

Tenancy Application Form

AGENCY DETAILS

FOR YOUR APPLICATION TO BE PROCESSED YOU MUST ANSWER ALL QUESTIONS (INCLUDING THE REVERSE SIDE). AN APPLICATION FORM IS REQUIRED FOR EACH ADULT WHO WISHES TO LIVE AT THE PROPERTY. WE ONLY ACCEPT COMPLETE APPLICATION FORMS. PLEASE ENSURE ALL DOCUMENTS ARE PHOTOCOPIED IN ADVANCE AS WE DO NOT PHOTOCOPY DOCUMENTS.

Matthews Real Estate Address: 678 Ipswich Rd Annerley QLD 4103 Phone: (07) 3848 0655 Email: rentals@matthewsrealestate.com.au www.matthewsrealestate.com.au Web: PROPERTY DETAILS What is the address of the property you would like to rent? Postcode Lease Commencement Date? Lease Term? Months How many tenants will occupy the property?: Adults Children Ages of Children Rent per week Rond \$ \$ PERSONAL DETAILS Please give us your details Other Mrs Given Name/s Surname Date of Birth Driver's licence number Passport no. Proof of Age/18+ number Please provide your contact details Home phone no. Mobile phone no. Work phone no. Email address What is your current address? Postcode

OFFICE USE ONLY						
YES	NO	Sign U	p - Date		Time	
Applica	nts Not	ified		Direct Connect lo	odged	

D. UTILITY CONNECTIONS



This is a FREE service that can connect you to the following utilities and services in your new home:











YES!

I consent to:

- Matthews Real Estate providing my personal information to Direct Connect including name, address, email and phone number.
- Direct Connect contacting me by phone, SMS and/or email during my move in relation to electricity, gas and the other services set out above.
- Direct Connect obtaining metering information for the premises I am moving to.

Applicant 1:	
Signature	Date
Х	
Applicant 2 (if applicable):	
Signature	Date
Х	
Name	Phone

Privacy Collection Statement: Direct Connect Australia Pty Limited (DCA) is collecting your personal information for the purposes of contacting you in relation to your utilities and services connections. DCA will otherwise collect, use and disclose your personal information for purposes set out in its Privacy Policy at www.directconnect.com.au/privacypolicy/. This information may be disclosed to third parties that help DCA deliver its services. The Privacy Policy explains how DCA will collect, use, store and disclose your personal information, the consequences for you if DCA does not collect this information or complain about a breach of the Privacy Act. To obtain further information, you can accost at DCA on 1300 664 715.

570 Church Street Cremorne 3121 Victoria P: 1300 664 715 F:1300 664 185. www.directconnect.com.au

. DECLARATION

I hereby offer to rent the property from the owner under a lease to be prepared by the Agent. I acknowledge that this application is subject to the approval of the owner/landlord. I declare that all information contained in this application (including the reverse side) is true and correct and given of my own free will. I declare that I have Inspected the premises and am not bankrupt.

I authorise the Agent to obtain personal Information from:

- (a) The owner or the Agent of my current or previous residence;
- (b) My personal referees and employer/s;
- (c) Any record listing or database of defaults by tenants such as TICA for the purpose of checking your tenancy history;

I am aware that I may access my personal information by contacting -

• TICA: 1902 220 346

If I default under a rental agreement, I agree that the Agent may disclose details of any such default to a tenancy default database, and to agents/landlords of properties I may apply for in the future.

I am aware that the Agent will use and disclose my personal information in order to:

- (a) communicate with the owner and select a tenant
- (b) prepare lease/tenancy documents
- (c) allow tradespeople or equivalent organisations to contact me
- (d) lodge/claim/transfer to/from a Bond Authority
- (e) refer to Tribunals/Courts & Statutory Authorities (where applicable)

I am aware that if information is not provided or I do not consent to the uses to which personal information is put, the Agent cannot provide me with the lease/tenancy of the premises

Signature	Date

F. APPLICANT HISTORY		H. OTHER INCOME		
How long have you lived at your current	address?	Do you receive any Government benefits YES/NO		
Years	Months	Please provide Details Amount per fortnight		
Why are you leaving this address?		\$		
		: OTHER INFORMATION	T	
Landlord/Agent details of this property (if applicable)	i. OTHER INFORMATION		
Name of landlord or agent		Car Registration		
Landlord/agent's phone no.	Wooldy Dont Boid			
Landiord/agent's phone no.	Weekly Rent Paid	Please provide details of any pets		
Landlord/agent's email address	٦	Breed/type	Council registration / number	
Landiold/agent's email address		1.		
What was your previous residential add	ress?	2.		
		J. EMERGENCY CONTACTS		
How long did you live at this address?		Surname	Given name/s	
Years	Months			
Landlord/Agent details of this property ((if applicable)	Relationship to you	Phone no.	
Name of landlord or agent	,	neiddensinp to you		
Landlord/agent's phone no.	Weekly Rent Paid	Surname	Given name/s	
	\$			
Landlord/agent's email address		Relationship to you	Phone no.	
		neiddensinp to you		
Was bond refunded in full?		, L		
If not why not?		K. IDENTIFICATION CHECK		
I not why not:		REQUIRED DOCUMENTS: (mandatory to	have proof of income and photo ID)	
G. EMPLOYMENT HISTORY]		
		1. Photo ID (passport/driver's licence	e) YES NO	
What is your occupation?]		
What is the nature of your employment?	?	2. Proof of Income (payslips/centrel	ink) YES NO	
FULL TIME/ CASUAL/ PART TIME		3. Last FOUR Rent Receipts	YES NO	
Employer's name (accountant if self employ	yed or institution if student)	-	TES NO	
		4. Previous Bills (Telstra/AGL etc)	YES NO	
Employer's address (accountant if self empl	loyed or institution if student)	5. Current Vehicle Registration Pape	rs YES NO	
		3. Current venicle Registration Pape	15 16	
		WE ONLY ACCEPT COMPLETE APPLICATION		
Contact name	Phone no.	DOCUMENTS ARE PHOTOCOPIED IN ADV DOCUMENTS.	ANCE AS WE DO NOT PHOTOCOPY	
Longth of condenses	Not Weekly to accomp			
Length of employment Years Mor	Net Weekly Income nths \$	L. OFFICE USE ONLY		
Please provide other employment detail		TICA Checked		
Occupation?		1	Date:	
What is the nature of your employment?	?	Rental reference Checked		
FULL TIME/ CASUAL/ PART TIME Employer's name (accountant if self employ	ved or institution if student)		Date:	
projer o manne (accountant il sen employ	os o. montanon a statemy	Familiary and Charling		
Employer's address (accountant if self empl	loyed or institution if student)	Employment Checked	,	
			Date:	
		RP Data Checked		
Contact name	Phone no.	Tr Data Checkeu		
Length of employment	Net Weekly Income	J	Date:	
	nths \$]		
	▼			