



Shop16B/361Robina Parkway
 Robina, QLD 4226
 P: 07-55621272 M: 0416 199 211
 E: rentals@platinumrealtyplus.com.au

Residential Tenancy Application Form All sections of this form 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 (Please circle)

Length of Tenancy: _____ Years: _____ Months: _____ Tenancy to Commence: _____

How many tenants will occupy the property? Adults: _____ Dependents: _____ Ages: _____ Pets: Yes / No (Circle)
 If yes attach a PHOTO OF EACH pet.

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: _____ Vehicle 2 Rego: _____ Model/Year /Colour: _____

1. First Applicant

Title: _____ First Name: _____ Middle Initial: _____

Last Name: _____ Smoker: Yes / No

Name at Birth: _____ Country of Birth: _____

Date of Birth: ____ / ____ / ____ Age (Years / Months): _____

Drivers Licence No: _____ State: _____

Card No. (NSW only): _____

Passport No: _____ Medicare No: _____ Ref: _____

Pension Type (If applicable): _____ No: _____

Home Phone: _____ Mobile Phone: _____

Email: _____

Marital status: Single Married De Facto Sep/Div Friends Relatives _____

Maiden Name (If applicable): _____

2. Rental History - Applicant 1

Current Address:

Suburb: _____ Postcode: _____

How long at current address? Years: _____ Months: _____

Reason for Leaving: _____ Rent per week: \$ _____

Landlord/Agent Name: _____ Phone: _____

Email: _____ Fax: _____

Previous Address:

Suburb: _____ Postcode: _____

Length at previous address? Years: _____ Months: _____

Reason for Leaving: _____ Rent per week: \$ _____

Landlord/Agent Name: _____ Phone: _____

Email: _____ Fax: _____

Bond refunded: Yes / No If not, why?: _____

3. Employment Details - Applicant 1

Occupation: _____ Employers Name: _____

Employment Address: _____

Suburb: _____ Postcode: _____

Employer Phone No: _____ Contact Name: _____

Length at current employment Years: _____ Months: _____

1. Second Applicant AND/OR Partner

Title: _____ First Name: _____ Middle Initial: _____

Last Name: _____ Smoker: Yes / No

Name at Birth: _____ Country of Birth: _____

Date of Birth: ____ / ____ / ____ Age (Years / Months): _____

Drivers Licence No: _____ State: _____

Card No. (NSW only): _____

Passport No: _____ Medicare No: _____ Ref: _____

Pension Type (If applicable): _____ No: _____

Home Phone: _____ Mobile Phone: _____

Email: _____

Marital status: Single Married De Facto Sep/Div Friends Relatives _____

Maiden Name (If applicable): _____

2. Rental History - Applicant 2

Current Address:

Suburb: _____ Postcode: _____

How long at current address? Years: _____ Months: _____

Reason for Leaving: _____ Rent per week: \$ _____

Landlord/Agent Name: _____ Phone: _____

Email: _____ Fax: _____

Previous Address:

Suburb: _____ Postcode: _____

Length at previous address? Years: _____ Months: _____

Reason for Leaving: _____ Rent per week: \$ _____

Landlord/Agent Name: _____ Phone: _____

Email: _____ Fax: _____

Bond refunded: Yes / No If not, why?: _____

3. Employment Details - Applicant 2

Occupation: _____ Employers Name: _____

Employment Address: _____

Suburb: _____ Postcode: _____

Employer Phone No:

Con

tact Name: Length at current

Net Income \$ Per Week \$ Per Month \$

Are you self-employed? Yes / No ABN:

Accountant Name: Phone:

employment Years: Months:

Net Income \$ Per Week \$ Per Month \$

Are you self-employed? Yes / No ABN:

Accountant Name: Phone:



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4. Social Security Benefits OR Centrelink Payment

Type: _____ CRN: _____
 \$ _____ Per Week \$ _____ Per Month

5. Referees - Applicant 1 - (NOT co-applicant)

1. Reference Name: _____

Address: _____

Home Phone: _____

Mobile No: _____

2. Reference Name: _____

Address: _____

Home Phone: _____ Mobile No: _____

6. Emergency Contact Details - (Not same as co-applicant)

Name: _____ Phone No: _____

4. Social Security Benefits OR Centrelink Payment

Type: _____ CRN: _____
 \$ _____ Per Week \$ _____ Per Month

5. Referees - Applicant 2 - (NOT co-applicant)

1. Reference Name: _____

Address: _____

Home Phone: _____

Mobile No: _____

2. Reference Name: _____

Address: _____

Home Phone: _____ Mobile No: _____

6. Emergency Contact Details - (Not same as co-applicant)

Name: _____ Phone No: _____

7. Please ensure you provide Min.100 points Identification - at least ONE item from EACH section is required - Photo copy ALL & bring originals

Section 1:
 ____ (40) Drivers License
 ____ (40) Passport (Complete the following)
 Name at Birth: _____
 Place of Birth: _____
 Passport Country: _____

Section 2:
 ____ (30) Latest 3 Current Pay Slips OR
 Current Bank Statement OR
 Centre Link income Statement

Section 3:
 ____ (30) Previous tenancy reference ____ (10) Gas account
 ____ (20) Previous two rent receipts ____ (10) Pet rego papers
 ____ (20) Home owner MUST SUPPLY ____ (10) Birth certificate
 a recent rates notice ____ (10) Medicare card
 ____ (10) Motor vehicle registration
 ____ (10) Telephone account
 ____ (10) Electricity account
____-TOTAL POINTS

8. FREE Utilities Connections User Consent Form ReduceMyBills is the hassle-free connections service that takes the time and worry out of moving

ReduceMyBills  .com.au Ph: 1300 680 603

Declaration

By signing this application, I/we give consent to ReduceMyBills to make contact by phone, email or SMS for the purpose of arranging connections and disconnections of approved utility services. I/we authorise ReduceMyBills to supply collected information to other household service providers for the services including Cleaning, Removal, Insurance and Appliances.
 I/we authorise ReduceMyBills to contact us via these means even if the telephone numbers supplied are listed on the Do Not Call Register. I/we understand that ReduceMyBills may also send related emails promoting other services provided by ReduceMyBills and other selected third parties.
 I/we acknowledge that all information supplied in the application is true and correct to be best of my/our knowledge and that we have not falsely represented our identity in any manner.
 I/we understand that ReduceMyBills treat any personal information it collects, uses or discloses in accordance with the Privacy Act 1988.
 I/we authorise ReduceMyBills to supply collected information to nominated suppliers and/or potential suppliers for the connection and disconnection of nominated utilities or to assist with my obtaining other services including appliances, removalists, cleaners and insurance.

• Internet • Foxtel • Telephone • Electricity • Gas
 I/we understand that in the course of connecting utilities, ReduceMyBills may need to obtain an NMI (National Meter Identifier) for electrical points or MIRN (Meter Installation Registration Number) for Natural Gas connections. I/we authorise ReduceMyBills to collect these identifiers and consent to those numbers being supplied to utility providers.
 I/we acknowledge that whilst ReduceMyBills is a free service, I/we are solely responsible for any and all amounts payable in relation to deposits, connections/ disconnections or ongoing supply of the connected services and amounts payable for other services including appliance, removalists, cleaners and insurance.
 I/we acknowledge that ReduceMyBills, to the extent permitted by law, shall not be liable for any loss or damage (including consequential loss and loss of profits) to me/us as a result of the provision of any service. Nor shall ReduceMyBills be liable for any act or omission by any utility provider for any loss caused by failure to provide nominated services.
 I/we acknowledge that the nominated real estate entity along with ReduceMyBills may receive a benefit from suppliers for the provision of connections.
I/we declare that we have read and understand the above declaration and wish to be contacted by ReduceMyBills.

Signature: _____ Date: _____

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.
 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 my tenancy history;

I am aware that I may access my personal information by contacting -
 • NTD: 1300 563 826 • TRA: (02) 9363 9244 • TICA: 1902 220 346
 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) conduct an ID/background check with NTD for residential tenancies and/or a credit check for commercial tenancies with the National Tenancy Database (NTD)

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.

Printed Name Applicant 1:	
Signature Applicant 1:	Date:

Printed Name Applicant 2:	
Signature Applicant 2:	Date:

10. Payment Details

Property Rental Per Week	\$	
Rent in Advance (weeks)	\$	
Rental Bond (weeks rent)	\$	
Total Due	\$	

Cheque / Bank Cheque / EZIRENT