you receiving regular Centrelink Payments? ☐ Yes ☐ No

Description of Payment	<input type="text"/>
Total income per week	<input type="text"/>
Date payments commenced	<input type="text"/>

Student Details

Are you studying full or part time? ☐ Yes ☐ No

Name of Education Institution

Student ID Number

Are you an overseas student? ☐ Yes ☐ No

If yes, visa expiry date

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Contacts and References

Emergency Contact Name

Relationship

Address

Phone Number

Professional Reference Contact 1

Name

Relationship

Address

Phone Number

Professional Reference Contact 2

Name

Relationship

Address

Phone Number

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Current Address

Address

Rental Amount

Landlord / Agent's Name

Landlord / Agent's Phone Number

Reason For Leaving

Period of Occupancy

Years

Months

Are there any outstanding bond monies owing?

☐

Yes

☐

No

If yes, why?

Prior Address

Address

Rental Amount

Landlord / Agent's Name

Landlord / Agent's Phone Number

Reason For Leaving

Period of Occupancy

Years

Months

Was the bond refunded in full?

☐

Yes

☐

No

If no, why?

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Employment History

Occupation			
Employment Basis	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Casual <input type="checkbox"/> Contract
Employer's Name			
Payroll/Manager's Name			
Phone Number			
Email Address			
Employer's Address			
Length of Employment			
Gross Income Before Tax	<input type="text"/> Weekly	<input type="text"/> Annually	

If Self-Employed

Company Name			
Trading As			
Address			
ABN			
Period Self-Employed	<input type="text"/> Years	<input type="text"/> Months	
Industry / Nature of Business			
Accountant's Details			
Phone			
Creditor Referee			
Phone			

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Identification

Please provide 100 points of identification from the following table, including at least one photo ID:

Photo ID	Passport	70 Points
	Driver's Licence	40 Points
Other Government ID	Birth Certificate	70 Points
	Australian Citizenship Certificate	
	Centrelink Card	40 Points
	Veteran Affairs Gold Card	
	Public Service Employee ID	
	Tertiary Education ID	
Other ID	Bank / Credit Card Statement	25 Points
	Bank / Credit / Debit Card	
	Council Rates Notice	
	Medicare Card	
	Motor Vehicle Registration	
	Proof of Age Card	
	Seniors Card	
	Electricity / Gas Account	

Proof of Income

- Please provide one of the following:
- Four most recent payslips
 - Employment Contract
 - Centrelink Statement
 - Bank Statement
 - Letter from Accountant (If Self-Employed)
 - ATO Notice of Assessment

Notes

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Terms & Conditions

1. Should the landlord accept this application I agree to enter into a General Tenancy Agreement and rental monies and/or bond monies paid within a reasonable time frame prior to commencing the tenancy. All parties will be required to attend a sign up appointment within 24 to 48 hours of acceptance.
2. I acknowledge that this application is subject to the approval by the Owner of the property. I declare that all information contained in this application (including all pages attached) is true and correct and given of my own free will.
3. I understand that should my application be denied by the Owner, that there is no legal requirement to disclose the reasons as to why.
4. This Application Form with any attached documents/notices will be the property of Legacy Property Management Pty Ltd. (Supply copies only)
5. I agree that if the tenancy is approved I may receive telephone; SMS and/or email notification daily if the rent falls in arrears. This is a free service to endeavour to avoid an eviction process during the tenancy.
6. I agree that a co-tenant may speak on my behalf as I agree to speak on their behalf when we are dealing with the Agency, including but not limited to "if offered we will accept the General Tenancy Agreement, Form 18a as read". For example, my co-tenant can ring and accept on my behalf rather than the Agent speaking to each party individually. One accepts for all.
7. I acknowledge that any negative comments placed on social media either during or after any period of tenancy shall constitute defamation.

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Declarations

Have you ever been evicted by any lessor or agent?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are you in debt to another lessor or agent?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
is there any reason known to you that would affect your ability to pay rent when due?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Was your bond at your last address refunded in full?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Have you inspected the property and was the property in a satisfactory condition when you inspected it?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Have you ever been bankrupt or do you have an undischarged bankruptcy?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Have you ever been listed on a tenancy database?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

I declare the information provided is true and correct. I consent to verify details via Tenancy Information Centre of Australia (TICA) and National Tenancy Database records. I further declare that a co-tenant has sufficient knowledge of this application and is vested with sufficient authority to bind me in the acceptance of a General Tenancy Agreement (Form 18a).

I apply for a tenancy at	<input type="text"/>		
for a period of	<input type="text"/>	months	
at a rent of	<input type="text"/>	\$	per week
commencing on	<input type="text"/>		

I understand I am required to pay two weeks' rent within 48 hours of application approval, together with bond equal to four weeks rent prior to collection of keys, which is equal to a total of six weeks' rent.

Applicant's Signature

Applicant's Name

Date