

<u>APPLICATION TO ENTER INTO RESIDENTIAL TENANCY AGREEMENT</u>

Identification Required:

100 points of ID is required and can be satisfied by providing one primary document and two secondary documents.

Primary:

- Passport (70 points),
- Birth Certificate (70 points)
- Citizenship Certificate (70 points)

Secondary:

- Copy of Credit Card (25 points),
- Utility Bill (25 points)
- Copy of Medicare Card (25 points)
- Copy of Australian Driver's Licence (40 points)

Proof of Income Required. Only One of the Below is Required.

- Last two payslips.
- Employment contract.
- One month's bank statement

Applicants must inspect the inside of the property prior to being approved.

All parties will be required to attend a sign-up appointment within 24-48 hours of acceptance if possible.

South Perth Office 19 Lyall Street South Perth, WA, 6151 PO Box 478, South Perth WA 6951 B 08 9269 6100 E southperth@rmaproperty.com.au	Bunbury Office 149 Victoria Street Bunbury WA 6230 PO Box 1794, Bunbury WA 6231 B 08 9792 7444 F 08 9792 4044 E bunbury@rmaproperty.com.au
Port Kennedy Office 23-24/397 Warnbro Sound Avenue Port Kennedy WA 6172 PO Box 7299, Secret Harbour WA 6173 B 08 9523 5800 F 08 9523 5811 E portkennedy@rmaproperty.com.au	Joondalup Office Unit 4/80 Grand Boulevard Joondalup WA 6027 B 08 9300 2283 E Joondalup@rmaproperty.com.au



APPLICANTS INFORMATION

TENANCY	DETAILS		
Property Add	dress:		
The period y	you require the tenancy for is mon	ths starting date	ending date
At a rent of .	per week		
Total numbe	er of persons to occupy the Premises	Adults Children	Ages
Pets -	Type of Pet Number	Breed	Age
	Type of Pet Number	Breed	Age
Do you inten	nd applying for a residential tenancy bond fror	n a State Government Departm	ent? Yes No
If yes bond a	amount \$ Depa	rtment	
Special Cond	nditions (If Required)		

Note: The lessor is not obliged to accept any of the Special Conditions.



APPLICANT 1

Name:			
	(Given Names)	(Surname)	
Present Address:			
Phone No Work:	Phone	No Home: Mobile:	
		Date of Birth: Australian Citizen: Yes	_
		State: Passport No:	
		Vehicle Type & Registration No:	
		Vollido Typo a Nogistiation No.	
		Smoker: Yes N	
	ENCES (Note: Not to be Frie		°Ш
	•		
a)	Name	Telephone	
b)		·	
	Name	Telephone	
Name of Current Les	sor or Managing Agent:	Phone No:	
Address:		Rent Paid:	
Reason For Leaving:		Rented From: To:	
Previous Address of	Applicant:		
Name of Previous Le	ssor or Managing Agent:	Phone No:	
Address:		Rent Paid:	
Reason For Leaving:		Rented From: To:	
OCCUPATION (Note	e: Your Employer may be con	acted to verify employment)	
Employer:		Period of Employment:	
Phone No:		Annual Salary:	
If less than 12 months	s, name and address of prev	ious employer	
	•	if self-employed a statement of income must be provide	
		f income from Centrelink must be provided.	
NEXT OF KIN (Note:	These people may be contact	ed to verify particulars)	
First Next of Kin:			
_	Name	Address Telephon	ne
Second Next of Kin: . Name	Name	Address Telephon	 ne



APPLICANT 2

Name:				
(Given Names)		(Surname)		
Present Address:				
Phone No Work:	Phone No Home:	Mobile:		
		Australian Citizen: Yes No		
		ssport No:		
		e & Registration No:		
		Smoker: Yes No		
PERSONAL REFERENCES (A	lote: Not to be Friends or Family)			
c)				
١	Name	Telephone		
,				
	Name	Telephone		
		Phone No:		
		Rent Paid:		
Reason For Leaving:		Rented From: To:		
Previous Address of Applicant:				
•		Phone No:		
		Rent Paid:		
Reason For Leaving:		Rented From: To:		
· ·	ployer may be contacted to verify emplo			
Employer:		Period of Employment:		
Phone No:		Annual Salary:		
·	nd address of previous employer			
Note: Please attach a copy of		statement of income must be provided.		
NEXT OF KIN (Note: These ped	ople may be contacted to verify particula	rs)		
First Next of Kin:				
Nam	ne Addre	ess Telephone		
Nam	e Addres	SS Telephone		



APPLICANT 3

Name:			
	(Given Names)	(Surr	name)
Present Address:			
Phone No Work:	Phone No Home:	Mobile:	
Email:	Date of Bi	irth: Australian	Citizen: Yes No
Drivers Licence No:	State:	Passport No:	
Other ID:	Veh	icle Type & Registration No:	
Anything Else to Suppo	rt Your Application:		
		Sm	noker: Yes No
PERSONAL REFEREN	ICES (Note: Not to be Friends or Family	<i>'</i>)	
a)			
	Name		Telephone
b)			
	Name		Telephone
Name of Current Lesso	r or Managing Agent:	Phone No:	
Address:		Rent Paid:	
Reason For Leaving:		Rented From:	To:
Previous Address of Ap	pplicant:		
Name of Previous Less	or or Managing Agent:	Phone No:	
Address:		Rent Paid:	
Reason For Leaving:		Rented From:	To:
OCCUPATION (Note:	Your Employer may be contacted to veri	fy employment)	
Employer:		Period of Employme	ent:
Phone No:		Annual Salary:	
If less than 12 months,	name and address of previous employ	er	
	yment:		
•	copy of last pay slip and if self-emp		
	Benefits, a statement of income fro	-	-
NEXT OF KIN (Note: Th	nese people may be contacted to verify p	particulars)	
First Next of Kin:			
	Name	Address	Telephone
	N		
Name	Name	Address	Telephone
			Initials:

The Property Management Experts

By signing this document you are making an application to enter into a Residential Tenancy Agreement in relation to the premises.

You declare that you are over 18 years of age, you are not bankrupt and that all of the information supplied in this Application is true and correct and is not misleading in anyway. Your application may or may not be successful.

Your Signature (First Person):	Date:
Your Signature (Second Person):	Date:
Your Signature (Third Person):	Date:

INFORMATION FOR TENANT

- Thank you for your application to rent. Please ensure that your application is fully completed to ensure prompt processing
- If your application is successful, prior to signing the lease we require the first two weeks rent and bond amount (equivalent to 4 weeks rent plus pet bond if applicable) to be paid by either Australian Money Order or Bank Cheque prior to signing your lease and keys being provided.
- Monies required to be paid in full prior to taking possession of the property.
- All tenants must sign the lease and pay the total monies owing prior to the keys being handed over.
- All applications received are subject to the landlord's approval.
- If you require a telephone line connected to the premises it is your responsibility to make enquiries with a telephone provider/company for this information. You will be responsible for making any telephone connections and/or line connections.
- The owner/agent makes no warranties that the previous occupants have or have not had a telephone connection during their occupation of the premises.
- If you are applying for a Bond from a State Government Department ie. Ministry of Housing Bond, our office policy is to receive all monies prior to moving any tenants into the property. This means you can either pay your monies by Bank Cheque, Australian Money Order or provide in writing confirmation of authority from the Government Department concerned confirming payment of the bond and rent from that department to Rental Management Australia. Alternatively you may be able to delay your lease commencement date until the agency is in receipt of full payment of the security bond, (subject to the owners approval).
- You acknowledge that you have inspected the Premises and you will accept possession of the Premises in the condition it was in as at the date of inspection.
- Please note that if your application is unsuccessful, the owner/agent is not obliged to explain why your application was not accepted.





PRIVACY DISCLOSURE STATEMENT OF RENTAL MANAGEMENT AUSTRALIA PTY LTD T/AS RENTAL MANAGEMENT AUSTRALIA

23-24/397 Warnbro Sound Avenue, Port Kennedy WA 6172	149 Victoria Street, Bunbury WA 6230
Phone: (08) 9523 5800	Phone: (08) 9792 7444
Fax: (08) 9523 5811	Fax: (08) 9792 4044
19 Lyall Street, South Perth, WA 6151	Unit4, 80 Grand Boulevard, Joondalup, WA 6027
Phone: (08) 9269 6100	Phone : (08) 9300 2283

Rental Management Australia Pty Ltd are bound by the Australian Privacy Principals. We collect personal information about you in this form to assess your application for a residential tenancy. We may need to collect information about you from your previous landlords/letting agents, current employer, and referees. We will also check whether any details of tenancy defaults by you are held on a tenancy default database. We use the databases National Tenancy Database and TICA Default Tenancy Control Pty Ltd. You can find out more information about this database from their website at www.tica.com.au. TICA can be contacted by phone on 1902220346 or by fax or by mail to PO Box 120, Concord NSW 2137 (stamped self-addressed envelope to be included). Your consent to us collecting this information is set out below.

We may disclose personal information about you to the owner of the property to which this lease agreement relates. We may disclose your details to service providers relevant to the tenancy relationship including gas, electricity, water, maintenance contractors and the landlord's insurers.

The tenant is invited to review a copy of the complete terms of the Agent's Privacy Policy enacted pursuant to the Privacy Act, 1988. Further details regarding the purposes for which the information is collected, the disclosures that are usually made of personal information collected by the Agent, the situations where the Agent is required to collect information by law, and any disclosure of information that may be made by the Agent overseas, can be obtained from the more detailed collection notice on the Agent's website.

You have the right to access personal information that we hold about you by contacting our privacy officer. If you do not complete this form or do not sign the consent below then your application for a residential tenancy may not be considered by the owner of the relevant property or, if considered, may be rejected.

Initials:			
-----------	--	--	--



Office use only

URGENT REQUEST FOR RENTAL REFERENCE

Agency: Ema	il /Fax:
Our Agency has received an application for tenancy. The applic Lessor or Lessor/s Agent and has authorised us to collect inform copy of the applicants signed Privacy consent is above.	
Please complete the details below and return the form to our Aglessor to finalise the processing of this application.	ency today, as time is critical to both the Applicant and
Tenants name:	
Property rented:	
Period of time rented through your agency//	to/
Rent amount paid per week \$	
Was the tenant listed as a lessee? Did you / your agency terminate the tenancy? During the tenancy, was the lessee ever in arrears? Did the tenant receive any Notice to Remedy's	YES / NO YES / NO YES / NO YES / NO
If Yes – Reason/s	
Were periodic inspections conducted during the tenancy? Was any damage noted during the inspections? Were pets kept on the premises without permission? Did the lessee leave the property clean and tidy? Was the bond refunded in full?	YES / NO YES / NO YES / NO YES / NO YES / NO
If No – Reason/s	YES / NO
Completed by: Positio	n:
Please return the completed form with a copy of the tenant ledg	
PRIVACY COI	NSENT .
I, the tenant acknowledge that I am over 18 years of age, I had Management Australia Pty Ltd Trading as Rental Management collect information about me from:	
My previous letting agents and or landlords and their insurers;	
My personal referees; and Any tenant default database, which authorise Rental Management Australia to disclose details aborapplication relates, to any tenancy default database to which Re	ut any defaults by me under the tenancy to which this
I also authorise Rental Management Australia to refer my deta transfer of telephone, gas, electricity, water, furniture etc.).	ls to any arranger of utilities (to arrange connection or
Tenant Signed:	. Date:
Tenant Signed:	. Date:
Tenant Signed:	. Date:
	Initials:



Your Porter

Phone: 1300 400 600 Fax: 1300 326 468

Page 9 of 9

website: www.yourporter.com.au email: sales@yourporter.com.au

YourPorter is a FREE service connecting utilities and other services.

					t business day connection.
Electricity	Gas	Telep	hone	Pay TV	Internet
Car Insurance	Life Insurance	Health	n Insurance		
Applicant Details					
Mr Ms Miss	Mrs Other]	Given Name/	's:	
Surname:			Date of Birth:		
Phone Number:			Mobile Number:		
Property Details					
Property Manager:					
New Property Address	S:				
Move in date:			Connection of	late:	
DECLARATION AND ACCEPTANCE: I/We consent to the disclosure of this application form (including any personal information contained in this form) to YourPorter Pty Ltd (ABN 36 252 576 050) for the purpose of allowing YourPorter and its service providers to contact me for the connection of services as offered by YourPorter. I/We acknowledge that if I/We do not provide my/our personal information, YourPorter will not be able to provide these services to me/us. YourPorter will ensure that my/our personal information is collected, used, held and disclosed in accordance with the requirements of the Privacy Act 1988 (Cth). I/We acknowledge that YourPorter may receive a benefit in relation to the connection of any of the services listed above. I/We consent to YourPorter contacting me by phone or SMS in relation to the connection of the services listed above. I/We acknowledge that this consent permits YourPorter to contact me even if the numbers listed on this application are listed on the Do Not Call Register. YourPorter will otherwise collect, hold, use and disclose personal information in accordance with their privacy policies, which are available at www.yourporter.com.au/general/privacy-policy/.YourPorter is a free service, but I/We acknowledge that standard connection fees may apply for services connected (in addition to the ongoing service fees). I/We acknowledge that neither YourPorter nor the Agent accept any responsibility for any delay in or failure to arrange or provide for any connection of a service or for any loss, damage, cost or expense in connection with such delay or failure. By signing this application, I/We understand YourPorter is a value add product and that I/We are under no					
obligation to use Yourl Your Signature (First					Date:
					Initials:
					เกเนตเร