



| | Application for Residential Tenancy (One application to be completed per person) | | | | | |
|-----------------------------------|--|--|--|--|--|--|
| | PART 1: RENTAL PROPERTY DETAILS | | | | | |
| ITEM 1: | AGENT DETAILS | | | | | |
| | AGENCY NAME: | | | | | |
| | BAILEUX PTY LTD | | | | | |
| ADDRESS: SHOP 4, 52 GORDON STREET | | | | | | |
| | | | | | | |
| | SUBURB: MACKAY STATE: QLD POSTCODE: 4740 | | | | | |
| | PHONE: MOBILE: FAX: EMAIL: 07 4829 4816 0400989161 admin@baileux.com.au | | | | | |
| | admin@Daneux.com.au | | | | | |
| ITEM 2: | ADDRESS: | | | | | |
| | | | | | | |
| | SUBURB: STATE: POSTCODE: | | | | | |
| | | | | | | |
| | Rent: \$ Rent period: Constraint Constraint < | | | | | |
| | 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? | | | | | |
| | Driver's Licence/passport number: State: | | | | | |
| | Number of vehicles: Registration number(s): | | | | | |
| ITEM 4: | DEPENDANTS | | | | | |
| | Do you have any dependants? Yes No | | | | | |
| | DEPENDANT FULL NAME(S): RELATIONSHIP TO APPLICANT: DEPENDANT DATE OF BIRTH: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| ITEM 5: | SMOKING | | | | | |
| TIEW 5. | Are you or any of the dependants living with you a smoker? Yes No | | | | | |
| 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

| ITEM 7: | APPLICANTS ADDRESS HISTORY | | | | | | |
|----------|--|----------|--|--|--|--|--|
| | CURRENT RESIDENTIAL ADDRESS: | | | | | | |
| | | | | | | | |
| | | DSTCODE: | | | | | |
| | PERIOD OF OCCUPANCY: TYPE OF OCCUPANCY: | | | | | | |
| | Rent Owner Other: → CURRENT AGENT/LESSOR (If renting): AGENT/LESSOR PHONE: | | | | | | |
| | | | | | | | |
| | CURRENT RENT REASON FOR LEAVING: | | | | | | |
| | Rent period: | | | | | | |
| | PREVIOUS RESIDENTIAL ADDRESS: | | | | | | |
| | | | | | | | |
| | | DSTCODE: | | | | | |
| | PERIOD OF OCCUPANCY: TYPE OF OCCUPANCY: | | | | | | |
| | PREVIOUS AGENT/LESSOR: AGENT/LESSOR PHONE: | | | | | | |
| | | | | | | | |
| | PREVIOUS RENT: REASON FOR LEAVING: | | | | | | |
| | Rent period: ← weekly / fortnightly / monthly | | | | | | |
| ITEM 8: | EMPLOYMENT DETAILS | | | | | | |
| | Are you employed? Yes No (if no, please provide details of previous employer, if any) | | | | | | |
| | Employment status: Full time Part time Casual Contract Self employed | | | | | | |
| | OCCUPATION: NET INCOME (per week) | | | | | | |
| | \$ | | | | | | |
| | DATE COMMENCED EMPLOYMENT (approx.) DATE TERMINATED EMPLOYMENT (if any): | | | | | | |
| | EMPLOYER/BUSINESS NAME: | PHONE: | | | | | |
| | | HONE. | | | | | |
| | ADDRESS: | | | | | | |
| | | | | | | | |
| | SUBURB: STATE: POSTCODE: | | | | | | |
| | IF SELF EMPLOYED, ACCOUNTANT'S NAME: | HONE: | | | | | |
| | | | | | | | |
| ITEM 9: | CENTRELINK PAYMENTS | | | | | | |
| | Are you receiving any regular Centrelink payments? Yes No | | | | | | |
| | DESCRIPTION OF PAYMENT(S): | | | | | | |
| | | | | | | | |
| | TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: | | | | | | |
| | \$ | | | | | | |
| ITEM 10: | STUDENT DETAILS | | | | | | |
| | Are you studying full time? | | | | | | |
| | NAME OF EDUCATION INSTITUTION YOU ARE CURRENTLY ATTENDING: STUDENT IDENTIFICATION NUMBER: | | | | | | |
| | | | | | | | |
| | Are you an overseas student? Yes No If yes, Visa expiry date: | | | | | | |
| | | | | | | | |

| ITEM 11: | PERSONAL REFERENCES | | | | | | |
|-----------------|---|--------------------------------------|-----------------|---------------------------|---------------|--|--|
| | Please do not list relatives, anothe | | | | | | |
| | REFEREE 1: | | | | RELATIONSHIP: | | |
| | | | | | _ | | |
| | ADDRESS: | | | | | | |
| | | | | | PHONE/MOBILE: | | |
| | SUBURB: | 9 | STATE: | POSTCODE: | | | |
| | REFEREE 2: | ` | | | RELATIONSHIP: | | |
| | | | | | _ | | |
| | ADDRESS: | | | | | | |
| | | | | | PHONE/MOBILE: | | |
| | SUBURB: | 9 | STATE: | POSTCODE: | | | |
| | | | | | | | |
| ITEM 12: | PERSONAL REPRESENTATIVE | | | | | | |
| | i.e. preferred person(s) to be conta | cted in the event of an emergen | cy. | | | | |
| | REPRESENTATIVE 1: | | | | RELATIONSHIP: | | |
| | | | | | _ | | |
| | ADDRESS: | | | | - | | |
| | | | | | PHONE/MOBILE: | | |
| | SUBURB: | | STATE: | POSTCODE: | _ | | |
| | REPRESENTATIVE 2: | | | | RELATIONSHIP: | | |
| | | | | | _ | | |
| | ADDRESS: | | | | - | | |
| | | | 1 | 1 | PHONE/MOBILE: | | |
| | SUBURB: | | STATE: | POSTCODE: | | | |
| | PART 3: SUPPORTING | DOCUMENTS | | | | | |
| ITEM 13: | | | | | | | |
| | You are required to meet a 100 po | int identification criterion upon su | ubmission of vo | our application. | | | |
| | The Agent/Lessor may photocopy | any item and retain as part of yo | ur application. | | | | |
| | Please tick the identifying docume | nts you have provided with your | application. | | | | |
| | IMPORTANT: At least one form of Photo Identification MUST be provided. | | | | | | |
| | 70 Points | | | | | | |
| | Passport | Full birth certificate | Ci | tizenship certificate | | | |
| | 40 Points | | | | | | |
| | | Ctudent Dhote ID | | anartment of Veterana A | faire aard | | |
| | Australian Driver's Licence | Student Photo ID | | epartment of Veterans A | | | |
| | Centrelink card | Proof of age card | S | 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 | Cr | redit card statement | | | |
| | Last FOUR rent receipts | Rent bond receipt | Pr | evious tenancy agreeme | ent | | |
| | | | <u> </u> | | | | |
| ITEM 14: | # 14: PROOF OF INCOME You are also required to supply the Agent/Lessor with proof of your income upon submission of your application. Employed: Last TWO pay slips. | | | | | | |
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| | | | | | | | |

Self employed:Bank statements, Group Certificate, Tax Return or Accountant's letter.Not employed:Centrelink statement.

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? | | |
| | | | |
| | | | |
| | | | |
| 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 No |
| 2. | Understand that you as the Agent/Lessor have collected this information for the purpose of 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 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 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 may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases. | Yes | No No |
| 5. | Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), the Standard Terms and any special terms before completing this application. | Yes | No |
| 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 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 No |
| 9. | Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 of the <i>Electronic Transactions (Queensland) Act 2001 (Qld)</i> and the <i>Electronic Transactions Act 1999 (Cth)</i> . | Yes | No |
| 10. | Declare that the above information is true & correct and that I have supplied it of my own free will. | Yes | No No |
| | Name of Applicant: | | |
| | Circulture: | 1 | |
| | Signature: Date: | | |