

ITZSIMMONS APPLICATION FOR RESIDENTIAL TENANCY

RENTAL PROPERTY DETAILS AGENCY DETAILS Address: 47 Condamine Street, Dalby, QLD, 4405 | Email: info@fitzsimmonsre.com.au Phone: (07) 4662 5311 **PROPERTY DETAILS** Address: Rent: **Rent Period:** Bond: **Proposed Tenancy Commencement Date: Proposed Tenancy Term:** *PLEASE NOTE* The Agent/Lessor cannot legally accept an offer for you to pay an amount greater than the advertised price or to pay rent more than 1 month in advance. **APPLICANT DETAILS CONTACT DETAILS Full Name:** Date of Birth: Have you been known by any other name (s)?: If Yes, please state what names: Mobile: Home Phone: Email: **Driver's Licence Number:** State: **Passport Number: Number of Vehicles:** Registration number (s): **DEPENDANTS** Date of Birth: Name (s): Relationship to Applicant: **SMOKING** Are you or any of the dependants living with you a smoker?: Do you intend to keep pets at the property?: **Number of Pets:** Type of Pet (s): Are they registered with a council: **Which Council: CURRENT RESIDENTIAL INFORMATION** Address: Period of Occupancy: Type of Occupancy: RENT OWNER OTHER: Agent/Lessor: Phone: Email: Weekly Rent Paid: Reason for Leaving: PREVIOUS RESIDENTIAL INFORMATION Address: Period of Occupancy: Type of Occupancy: RENT OWNER OTHER: Agent/Lessor: Phone: Email: Weekly Rent Paid: Reason for Leaving: Was the bond refunded in full?: If not, state why?:

EMPLOYMENT DETAILS								
Occupation: Date Employment Commenced (approx.):					pprox.):			
Employment Status: FULL TIME	PART TIME	ASUAL CO	NTRACT	SELF EMPLO	YED			
Net Income (per week): Employer/Business Name:								
Address: Phone: Email:								
If self employed, accountant's n	ame:							
Email:		Phone:						
CENTRELINK PAYMENTS								
Are you receiving any regular Centrelink payments?: Description of payments:								
Total Income (per week):								
STUDENT DETAILS								
Are you studying full time?:	Name of institu	ition you are	currently	attending:				
Student Identification Number:		Are you an c	verseas s	tudent?:	Visa Expiry:			
PERSONAL REFERENCE 1								
NAME:	PHONE/MO	PHONE/MOBILE:		Relationsh	Relationship:			
Address:								
PERSONAL REFERENCE 2								
NAME:	PHONE/MO	PHONE/MOBILE:		Relationsh	Relationship:			
Address:								
PERSONAL REPRESENTATIVE (EMERGENCY C	ONTACT)						
NAME:	PHONE/MO	PHONE/MOBILE:		Relationsh	Relationship:			
Address:								
PERSONAL REPRESENTATIVE (EMERGENCY C	ONTACT)		_				
NAME:	PHONE/MOI	PHONE/MOBILE:		Relationsh	Relationship:			
Address:								
TRANSPORTED TO	SUPPOR	TING DOCL	JMENTS	A RIVER	0.04 (4.22 14.53)			
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 least one form of photo identification MUST be provided.								
70 Points: 40 Po	oints:							
Passport A	ustralian Driver's	Licence		Centrelink C	Card			
	tudent Photo ID			Proof of Age	e Card			
	epartment of Vet	erans Affairs	Card	State/Federa	al Government Photo ID			
25 Points:								
	ank Statement				story Ledger			
	redit Card Staten Council Rates Not			Rent Bond F	Rent Receipts Receipt			
	lotor Vehicle Reg				nancy Agreement			
PROOF OF INCOME								
You are also required to supply the	Agent/Lessor with	h proof of you	ır income u	pon submissio	on of your application.			
Employed: Last TWO payslips. Sel		nk statements	s, group cer	rtificate, tax ref	turn or accountant's letter.			
Not Employed: Centrelink statement.								

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?							
		¬-						
4.	Have no outstanding debt to another Agent/Lessor? [If false, why are you in debt to your past Agent/Lessor?	True	False					
See a	TENANCY DATABASES	10000						
The a	gency may use the following tenancy databases to check the rental history of the Ap	oplicant/s:						
NE V	ACKNOWLEDGEMENT		DE RUSSIA					
PLEA	SE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES OR NO							
	I, the Applicant							
1.	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.	Ye	s 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.	☐ Ye	s 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.	Ye	s 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.	Ye	s No					
3.	Acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide reasons as to why.	Ye	s 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.	Ye	s 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.	☐ Ye	es 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.	Ye	es No					
7.	Acknowledge that I have signed the agency's Privacy Notice and Consent.	Ye	es 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.	Ye	es 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).	Ye	es No					
10.	Declare that the above information is true & correct and that I have supplied it of my own free will.	Ye	es No					
	Name of Applicant:							
	Signature: Date	4.						