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Residential Tenancy Applic	ation Form	I sections must be complete	ns must be completed & signed for your application to be processed			
Proposed rental property address:			Postcode:			
Rent per week: \$ Bond amount: \$			Have you inspected the property? YES / NO (circle)			
Length of tenancy:	Years Months	Tenancy to	commence:			
How many tenants will occupy	the property? Adul	ts Dependar	nts Ages:	Pets: Y / N (circle) If yes, attach photo of each	
Pet type:	Breed/s:		Reg no:	(Outdoor only: YES / NO	
Pet type:	Breed/s:		Reg no:	(Outdoor only: YES / NO	
Vehicle 1 Rego:	Model/Year/Colour:	Ve	hicle 2 Rego:	Model/Year/Co	olour:	
1. First Applicant			1. Second Applicant AN	ND/OR Partner		
Title: First Name:		Initial:	Title: First Name	:	Initial:	
Last Name:	Smoker:	YES / NO	Last Name:		Smoker: YES/NO	
ame at Birth: Place of Birth:			Name at Birth: Place of Birth:			
Date of Birth:	Birth: Age (Years / Months):		Date of Birth:	Age (Years / Months):		
Drivers Licence No:	State: NSW Card N	lo:	Drivers Licence No:	State: N	NSW Card No:	
Passport:	Medicare No:	Ref:	Passport:	Medicare No:	Ref:	
Pension Type (if applicable):	No:		Pension Type (if applicable	e):	No:	
Home Ph:	Mobile Ph:		Home Ph:	Mobile Pl	 h:	
Email:			Email:			
Marital status: Single Married	l De Facto Sep/Div Frie	ends Relatives	Marital status: Single M	Married De Facto S	ep/Div Friends Relatives	
2. Rental History -Applican	t		2. Rental History - Appl			
Current Address:			Current Address:			
Suburb:	Postcode	:	Suburb:		Postcode:	
How long at current address?	Years Months	3	How long at current addre	ess? Years	Months	
Reason for leaving:	Rent per	week: \$	Reason for leaving:		Rent per week: \$	
Landlord/Agent Name:	Phone:		Landlord/Agent Name:	Р	hone:	
Email:	Fax:		Email:	F	ax:	
Previous Address:			Previous Address:			
Suburb:			Suburb:			
Length at previous address?	Years Months	3	Length at previous addres	ss? Years	Months	
Reason for leaving:	Rent per	week: \$	Reason for leaving:		Rent per week: \$	
Landlord/Agent Name:	Phone:		Landlord/Agent Name:	Р	hone:	
Email:	Fax:		Email:	F	ax:	
Bond Refunded: YES/ NO If not, why?			Bond Refunded: YES/ NO If not, why?			
3. Employment Details - Ap	plicant 1		3. Employment Details- Applicant 2			
Occupation:	Employer's Name:		Occupation:	Employer's I	Name:	
Employment Address:			Employment Address:			
Suburb: Postcode:			Suburb: Postcode:			
Employer Phone No: Contact Name:			Employer Phone No: Contact Name:			
Length at current employment: Years Months			Length at current employn	nent: Years	Months	
Net Income: \$ Per week \$ Per month \$			Net Income: \$ Per week \$ Per month \$			
Are you self employed?	ES/ NO ABN:		Are you self employed? YES/ NO ABN:			
Accountant Name:	Phone:		Accountant Name: Phone:			
4. Social Security Benefits	OR Centrelink Payment		Social Security Benefits OR Centrelink Payment			
Type:	CRN:		Type:	CF	RN:	
\$ Per week	\$	Per month	\$ Per week	\$	Per month	

5. Referees - Applicant 1 - (NOT co-applicant)	5. Referees - Applicant 2 - (NOT co-applicant)					
1. Reference Name:	1. Reference Name:					
Address:	Address:					
Home Phone: Mobile Phone:	Home Phone: Mobile Phone:					
2. Reference Name:	2. Reference Name:					
Address:	Address:					
Home Phone: Mobile Phone:	Home Phone: Mobile Phone:					
6. Emergency Contact Details - Not same as co-applicant	6. Emergency Contact Details - Not same as co-applicant					
Name: Phone:	Name: Phone:					
Address:	Address:					
Suburb: Postcode:	Suburb: Postcode:					
Email:	Email:					
7. Please ensure you provide Min 100 Points of Identification - At least ONE item from each section is required - Photocopy ALL & bring originals						
Section ONE Section TWO	Section THREE					
(40) Drivers License (30) Current Payslips	(30) Previous tenancy reference (10) Electricity Account					
(40) Passport (complete the following) (30) Current Bank Stateme	ent (20) Previous two rent receipts (10) Gas Account					
(30) Centrelink Income Sta						
Name at Birth:	a recent rates notice (10) Birth Certificate					
Place of Birth:	(10) Motor Vehicle Rego (10) Medicare Card					
8. FREE Utility Connection Service	(10) Telephone Account					
O. I NEE CHIRLY COMMISSION CONTROL						
AND COMPARISON SERVICE Purpose of arranging the connection of nominated utility services; consent to Econnex disclosing personal information to utility services providers for the stated purpose and obtaining confirmation of connection; consent to Econnex disclosing confirmation details (including NMI, MIRN, utility provider) to the Real Estate Agent, its employees and Econnex may receive a fee/incentive from a utility provider in relation to the connection of utility services; acknowledge that whilst Econnex is a free service, a standard connection fee and/or deposit may be required by various utility providers; acknowledge that, to the extent permitted by law, the Real Estate Agent, its employees and Econnex shall not be liable for any loss or damage (including consequential loss and loss of profits) to me/us or any other person or any property as a result of the provision of services or any act or omission by the utility provider or for any loss caused by or in connection with any delay in connection or provision of, or failure to connect or provide the nominated utilities. I acknowledge that Econnex record all calls for coaching, quality and compliance purposes. Yes, Please Contact me Interpreter required Tick here to opt out						
9. Declaration of Authority						
I hereby offer to rent the property from the owner under a lease to be prepared by the Agent. Should this application be accepted by the landlord I agree to enter into a Residential Tenancy Agreement.	Printed Name Applicant 1:					
I acknowledge that this application is subject to the approval of the	Signature					
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.	Applicant 1:					
declare that I have inspected the premises and am not bankrupt. I, the tenant, accept the property in the condition it was in when inspected.	Printed Name					
I authorise the Agent to obtain personal information about me from:	Applicant 2:					
(a) The owner or the Agent of my current or previous residences;	Signature					
(b) My personal referees and employer/s;(c) Any record listing or database of defaults by tenants;	Applicant 2:					
Any record listing or database of defaults by tenants such as TICA, NTD or TRA for the purpose of checking your tenancy history. I am aware that I may access						
my personal information by contacting: TICA 1902 220 346	10. Payment Details					
NTD 1300 563 826						
I am aware that the Agent will use and disclose my personal information within	Property Rental per week					
this application in order to:	Rent in advance (2 wks rent) \$					
(b) prepare lease/tenancy documents	Refit ill advance (2 wks felit) \$					
(c) allow trades-people or equivalent organisations to contact me (d) lodge/claim/transfer to/from a Bond Authority	Rental Bond (4 wks rent) \$					
(e) refer to Tribunals/Courts & Statutory Authorities (where applicable) (f) refer to collection agents/lawyers (where applicable)						
(g) complete a check with TICA	Total Due \$					
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.	Eft/Bank Cheque/Money Order/Direct Deposit					