

REIQ Accredited Agency

	Application for Residential 16 (One application to be completed per person)	enancy
	PART 1: RENTAL PROPERTY DETAILS	
ITEM 1:	AGENT DETAILS	
,, <u>=</u>	AGENCY NAME: Errigal Property Pty Ltd ADDRESS: 4/115 Robinson Road	
	CURUED. Cooking	CTATE, OLD POCTCODE, 4004
	SUBURB: Geebung PHONE: MOBILE: FAX: 0734969599 0473990009	STATE: QLD POSTCODE: 4034 EMAIL: admin@errigalproperty.au
ITEM 0		auming emgaproperty.au
ITEM 2:	PROPERTY DETAILS ADDRESS:	
	ADDITESS.	
	SUBURB:	
	Rent: \$ Rent period:	weekly / fortnightly / monthly Bond: \$
	Tenancy Term: Fixed term agreement	Periodic agreement
	Starting on: En	ding on:
	PART 2: APPLICANT DETAILS	
ITEM 3:	CONTACT DETAILS	
11 Lin 0.	FULL NAME:	DATE OF BIRTH:
	Have you been known by any other name(s)?	□ No
	If Yes, what other name(s) have you been known by?	
	EMAIL:	
	Driver's Licence/passport number:	State:
		stration number(s):
ITEM 4:	DEPENDANTS	
	Do you have any dependants? Yes No 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?	Yes No
ITEM 6:	PETS	
	Do you intend to keep pets at the property?	No Number of pets:
	Type of Pet/s:	Are your pets registered with a council? Yes No
	If Yes, please state which council:	

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

ITEM 7:	APPLICANTS ADDRESS HISTORY						
	CURRENT RESIDENTIAL ADDRESS:						
	SUBURB: STATE:	POSTCODE:					
	PERIOD OF OCCUPANCY: TYPE OF OCCUPANCY:						
	Rent Owner Other: →						
	CURRENT AGENT/LESSOR (If renting):						
	AGENT/LESSOR PHONE: FAX: EMAIL:						
	AGENT/LESSOR PRONE. PAX. EMAIL.						
	CURRENT RENT REASON FOR LEAVING:	REASON FOR LEAVING:					
	\$ Rent period: \(\square \text{weekly / fortnightly / monthly} \)						
	PREVIOUS RESIDENTIAL ADDRESS:						
	SUBURB: STATE:	POSTCODE:					
	PERIOD OF OCCUPANCY: TYPE OF OCCUPANCY:	POSTCODE.					
	Rent Owner Other: →						
	PREVIOUS AGENT/LESSOR:						
	AGENT/LESSOR PHONE: FAX: EMAIL:						
	PREVIOUS RENT: REASON FOR LEAVING:						
	\$Rent period: weekly / fortnightly / monthly						
ITEM 8:	EMPLOYMENT DETAILS						
	Are you employed? Yes No (if no, please provide details of previous employer, if any)						
	Employment status: Full time Part time Casual Contract Self employed						
	OCCUPATION: NET INCOME (per week)						
	\$						
	DATE COMMENCED EMPLOYMENT (approx.) DATE TERMINATED EMPLOYMENT (if a	ny):					
	EMPLOYER/BUSINESS NAME:						
	ADDRESS:						
	SUBURB: STATE: POSTCODE:						
	PHONE: FAX: EMAIL:						
	IF SELF EMPLOYED, ACCOUNTANT'S NAME:	PHONE:					
ITEM 9:	CENTRELINK PAYMENTS						
	Are you receiving any regular Centrelink payments? Yes No						
	DESCRIPTION OF PAYMENT(S):						
	TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED:						
	\$						
ITEM 10:	STUDENT DETAILS						
	Are you studying full time? Yes No						
	NAME OF EDUCATION INSTITUTION YOU ARE CURRENTLY ATTENDING: STUDENT IDENTIFICATION NUMBER:						
	Are you an overseas student? Yes No If yes, Visa expiry date:						

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ITEM 11:	PERSONAL REFERENCES					
	Please do not list relatives, another applicant or partners REFEREE 1:	and provide business hou	urs contact numbers.	RELATIONSHIP:		
	ADDRESS:			PHONE/MOBILE:		
	SUBURB:	STATE:	POSTCODE:			
	REFEREE 2:			RELATIONSHIP:		
	ADDRESS:			PHONE/MOBILE:		
	SUBURB:	STATE:	POSTCODE:	THOREMOBILE.		
ITEM 12:	PERSONAL REPRESENTATIVE					
	i.e. preferred person(s) to be contacted in the event of ar	n emergency.				
	REPRESENTATIVE 1:			RELATIONSHIP:		
	ADDRESS:					
				PHONE/MOBILE:		
	SUBURB:	STATE:	POSTCODE:			
	REPRESENTATIVE 2:			RELATIONSHIP:		
	ADDRESS:					
	SUBURB:	STATE:	POSTCODE:	PHONE/MOBILE:		
	PART 3: SUPPORTING DOCUMENTS					
ITEM 13:	IDENTIFICATION					
HEW 13:	You are required to meet a 100 point identification criterion	on unon submission of vo	ur application			
	The Agent/Lessor may photocopy any item and retain as	part of your application.	аг аррисалоги			
	Please tick the identifying documents you have provided	with your application.				
	IMPORTANT: At least one form of Photo Identification	n MUST be provided.				
	70 Points					
	Passport Full birth certif	ficate	zenship certificate			
	40 Points					
	Australian Driver's Licence Student Photo	Australian Driver's Licence Student Photo ID Department of Veterans Affairs card				
	Centrelink card Proof of age of	card Sta	te/Federal Government	Photo ID		
	25 Points					
	Medicare card Council rates	notice Mo	tor vehicle registration			
	Telephone bill Electricity bill	Ga	s bill			
	Tenancy History Ledger Bank stateme	nt Cre	edit card statement			
	Last FOUR rent receipts Rent bond rec	ceipt Pre	evious tenancy agreeme	nt		
ITEM 14:	PROOF OF INCOME					
	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 Return or Accountant's letter.					
	Not employed: Centrelink statement.					

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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?					
	Have a contract the distance with a facility of the second					
4.	Have no outstanding debt to another Agent/Lessor? If false, why are you in debt to your past Agent/Lessor?	True	False			
DΛ	RT 5: TENANCY DATABASES					
	Agency may use the following tenancy databases to check the rental history of the Applicant/s:					
PA	RT 6: ACKNOWLEDGEMENT					
PLE	ASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES OF NO					
1.	I, the Applicant 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 <i>Electronic Transactions (Queensland) Act 2001 (Qld)</i> and the <i>Electronic Transactions Act</i> 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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