

PROPERTY DETAILS - Property you would like to rent

Proposed Property: _____ Post Code: _____
Rent per Week: \$ _____ Bond Amount: \$ _____
Length of Tenancy: _____ Years _____ Months Tenancy to Commence: _____ / _____ / _____
How many tenants will occupy the property?: Adults _____ Children _____ Ages _____
Have you viewed the property?: Yes No

1st APPLICANT

Mr Ms Miss Mrs Other
Family/Last Name: _____
Other Names: _____
Date of Birth: _____
Drivers Licence No: _____ Expiry Date: ____ / ____ / ____
Licence State: _____
Passport No: _____ Passport Country: _____
Pension No: (if applicable) _____ Type: _____
Current Address: _____
_____ Post Code: _____
Home Phone: _____ Bus Phone: _____
Mobile Phone: _____
E-mail: _____
Relationship to other applicant _____

Your Rental History - Current Landlord/Agent Details

How long at Current Address?: _____ Years _____ Months
Reason for Leaving this Address: _____

Landlord/Agent (if applicable): _____
Landlord/Agents Phone No: _____
Rent per Week \$: _____
Bond Refunded: _____ If not why? _____
Previous Residential Address: _____
_____ Post Code: _____

Your Rental History - Previous Landlord/Agent Details

How long at previous Address?: _____ Years _____ Months
Reason for Leaving this Address: _____

Landlord/Agent (if applicable): _____
Landlord/Agents Phone No: _____
Rent per Week \$: _____
Bond Refunded: _____ If not why? _____

Employment History - Applicant 1

Current Occupation: _____
Nature of your Employment: FULL TIME/ PART TIME / CASUAL (circle)
Current Employers Name: _____
Employers Address: _____
_____ Post Code: _____
Contact Name: _____ Phone: _____
Length of Employment: _____ Years _____ Months
Net Weekly Income: _____

2nd APPLICANT

Mr Ms Miss Mrs Other
Family/Last Name: _____
Other Names: _____
Date of Birth: _____
Drivers Licence No: _____ Expiry Date: ____ / ____ / ____
Licence State: _____
Passport No: _____ Passport Country: _____
Pension No: (if applicable) _____ Type: _____
Current Address: _____
_____ Post Code: _____
Home Phone: _____ Bus Phone: _____
Mobile Phone: _____
E-mail: _____
Relationship to other applicant _____

Your Rental History - Current Landlord/Agent Details

How long at Current Address?: _____ Years _____ Months
Reason for Leaving this Address: _____

Landlord/Agent (if applicable): _____
Landlord/Agents Phone No: _____
Rent per Week \$: _____
Bond Refunded: _____ If not why? _____
Previous Residential Address: _____
_____ Post Code: _____

Your Rental History - Previous Landlord/Agent Details

How long at previous Address?: _____ Years _____ Months
Reason for Leaving this Address: _____

Landlord/Agent (if applicable): _____
Landlord/Agents Phone No: _____
Rent per Week \$: _____
Bond Refunded: _____ If not why? _____

Employment History - Applicant 2

Current Occupation: _____
Nature of your Employment: FULL TIME/ PART TIME / CASUAL (circle)
Current Employers Name: _____
Employers Address: _____
_____ Post Code: _____
Contact Name: _____ Phone: _____
Length of Employment: _____ Years _____ Months
Net Weekly Income: _____

Previous Employment History - Applicant 1

Previous Employer: _____
Occupation: _____
Previous Employers Address: _____
_____ Post Code: _____
Previous Employers Phone: _____
Length of Employment: _____ Years _____ Months

If you are a Student

Name of Institution: _____
Faculty/Department: _____
Student Union Number: _____ Student Id: _____
Income Source: _____ Net Weekly Income: _____

If you receive a Centerlink Payment

Type of Payment: _____
Customer Number: _____
Amount \$: _____ Per Fortnight

Other Details

Do you have any pets: Yes/No (circle)
If YES registered?: Yes/No | Types: _____
Breed/s: _____ Ages: _____

Previous Employment History - Applicant 2

Previous Employer: _____
Occupation: _____
Previous Employers Address: _____
_____ Post Code: _____
Previous Employers Phone: _____
Length of Employment: _____ Years _____ Months

If you are a Student

Name of Institution: _____
Faculty/Department: _____
Student Union Number: _____ Student Id: _____
Income Source: _____ Net Weekly Income: _____

If you receive a Centerlink Payment

Type of Payment: _____
Customer Number: _____
Amount \$: _____ Per Fortnight

Other Details

Do you have any pets: Yes/No (circle)
If YES registered?: Yes/No | Types: _____
Breed/s: _____ Ages: _____

References / Contacts

We require a minimum of: (1) One emergency contact (2) personal references (not related to you)

Emergency Contact - Applicant 1

Name: _____
Address: _____
_____ Post Code: _____
Home Phone: _____ Work Phone: _____
Mobile: _____ Relationship: _____

Emergency Contact - Applicant 2

Name: _____
Address: _____
_____ Post Code: _____
Home Phone: _____ Work Phone: _____
Mobile: _____ Relationship: _____

References - Applicant 1

(1) Name: _____
Address: _____
_____ Post Code: _____
Home Phone: _____ Work Phone: _____
Mobile: _____ Relationship: _____
(2) Name: _____
Address: _____
_____ Post Code: _____
Home Phone: _____ Work Phone: _____
Mobile: _____ Relationship: _____

References - Applicant 2

(1) Name: _____
Address: _____
_____ Post Code: _____
Home Phone: _____ Work Phone: _____
Mobile: _____ Relationship: _____
(2) Name: _____
Address: _____
_____ Post Code: _____
Home Phone: _____ Work Phone: _____
Mobile: _____ Relationship: _____

Declaration & Authority

I hereby offer to rent the property from the owner under lease to be prepared by the Agent. Should this application be accepted by the Landlord I agree to enter into a Residential Tenancy Agreement.

I acknowledge that this application is subject to the approval of the Landlord/Owner. I declare that all the information contained in this application (including the front page) is true and correct and given of my own free will. I declare that I have inspected the premises and am not bankrupt.

I also 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

If I default under a rental agreement, I agree that the Agent may disclose details of any such default to the 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 were applicable.
- (f) Refer to collection agents/lawyers where applicable.
- (g) Complete a credit check with NTD (National tenancies Database)
- (h) Transfer water account details into my name.

I am aware that if the 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. I am aware they may access personal information on the contact details above.

I am aware that the agent will disclose my personal information to YourPorter for the purposes of transferring the water account into my name. This will enable YourPorter to connect all accepted tenants to relevant water boards for water usage.

Applicant #1 Signature: _____ Dated: ____/____/____ Applicant #2 Signature: _____ Dated: ____/____/____

PLEASE NOTE: FOR YOUR BENEFIT IT IS ADVISED THAT YOU INCLUDE AS MUCH DOCUMENTATION POSSIBLE TO SUPPORT YOUR HISTORY AND CURRENT SITUATION WITH YOUR APPLICATION

Identification (tick the boxes on documents you are providing)

IDENTIFICATION CHECK - Please ensure the following identification has been photocopied and is attached to this application

Item	<input type="checkbox"/>	Item	<input type="checkbox"/>
Current Drivers Licence	<input type="checkbox"/>	Employment Confirmation	<input type="checkbox"/>
Passport	<input type="checkbox"/>	Current Car/Motorbike Rego Papers	<input type="checkbox"/>
Previous 3 rent receipts	<input type="checkbox"/>	Copy of Birth Certificate	<input type="checkbox"/>
Minimum 2 written references from Agent	<input type="checkbox"/>	Medicare or Credit Card	<input type="checkbox"/>
Centerlink Payments	<input type="checkbox"/>	Bank Statements	<input type="checkbox"/>

Ensure that all the references and identification requirements are attached to this application.
We do not provide a photo copy service.

Utility Connections



Telephone: 1300 400 600
 Fax: 1300 326 468
 www.yourporter.com.au

YourPorter is a FREE service connecting utilities and other services.

If the Agent approves this application, YourPorter will connect your water for the purpose of usage charges at your new property on behalf of the Real Estate Agent. YourPorter will be contacting you by phone, SMS, or email for the purposes of assisting you to connect your utilities within 24 hours of receiving this application for next business day connection.

- | | | | | | |
|--|---|---|--|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> Electricity | <input type="checkbox"/> Gas | <input checked="" type="checkbox"/> Water | <input type="checkbox"/> Telephone | <input type="checkbox"/> Pay TV | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Car Insurance | <input type="checkbox"/> Life Insurance | <input type="checkbox"/> Health Insurance | <input type="checkbox"/> Home & Contents | <input type="checkbox"/> Home Loans | |

DECLARATION AND ACCEPTANCE:

I/We consent to the disclosure of this application form (including any personal information contained in this form) to YourPorter Pty Ltd (ABN 36 252 576 050) for the purpose of allowing YourPorter and its service providers to contact me for the connection of services as offered by YourPorter.

I/We acknowledge that if I/We do not provide my/our personal information, YourPorter will not be able to provide these services to me/us. YourPorter will ensure that my/our personal information is collected, used, held and disclosed in accordance with the requirements of the Privacy Act 1988 (Cth).

I/We acknowledge that YourPorter may receive a benefit in relation to the connection of any of the services listed above. I/We consent to YourPorter contacting me by phone or SMS in relation to the connection of the services listed above. I/We acknowledge that this consent permits YourPorter to contact me even if the numbers listed on this application are listed on the Do Not Call Register. YourPorter will otherwise collect, hold, use and disclose personal information in accordance with their privacy policies, which are available at www.yourporter.com.au/general/privacy-policy/. YourPorter is a free service, but I/We acknowledge that standard connection fees may apply for services connected (in addition to the ongoing service fees).

I/We acknowledge that neither YourPorter nor the Agent accept any responsibility for any delay in or failure to arrange or provide for any connection of a service or for any loss, damage, cost or expense in connection with such delay or failure. By signing this application, I/We understand YourPorter is a value add product and that I/We are under no obligation to use YourPorter.

Signature

Date