

Application for Residential Tenancy (One application to be completed per person)

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	PART 1: RENTAL PROPERTY DETAILS	_
ITEM 1:	AGENT DETAILS	
	AGENCY NAME:	
	Rmac Real Estate PTY LTD	
	ADDRESS: 3/4 Queens Road	
	SUBURB: Scarness STATE: QLD POSTCODE: 4655	
	PHONE: MOBILE: FAX: EMAIL:	
	07 4334 0001 rentalshb@remax.com.au	
ITEM 2:	PROPERTY DETAILS	
	ADDRESS:	
	SUBURB: STATE: POSTCODE:	
	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)?	
	If Yes, what other name(s) have you been known by?	
	WORK PHONE: MOBILE: HOME PHONE: EMAIL:	
	WORKETHORE. HOBIE. HOME THORE.	
	Driver's License/passenert number:	
	Driver's Licence/passport number: State:	
	Number of vehicles: Registration number(s):	
ITEM 4:	DEPENDANTS	
	Do you have any dependants? Yes No	
	DEPENDANT FULL NAME(S): RELATIONSHIP TO APPLICANT: DEPENDANT DATE OF BIRTH	1 :
ITEM 5:	SMOKING	
	Are you or any of the dependants living with you a smoker?	
ITEM 6:	PETS	
II LIVI O.		
	Do you intend to keep pets at the property? Yes No Number of pets:	
	Type of Pet/s: Are your pets registered with a council? Yes No	
	If Yes, please state which council:	
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INITIALS (Note: initials not required if signed with Electronic Signature)

ITEM 7:	APPLICANTS ADDRESS HISTORY		
	CURRENT RESIDENTIAL ADDRESS:		
		ATE: POSTCODE:	
	PERIOD OF OCCUPANCY: TYPE OF OCCUPANCY: Rent Owner Other: →		
	CURRENT AGENT/LESSOR (If renting):		
	AGENT/LESSOR PHONE: FAX: EMAIL:		
	CURRENT RENT \$ Rent period: **weekly / fortnightly / monthly** REASON FOR LEAVING: **weekly / fortnightly / monthly**		
	PREVIOUS RESIDENTIAL ADDRESS:		
	SUBURB:	ATE: POSTCODE:	
	PREVIOUS AGENT/LESSOR:		
	AGENT/LESSOR PHONE: FAX: EMAIL:		
	PREVIOUS RENT: \$ Rent period:		
ITEM 8:	EMPLOYMENT DETAILS		
	Are you employed? Yes No (if no, please provide details of previous employer, if any)		
	OCCUPATION: NET INCOME (per week)	elf employed	
	DATE COMMENCED EMPLOYMENT (approx.) DATE TERMINATED EMP	 PLOYMENT (if any):	
	EMPLOYER/BUSINESS NAME:		
	ADDRESS:		
	SUBURB: STATE: POSTC	CODE:	
	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	ED:	
	NAME OF EDUCATION INSTITUTION YOU ARE CURRENTLY ATTENDING: STUDENT IDENTIFICATION NUMBER	:K:	
	Are you an overseas student?		

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ITEM 11:	PERSONAL REFERENCES					
	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	ESENTATIVE				
	i.e. preferred pers	on(s) to be contact	ted in the event of an emerge	ency.		
	REPRESENTATIVE	1 :				RELATIONSHIP:
	ADDRESS:					
						PHONE/MOBILE:
	SUBURB:REPRESENTATIVE			STATE:	POSTCODE:	RELATIONSHIP:
	ADDRESS:					PHONE/MOBILE:
	SUBURB:				POSTCODE:	THORE MODILE.
	PART 3: SU	PPORTING D	OCUMENTS			
ITEM 13:	IDENTIFICATION					
	You are required The Agent/Lessor	to meet a 100 poin may photocopy ar	t identification criterion upon ny item and retain as part of y	submission of yo your application.	ur application.	
	Please tick the ide	entifying documents	s you have provided with you	ır application.		
	IMPORTANT: At	least one form of	Photo Identification MUST	be provided.		
	70 Points					
	Passport		Full birth certificate	Cit	izenship certificate	
	40 Points					
	Australian Dri		Student Photo ID		partment of Veterans Aff	
	Centrelink ca	rd	Proof of age card	Sta	ate/Federal Government	Photo ID
	25 Points					
	Medicare care	d	Council rates notice	Mo	tor vehicle registration	
	Telephone bil	I	Electricity bill	Ga	s bill	
	Tenancy Histo	ory Ledger	Bank statement	Cre	edit card statement	
	Last FOUR re	ent receipts	Rent bond receipt	Pre	evious tenancy agreeme	nt
ITEM 14:	PROOF OF INCOM	IE .				
	You are also requ	You are also required to supply the Agent/Lessor with proof of your income upon submission of your application.				eation.
	Employed:	Employed: Last TWO pay slips.				
	Self employed:	Bank statements,	, Group Certificate, Tax Retu	rn or Accountant'	s letter.	
	Not employed:	Centrelink statem	nent.			

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PART 4: DECLARATION

PLE	ASE 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?	True	False
	If false, why are you in debt to your past Agent/Lessor?		
PA	RT 5: TENANCY DATABASES		
The	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 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.	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 identificatio my ability to care for the property, my character and my creditworthiness.	on, 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.	de 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 whic may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases.	ch 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 up communication of either the lessor or agent's acceptance of the application.	oon 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 1999 (Cth)</i> .	Yes	☐ No
10.	Declare that the above information is true & correct and that I have supplied it of my own free will.	I. Yes	No
	Name of Applicant:		
	Signature	ata	
	Signature: Da	ate:	

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