

APPLICATION FOR RESIDENTIAL TENANCY

PROPERTY INFORMATION:

Property Address:		Date Viewed:	
Rent per week: \$	Preferred Lease term:	Lease start date:	
Bond: \$	Please indicate if you are a Colony 47 or Anglicare client YES / NO		
APPLICANT:			
Full name:	Date of Birth:		
Current Address:	Marital status:		
Ph Number:	Mobile Number:	Work Number:	
Email:	Drivers Licence No		
Names of other applica	ants:		
Names/ages of Childre	n:		
Do you smoke: YES / N	NO Do you have pets: YES / NO	Are they inside or outside pets?	
Type of pet/breed of pe	et:		
LIVING HISTORY:			
Most recent address:		Length of Tenancy:	
Reason for leaving:		Rent or own:	
Landlord/Agent:	Contact number:		
Rent Per week: \$	Bond refunded: YES / NC) – Why?	
Previous address:		Length of Tenancy:	
Reason for leaving:		Rent or own:	
Landlord/Agent:	Contact number:		
Rent Per week: \$	Bond refunded: YES / NO – Why?		
EMERGENCY CONTACT	DETAILS:		
Emergency contact:		Relationship:	
Address:		Ph Number:	_
Mobile Number:	Other:		

EMPLOYMENT:	
Occupation/Student/Centrelink Benefit:	
Employer institution:L	ength of employment:
Net wage/Benefit per week: \$ Please	circle: FULL TIME / PART TIME / CASUAL
Contact person:	Phone number:
Are you or have you ever been bankrupt? YES / NO	
PERSONAL REFERENCES:	
(1) Name:C	Contact number:
Relationship: Years known:	
Address:	
(2) Name:C	Contact number:
Relationship: Years known:	
Address:	
(3) Name:C	Contact number:
Relationship: Years known:	
Address:	
PRIVACY ACT (Commonwealth 1988) COLLECTION NOTICE	
The personal information the prospective tenant provides in this necessary for the agent to verify the Applicant's identity, to promanage the tenancy. Personal information collected about the course of the tenancy if the application is successful may be a collected to other parties including the owner, referees, trades property, bodies corporate, other agents, relevant Courts and agencies and other third parties as required by law.	ocess and evaluate the application and to ne applicant in this application and during the disclosed for the purpose for which it was speople, parties engaged to evaluate the
I have read and understand the contents of the Privacy Collector provided in this application is true and correct.	ction notice and affirm that all the information
I, the applicant, agree that should this application be rejected way to disclose why or supply any reason for the rejection of the	
Signed:	Date:

FORMS REQUIRED FOR APPLICATION PROCESSING:

- A current credit check (Issues within the last three (3) months
- **Proof of income** (Pay Slips, Group Certificate, Bank Statement, Centrelink Statements)
- **Photo identification** (Drivers licence, Passport, Approved ID Card)
- Additional Documents (Bank cards, Medicare Card, Healthcare Card, Prove of current address on a bill or letter)