# **Tenancy Application Form**

Please be advised, this application will only be processed once ALL details have been completed and all copies of all supporting documents attached. Each applicant must submit an individual form.

#### **AGENCY DETAILS**

## **Excel Property Agency**

30 Orlando Street, Coffs Harbour, NSW 2450

|                             | JZ 665Z 46    |               |               |                              |       |      |
|-----------------------------|---------------|---------------|---------------|------------------------------|-------|------|
| Web: \                      | •             |               |               |                              |       |      |
| Email: r                    | rentals@e     | xcelpa.cor    | m.au          |                              |       |      |
| Property Mar                | nager         |               |               |                              |       |      |
| B. PRO                      | PERTY DET     | TAILS         |               |                              |       |      |
| 1. Address of               |               | ., 20         |               |                              |       |      |
|                             |               |               |               |                              |       |      |
|                             |               |               |               |                              |       |      |
|                             |               |               |               |                              |       |      |
| 2. Lease Com                | mencement     | Date:         |               |                              |       |      |
|                             | Day           |               | Mor           | nth                          | Y     | 'ear |
|                             |               |               |               |                              |       |      |
| 3. Lease Term               | 1:            |               |               |                              |       |      |
|                             |               | Years         |               |                              | Mont  | :hs  |
| 4. How many                 | tenants will  | occupy the    | property?:    |                              |       |      |
| Adults                      | Childre       | en            | Ages of Child | lren                         |       |      |
|                             |               |               |               |                              |       |      |
| C. PERS                     | SONAL DE      | TAILS         |               |                              |       |      |
| 5. Please give              | e us your det | tails         |               |                              |       |      |
| Mr N                        | /Is           | Miss          | Mrs           | Dr                           | Other |      |
|                             |               |               |               |                              |       |      |
| Surname                     |               |               | Given Nam     | e/s                          |       |      |
|                             |               |               |               |                              |       |      |
| Date of Birth               |               |               | Driver's lice | Driver's licence number      |       |      |
|                             |               |               |               |                              |       |      |
| Driver's licen              | ce expiry dat | te            | Driver's lic  | ence state                   | !     |      |
|                             |               |               |               |                              |       |      |
| Passport no.                |               |               | Passport co   | untry                        |       |      |
| 1 ussport no.               |               |               | T d35port cc  | , and y                      |       |      |
|                             |               |               |               |                              |       |      |
| Pension no. (if applicable) |               |               | Pension typ   | Pension type (if applicable) |       |      |
|                             |               |               |               |                              |       |      |
| 6. Please prov              | vide your co  | ntact details |               |                              |       |      |
| Home phone                  | no.           |               | Mobile pho    | one no.                      |       |      |
|                             |               |               |               |                              |       |      |
| Work phone                  |               |               | Fax no.       |                              |       |      |
| Work priorie                |               |               |               |                              |       |      |
|                             |               |               |               |                              |       |      |
| Email address               | 5             |               |               |                              |       |      |
|                             |               |               |               |                              |       |      |
| 7. What is yo               | ur current ac | ddress?       |               |                              |       |      |
|                             |               |               |               |                              |       |      |
|                             |               |               |               |                              |       |      |
|                             |               |               |               |                              |       |      |
| 8. Would you                | like to use R | Residential B | Bonds Online? | Yes                          | No    |      |
| Email address               |               |               |               |                              |       |      |
|                             |               |               |               |                              |       |      |
| Signature                   |               |               |               |                              |       |      |
|                             |               |               |               | Date                         |       | ٦    |
|                             |               |               |               | 1 1                          |       |      |



## **UTILITY CONNECTIONS**

This is a FREE service that connects all your utilities and other services.

Direct Connect can help arrange for the connection or provision of the following utilities

Electricity Cleaners Gas Insurance Phone Removalist Internet Truck or van hire Pay TV



Please tick this box if you would like Direct Connect to contact you in relation to any of the above utilities and other services.



We guarantee that when you connect with one of our market leading electricity and gas suppliers, your services will be connected on the day you move in. Please refer to Direct Connect's Terms & Conditions for further information.

Once Direct Connect has received this application Direct Connect will call you to confirm your details. Direct Connect will make all reasonable efforts to contact you within 24 hours of the nearest working day on receipt of this application to confirm your information and explain the details of the services offered. Direct Connect is a one stop connection service. Direct Connect's services are free. However, the relevant service providers may charge you a standard connection fee as well as ongoing service charges.

DECLARATION AND EXECUTION: By signing this application, you:

- 1. Acknowledge and accept Direct Connect's Terms and Conditions (which are included with this application).
- 2. Invite Direct Connect to contact you by any means (including by telephone or SMS even if the Customer's telephone number is on the Do Not Call Register) in order to provide Direct Connect's services to you, to enter into negotiations with you relating to the supply of relevant services as an agent for the service providers, and to market or promote any of the services listed above. This consent will continue for a period of  ${\bf 1}$ year from the date the Customer enters into the Agreement
- 3. Consent to Direct Connect using the information provided by you in this application to arrange for the nominated services, including by providing that information to service providers for this purpose. Where service providers are engaged by you, they may use this information to connect, supply and charge you for their services.
- 4. Authorise Direct Connect to obtain the National Metering Identifier and / or the Meter Installation Reference Number for the premises you are moving to.
- 5. Agree that, except to the extent provided in the Terms and Conditions, Direct Connect has no responsibility to you for the connection or supply (or the failure to connect or supply) any of the services.
- 6.Acknowledge that Direct Connect may receive a fee from service providers, part of which may be paid to the real estate agent or to another person, and that you are not entitled to any part of any such fee.

By signing this application form, I warrant that I am authorised to make this application and to provide the invitations, consents, acknowledgements, authorisations and other undertakings set out in this application on behalf of all applicants listed on this application.

| Tenant Signature  | Date                     |   |  |
|---|--------------------------|---|--|
|   |                          |   |  |
| PO Box 1519, Box Hill, Victoria 3128. P: 1300 664 715 F:1300 664 185. | www.directconnect.com.au | _ |  |

### E. DECLARATION

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.

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 NTD, TICA or TRA for the purpose of checking your tenancy history;

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

- NTD: 1300 563 826 TICA: 1902 220 346
- TRA: (02) 9363 9244

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)
- (f) refer to collection agents/lawyers (where applicable)
- (g) complete a credit check with NTD (National Tenancies Database)

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

| Tenant Signature | Date |  |  |
|------------------|------|--|--|
|                  |      |  |  |

| F. APPLICANT HISTORY  |                       | H. CONTACTS/REFERENCES                  |  |  |   |  |  |
|---|-----------------------|---|--|--|---|--|--|
| 9. How long have you lived at your current address?                 |                       |   | ddress?  | 22. Please provide a contact in case of emergency Surname Given name/s |   |  |  |
|   | Year                  | s                                       | Months   | J  | Given nume/3  |  |  |
| 10. Why are you leaving   | this address          | s?                                      |  | Relationship to you  | Phone no.   |  |  |
| 11 loudle 4/8 4   | ile of this           | ancii I                                 | if annicable)                                  |  |   |  |  |
| 11. Landlord/Agent detail Name of landlord or age                   | -                     | operty (                                | т аррисаріе)                                   | 23. Please provide 2 personal referen                                  | ces (not related to you)  |  |  |
|   |                       |   |  | 1. Surname   | 23. Please provide 2 personal references (not related to you) 1. Surname Given name/s |  |  |
| Landlord/agent's phone/   | /fax no.              | We                                      | ekly Rent Paid                                 |  |   |  |  |
|   |                       | \$                                      |  | Relationship to you  | Phone no.   |  |  |
| 12. What was your previ   | ous residen           | tial addr                               | ess?   | 1  |   |  |  |
|   |                       |   |  | 2. Surname   | Given name/s  |  |  |
| 13. How long were you a   | at this addre         | $\neg$                                  | ekly Rent Paid                                 | 1  |   |  |  |
| Years   | Month                 |   |  | Polationship to you  | Dhono no  |  |  |
| 14. Landlord/Agent detail Name of landlord or age                   |                       |   | if applicable)<br>ndlord/agent's phone         | Relationship to you  | Phone no.   |  |  |
|   |                       |   |  | ]  |   |  |  |
| Was bond refunded in fu   | ıll?                  |   | not why not?                                   | I. OTHER INFORMATION   |   |  |  |
|   |                       |   |  | 24. Car Registration   |   |  |  |
| 15. What was your second pre  | evious residen        | tial addre                              | ss? (ONLY complete if within the last 5 years) |  |   |  |  |
|   |                       |   |  | 25. Please provide details of any pets                                 |   |  |  |
| 16. How long were you at  |                       |   | ekly Rent Paid                                 | Breed/type   | Council registration / number   |  |  |
| Years   | Months                |   |  | 1.   |   |  |  |
| 17. Landlord/Agent detai<br>Name of landlord or ager                | ils of this pro<br>nt |   | f applicable)<br>ndlord/agent's phone          |  |   |  |  |
|   |                       |   |  | 2.   |   |  |  |
| Was bond refunded in ful  | II?                   | If                                      | not why not?                                   | 26. Are you a smoker? Yes No   |   |  |  |
|   |                       |   |  | J. PAYMENT DETAILS   |   |  |  |
| 18. Have you sold a prope   | erty? If yes,         | when?                                   |  | Property Rental  |   |  |  |
| 10. Address and calling a   | ~~~*                  |   |  | \$ per week O  | PR \$ per mont  |  |  |
| 19. Address and selling a   | gent                  |   |  | Dontal Dand // wooks routh   | \$  |  |  |
|   |                       |   |  | Rental Bond (4 weeks rent):  |   |  |  |
| G. EMPLOYMENT HISTORY   |                       | First payment of rent in advance (2 wee | eks rent)                                      |  |   |  |  |
| 20. Please provide your employment details What is your occupation? |                       |   |  | Total  | \$  |  |  |
| , and it year coaparion.  | ·                     |   |  |  |   |  |  |
| What is the nature of you   | ur employm            | ent? (cir                               | cle)   | K. ALL APPLICANTS MUST S   | SUPPLY  |  |  |
| FULL TIME   |                       | RT TIME                                 | CASUAL   | Please ensure you provide:   |   |  |  |
| Employer's name (account  | tant if self em       | ployed o                                | institution if student)                        | 1. A current drivers Licence or Proo                                   | f of Age Card   |  |  |
|   |                       |   |  | 2. Current proof of income (Pay Slip                                   | o or Centrelink Statement)  |  |  |
| Employer's address (accou   | untant if self        | employed                                | or institution if student)                     | 3. Current Bank Statement  |   |  |  |
|   |                       |   |  |  |   |  |  |
|   |                       |   |  | 4. Utility Bill (Electricity, Phone or S                               | ouperannuaπon Statement) —  |  |  |
| Contact name  |                       | Pho                                     | ne no.   | 5. Passport (If you have one)  |   |  |  |
|   |                       |   |  | Note:  |   |  |  |
| Length of employment  |                       |   | Net Income                                     | 1. Each person applying must comp                                      | lete an application   |  |  |
| Years   |                       | Months .                                | \$   | 2. All questions must be answered                                      | for the application to be processed   |  |  |
| 21. Please provide your p<br>Occupation?                            | orevious em           | ploymen                                 | t details                                      | 3. Application must be signed and a                                    | accepted  |  |  |
|   |                       |   |  |  |   |  |  |
| Employer's name  4. No Photocopying will be done at our office      |                       |   |  |  |   |  |  |
|   |                       |   |  |  |   |  |  |
| Length of employment  |                       |   | Net Income                                     | Signature of Landlords Agent   | Date  |  |  |
| Years   |                       | Months                                  | \$   |  |   |  |  |