

	Application for Residential Tenancy (One application to be completed per person)				
	PART 1: RENTAL PROPERTY DETAILS				
ITEM 1:	AGENT DETAILS				
	AGENCY NAME:				
	Holloway Investment Group Pty Ltd Trading as The Real Estate Firm				
	ADDRESS: PO Box 3599				
	SUBURB: Loganholme STATE: QLD POSTCODE: 4129 PHONE: MOBILE: FAX: EMAIL:				
	0418 783 216 propertymanagement@therealestatefirm.com.au				
ITEM 2:	PROPERTY DETAILS				
	ADDRESS:				
	SUBURB:				
	Rent: \$ Sent: ← weekly / fortnightly / monthly Bond: \$				
	Tenancy Term: Fixed term agreement Periodic agreement				
	Starting on: Ending on:				
	PART 2: APPLICANT DETAILS				
ITEM 3:	CONTACT DETAILS				
	FULL NAME: DATE OF BIRTH:				
	Have you been known by any other name(s)? Yes No If Yes, what other name(s) have you been known by?				
ITEM 4:					
	Do you have any dependants? Yes No DEPENDANT FULL NAME(S): RELATIONSHIP TO APPLICANT: DEPENDANT DATE OF BIRTH:				
ITEM 5:	SMOKING				
	Are you or any of the dependants living with you a smoker?				
ITEM 6:	PETS				
	Do you intend to keep pets at the property? Yes No Number of pets:				
	Type of Pet/s: Are your pets registered with a council? Yes No				
	If Yes, please state which council:				
INITIALS	(Note: initials not required if signed with Electronic Signature) 000011510605				

ITEM 7: APPLICANTS ADDRESS HISTORY

	CURRENT RESIDENTIAL ADDRESS:					
	SUBURB: PERIOD OF OCCUPANCY:	TYPE OF OCCUPANCY:			STATE:	
	CURRENT AGENT/LESSOR (If renting):	Rent	Dwner	Other: →		
	AGENT/LESSOR PHONE:	FAX:	EMAIL:			
	CURRENT RENT \$ Rent period:		← weekly / fortnightly / monthly		R LEAVING:	
	PREVIOUS RESIDENTIAL ADDRESS:	• weeky / lotal	ignay / monany			
	SUBURB: PERIOD OF OCCUPANCY:	TYPE OF OCCUPANCY:			STATE:	
	PREVIOUS AGENT/LESSOR:		Dwner	Other: \rightarrow		
	AGENT/LESSOR PHONE:	FAX:	EMAIL:			
	PREVIOUS RENT: \$Rent period:	← weekly / fortn	ightly / monthly	REASON FOR	R LEAVING:	
ITEM 8:	EMPLOYMENT DETAILS					
	Are you employed? Yes Employment status: Full tir OCCUPATION: Yes	No (if no, please provi	Casual	vious employe Contract NET INCOME \$	Self employ	red
	DATE COMMENCED EMPLOYMENT (a	approx.)		DATE TERMI	NATED EMPLOYMEN	Г (if any):
	ADDRESS:					
	SUBURB:			STATE:	POSTCODE:	
	PHONE:	FAX:	EMAIL:			
	IF SELF EMPLOYED, ACCOUNTANT'S	S NAME:				PHONE:
ITEM 9:	CENTRELINK PAYMENTS					
	Are you receiving any regular Centre DESCRIPTION OF PAYMENT(S):	elink payments?	No			
	TOTAL INCOME (PER WEEK): \$	DATE PAYMENTS COMMENC	ED:			
TEM 10:	STUDENT DETAILS					
	Are you studying full time? NAME OF EDUCATION INSTITUTION N	Yes No	STUDEN	T IDENTIFICATI	ON NUMBER:	

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ITEM 11:	IN 11: PERSONAL REFERENCES						
	Please do not list relatives, another applicant or partners and provide business hours contact numbers. REFEREE 1:				RELATIONSHIP:		
	ADDRESS:				PHONE/MOBILE:		
	SUBURB:		STATE:	POSTCODE:	-		
	REFEREE 2:				RELATIONSHIP:		
	ADDRESS:						
	SUBURB:		STATE:	POSTCODE:			
ITEM 12:	PERSONAL REPRESENTATIVE						
	i.e. preferred person(s) to be conta	cted in the event of an emerg	ency.				
	REPRESENTATIVE 1:				RELATIONSHIP:		
	ADDRESS:						
	SUBURB: REPRESENTATIVE 2:		STATE:	POSTCODE:	RELATIONSHIP:		
	REFRESENTATIVE 2.						
	ADDRESS:						
					PHONE/MOBILE:		
	SUBURB:		STATE:	POSTCODE:			
	PART 3: SUPPORTING	DOCUMENTS					
ITEM 13:	IDENTIFICATION						
	You are required to meet a 100 point identification criterion upon submission of your application. The Agent/Lessor may photocopy any item and retain as part of your application.						
	Please tick the identifying documer	nts you have provided with yo	ur application.				
	IMPORTANT: At least one form of Photo Identification MUST be provided.						
	70 Points						
	Passport	Full birth certificate	Ci	tizenship certificate			
	40 Points						
	Australian Driver's Licence	Student Photo ID		epartment of Veterans Af	fairs card		
	Centrelink card	Proof of age card	St	ate/Federal Government	Photo ID		
	25 Points						
	Medicare card	Council rates notice	M	otor vehicle registration			
	Telephone bill	Electricity bill	Ga	as bill			
	Tenancy History Ledger	Bank statement		redit card statement			
	Last FOUR rent receipts	Rent bond receipt	Pr	evious tenancy agreeme	ent		
ITEM 14:	PROOF OF INCOME						
	You are also required to supply the	e Agent/Lessor with proof of yo	our income upon	submission of your appli	cation.		
	Employed: Last TWO pay slips.						
	Self employed: Bank statements, Group Certificate, Tax Return or Accountant's letter.						

Not employed: Centrelink statement.

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PART 4: DECLARATION

PLE	ASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE or FALSE		
	I, the Applicant		
1.	Have never been evicted by an Agent/Lessor	True	False
2.	Have no known reasons that would affect my ability to pay rent	True	False
3.	Was refunded the rental bond for my last address in full (if applicable)	True	False
	If false, please advise what deductions were made from your bond?		
4.	Have no outstanding debt to another Agent/Lessor?	True	False
	If false, why are you in debt to your past Agent/Lessor?		
PA	RT 5: TENANCY DATABASES		
The	Agency may use the following tenancy databases to check the rental history of the Applicant/s:		
1			
PA	RT 6: ACKNOWLEDGEMENT		
PLE	ASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES or NO		
	I, the Applicant		
1.	Acknowledge that my personal contents insurance is not covered under any Lessor insurance policy/s and understand that it is my responsibility to insure my own personal belongings.	Yes	No
2.	Understand that you as the Agent/Lessor have collected this information for the purpose of		
2.	determining whether I am a suitable tenant for the property - in particular to check my identification, my ability to care for the property, my character and my creditworthiness.	Yes	No
	2.1 for such purposes, I authorise you to contact the persons named in this application,		
	and to undertake such enquiries and searches (including tenancy databases searches) as you consider reasonably necessary.	Yes	No
	2.2 in doing so, I understand that information provided by me may be disclosed to, and		
	further information obtained from, referees named in this application and other relevant third parties.	Yes	No
3.	Acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide		
0.	reasons as to why.	Yes	No
4.	Consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the Agent/Lessor to pass my details onto others which	Yes	No
	may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases.	163	
5.	Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a),	Voc	No
	the Standard Terms and any special terms before completing this application.	Yes	
6.	Acknowledge that I have received or have available the Information Statement (Form 17a), body corporate by-laws (if applicable) before completing this application.	Yes	No
7.	Acknowledge that I have signed the agency's Privacy Notice and Consent.	Yes	No
8.	Acknowledge that the Lessor and Applicant (tenant) are bound by this agreement immediately upon communication of either the lessor or agent's acceptance of the application.	Yes	No
9.	Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2		
	of the Electronic Transactions (Queensland) Act 2001 (Qld) and the Electronic Transactions Act 1999 (Cth).	Yes	No
10.	Declare that the above information is true & correct and that I have supplied it of my own free will.	Yes	No
	Name of Applicant:		
	Signature: Date:		

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