

Email: reception@donnasandsproperty.com. au



APPLICATION FOR TENANCY

ATTEIOATION TENANOT
PROPERTY ADDRESS:
REQUESTED COMMENCEMENT DATE OF TENANCY:
REQUESTED TERM OF TENANCY:
RENTAL AMOUNT PER WEEK:
IDENTIFICATION REQUIRED PER APPLICANT – Please provide 100 points *Photo Identification MUST be Provided*
□ Birth Certificate 70 Points □ Passport 70 Points □ Driver's License/18+ Card 40 Points □ Other Government Identification 40 Points □ 3 Recent Rent Receipts 25 Points □ Current Vehicle Registration 25 Points □ Bank/Credit Card Statement 25 Points □ Medicare Card 10 Points
MUST HAVE ☐ Rates Notice (If you own your own home) ☐ PROOF OF INCOME – Acceptable Documents Include: • 3 Recent Payslips • Letter/Contract of Appointment on Company Letterhead • Bank Statements showing minimum 3 recent wage deposits, and applicant's name • Current Centrelink Statement.
Applicants to read & complete before submitting application:
• I understand that if the nominated applicant is advised this Application is approved then within 24 hours, all approved Applicants are to sign the General Tenancy Agreement and pay 2 weeks rent as Part Bond. The tenant is then bound to the terms of the Agreement and the Property will cease to be available for rent. If the tenancy does not proceed, steps to apply for a refund of the Bond will be taken by the Agent for monies owed for rent until a replacement Tenant is secured.
 PAYMENT OF RENT – Donna Sands Boutique Property <u>DOES NOT</u> accept cash, cheques or money orders in the office. If you wish to pay via one of these options you can go into a Suncorp bank and deposit it into our account (bank account details can be provided). We do have Eftpos facilities in the office (1% surcharge applies to credit card transactions). You can also pay via Internet, Phone or Direct Debit.
 I understand that bonds cannot be transferred between properties managed by Donna Sands Boutique Property
Applicants Checklist ATTACHED COPIES OF ALL IDENTIFICATION APPLICANT HAS INSPECTED THE PROPERTY BOTH INTERNALLY AND EXTERNALLY IF NOT INSPECTED TENANT HAS COMPLETED AND ATTACHED A COPY OF LET-26 REQUEST TO SIGN A LEASE AGREEMENT FOR UNSEEN PROPERTY COMPLETED APPLICATION IN FULL INCLUDING PRIVACY DISCLOSURE
□ FORM 18A GENERAL TENANCY AGREEMENT HAS BEEN MADE AVAILABLE TO APPLICAN

SEPARATE APPLICATION COMPLETED FOR ANYONE OVER THE AGE OF 18



PRIVACY DISCLOSURE STATEMENT

We are an independently owned and operated business and are bound by the National Privacy laws. We collect personal information about you in this form to assess your Application for Tenancy. We may need to collect information about you from your previous Lessors Agents, your Employer/s and Referees. We will also check if details of Tenancy defaults by you are held on a Tenancy Database. Your consent for us to collect the information is set out below in the Privacy Consent section.

COLLECTION NOTICE

The personal information you provide in this application to our Agency and collected from other sources is necessary for Donna Sands Boutique Property to verify your identity, to process and evaluate the Application and to manage the Tenancy. If the Application is successful, personal information collected about you in this Application and during the course of your Tenancy may be disclosed for the purpose for which it was collected to other parties including Lessor/s, Referees, other Agents and third party operators of Tenancy Databases. Information already held on Tenancy Databases may also be disclosed to our Agency and/or the Lessor/s. If you enter into a General Tenancy Agreement and if you fail to comply with your obligations under the Agreement, the facts and other relevant personal information collected about you during the course of your Tenancy may also be disclosed to the Lessor/s, third party operators of Tenancy Databases and/or the Agents.

You have the right to access personal information that we hold about you by contacting our Privacy Officer. You can also correct this information if it is inaccurate, incomplete or out of date. If your Application is not successful it will be stored securely for a period of one month only. If you decide not to collect your Application we will destroy your documents to comply with Privacy Legislation.

If you do not complete this form or do not sign the consent below then your Application for Tenancy may not be considered by the owner of the relevant Property or, if considered, may be rejected, due to insufficient information to assess the Application.

PRIVACY CONSENT

I acknowledge that I have read the above Privacy Disclosure Statement and Collection Notice of Donna Sands Boutique Property, I authorise Donna Sands Boutique Property to collect information about me from:

- My previous letting Agents and/or Lessors;
- My personal referees, employers and all other references on this application;
- Tenancy Databases to which Donna Sands Boutique Property subscribes. I can refer to their Privacy Disclosure Statements via; www.tica.com.au

I authorised Donna Sands Boutique Property to refer my name and contact details to service provider/s including tradespeople (to attend to work required at this property), salespeople, primary and secondary Agents, valuer/s, the Lessor, other Agents, database operators, other Property Managers, Body Corporate, Insurance Companies, Financial Services, if required in the future, and to Authorities as required by law.

MARKETING CONSENT

I understand that the Agency may need to contact me about Property related information eg, properties for rent or sale or other services which may interest me. I am the telephone account holder or nominated person by the account holder and authorise Donna Sands Boutique Property to use the phone details provided below to contact me for marketing purposes until I advise otherwise.

ELECTRONIC TRANSMISSION

	It is agreed by ticking this box, consent is given to receive any documentation relevant to the Tenancy by electronic
con	nmunication methods such as email or facsimile and that the method of receiving advice or notification by SMS is
acc	epted

Acknowledgement and consent by applicant				
Applicant's Signature:				
Applicant's Name:				
Date:/				



Rental Tenancy Application Form

One Application Per Person - Please refer to the Terms and Conditions before making Application. Please complete all sections in full. Incomplete Applications cannot be processed.

FULL NAME OF APPLICANT:				
DATE OF BIRTH:/				
SEX: Male/Female (Please Circle)	MARITAL STATUS:			
HOME PHONE:	MOBILE:			
EMAIL:				
MAKE & MODEL OF VEHICLE:				
	STATE OF REGISTRATION:			
DRIVERS LIC. NO & STATE OF ISSUE:				
DETAILS OF ANY ADDITIONAL VEHICLES/BOATS/TRAILERS/CARAVANS ETC				
HAVE YOU EVER RENTED THROUGH AN AGENT:	YES/NO (Please Circle)			
CURRENT RESIDENTIAL ADDRESS:				
PERIOD OF OCCUPANCY:FROM/_	TO/ RENT PER WEEK: \$			
WAS BOND REFUNDED IN FULL? YES/NO	IF NOT WHY?			
REASON FOR LEAVING:				
CONTACT DETAILS FOR VERIFICATION : (Please Circle) LESSOR/AGENT/OTHER				
NAME:	PHONE/MOBILE/EMAIL:			
PREVIOUS RESIDENTIAL ADDRESS:				
PERIOD OF OCCUPANCY:FROM/	TO RENT PER WEEK: \$			
WAS BOND REFUNDED IN FULL? YES/NO	IF NOT WHY?			
REASON FOR LEAVING:				
CONTACT DETAILS FOR VERIFICATION: (Please Circle) LESSOR/AGENT/OTHER				
NAME:	PHONE/MOBILE/EMAIL:			

TOTAL NUMBER OF OCCUPANTS TO RESIDE AT THE PROPERTY:				
WILL DEPENDANTS RESIDE AT THE PROPERTY: YES/NO IF YES PLEASE LIST FULL NAMES & AGES BELOW:				
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SMOKER: YES/NO (Please Circle)				
WILL YOU BE APPLYING FOR A BOND LOAN: YES/NO (Please Circle)				
DO YOU HAVE ANY PETS? YES/NO (Please Provide Pho	otos) TOTAL NUMBER OF PETS:			
1. PET TYPE/BREED:	NAME & AGE:			
VACCINATED: YES/NO DESEXED: YES/NO	REGISTRATION NO. WITH TCC:			
2. PET TYPE/BREED :	NAME & AGE:			
VACCINATED: YES/NO DESEXED: YES/NO	REGISTRATION NO. WITH TCC:			
PERSONAL REFERENCES: (cannot be relatives, partner o	r other people applying with you)			
NAME: B/H PHONE:	RELATIONSHIP TO YOU:			
NAME: B/H PHONE:	RELATIONSHIP TO YOU:			
NEXT OF KIN : (Contact in case of emergency – Cannot be someone who will be residing at the property)				
NAME: PH/MOB:	RELATIONSHIP TO YOU:			
EMPLOYMENT/INCOME: (please circle) PART TIME / FULL TIME / CONTRACTOR / CASUAL / UNEMPLOYED /SELF EMPLOYED /CENTRELINK/OTHER				
EMPLOYER DETAILS:				
CONTACT DETAILS OF PERSON TO VERIFY EMPLOYMENT	(Please provide employer/manager/supervisor details)			
NAME:	PHONE:			
EMAIL:	NET WEEKLY INCOME:			
LENGTH OF TIME AT CURRENT EMPLOYMENT:	YEARS: MONTHS:			
IF A STUDENT (please circle) NAME OF UNIVERSITY/TAFE/COLLEGE./OTHER:				
STUDENT ID NUMBER: VISA NUMB	ER: (Please provide copies)			
ARE YOU AN AUSTRALIAN CITIZEN: YES/NO (If no please provide details of VISA or residency status)				
SELF EMPLOYED: NAME OF BUSINESS:	ABN:			
NAME OF BUSINESS ACCOUNTANT:				
	EMAIL:			