

PRE-APPLICATION INFORMATION

Ray White Gladstone
 35 Tank Street, Gladstone
 (07) 4972 3288
rentals.gladstone.gld@raywhite.com

APPLICATION PROCESS

PLEASE ENSURE THAT YOU HAVE READ THE APPLICATION FORM CAREFULLY

PLEASE ENSURE YOU PROVIDE AND ATTACH PHOTOCOPIES OF **ONE** DOCUMENT FROM **EACH** OF THE FOLLOWING COLUMNS

IDENTIFICATION				
A	B	C	D	E
<input type="checkbox"/> Drivers License <input type="checkbox"/> Passport <input type="checkbox"/> 18 + Card <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Medi-pass	<input type="checkbox"/> Medicare Card <input type="checkbox"/> Private Health Card <input type="checkbox"/> Centrelink/ Concession Card <input type="checkbox"/> Pension Card	<input type="checkbox"/> Current mobile/ home phone bill <input type="checkbox"/> Car Registration <input type="checkbox"/> Internet Bill <input type="checkbox"/> Bank Statement <input type="checkbox"/> Rates Bill	<input type="checkbox"/> Two recent pay slips <input type="checkbox"/> Letter of offer from employer <input type="checkbox"/> Current Centrelink statement <input type="checkbox"/> BAS statement (If self employed)	<input type="checkbox"/> Bank card <input type="checkbox"/> Credit card <input type="checkbox"/> Visa debit card

- Please be aware Bond Transfers are NOT an option.
- Incomplete Applications will not be processed.
- If you require assistance to complete the form, please ask, as we are here to help.

BEFORE SUBMITTING YOUR APPLICATION, HAVE YOU:

- Signed the Privacy Statement on page 4?
- Signed the Privacy Declaration on page 4?
- Signed the Previous Rental on page 5?
- Supplied the correct identification?

AGENCY PROCESS

As your Application is a high priority, we will endeavour to have an answer to you within 24 hours, but will advise you if it will be longer due to delays in reaching your contacts.

Information verification by our agency

To verify your Application information we contact Tenancy Databases eg TICA & NTD. If you have had a problem with a previous Tenancy, please discuss the circumstances with us. We also contact your Employer/HR Manager, current & previous Agent/Lessor and personal referees.

If Application is not accepted

If your Application is not accepted by the Lessor, it will be retained for 48 hours and then destroyed securely to comply with Privacy Legislation.

If Application is accepted

If your Application is accepted by the Lessor, you are required to pay an amount equivalent to two (2) weeks rent and/or the full Bond amount and sign the General Tenancy Agreement within **24 hours** of notification of acceptance.

Rent payment method options

Cheque or Money Order are accepted as rent payment methods at our office. Our Agency uses the services of Advantage Card (Internet transfer, Phone Payments, Direct Debit, BPay and Australia Post Bill Pay). **CASH IS NOT AN OPTION.**

OFFICE USE ONLY:

DATE RECEIVED:
TIME RECEIVED:

APPLICATION RECEIVED BY:

IDENTIFICATION
COPIED?

PROPERTY SCHEDULE

ADDRESS:

RENT PER WEEK: \$

SECURITY BOND: \$

LEASE COMMENCEMENT DATE: / /

TERM: MONTHS:

IS THIS APPLICATION SUBJECT TO YOU VIEWING THE PROPERTY? YES: NO:

APPLICANT 1

FULL NAME:

BIRTH DATE: / /

CURRENT ADDRESS:

PHONE:

EMAIL:

MOBILE:

RENT PAID: \$

PERIOD OCCUPANCY:

NAME OF AGENT/LESSOR:

PHONE:

PREVIOUS ADDRESS:

RENT PAID: \$

PERIOD OCCUPANCY:

NAME OF AGENT/LESSOR:

PHONE:

CONTACT PERSON FOR EMERGENCIES:

PHONE:

APPLICANT 2

FULL NAME:

BIRTH DATE: / /

CURRENT ADDRESS:

PHONE:

EMAIL:

MOBILE:

RENT PAID: \$

PERIOD OCCUPANCY:

NAME OF AGENT/LESSOR:

PHONE:

PREVIOUS ADDRESS:

RENT PAID: \$

PERIOD OCCUPANCY:

NAME OF AGENT/LESSOR:

PHONE:

CONTACT PERSON FOR EMERGENCIES:

PHONE:

PETS

DO YOU INTEND TO KEEP PETS AT THE PREMISES: YES NO

NUMBER OF PETS

TYPE OF PET/S

APPLICANT 1 INCOME DETAILS

CURRENT OCCUPATION:	
EMPLOYER:	CENTRELINK? <input type="checkbox"/>
ADDRESS:	PHONE:
WEEKLY INCOME (NETT): \$	PERIOD EMPLOYMENT:
PREVIOUS EMPLOYER:	
ADDRESS:	PHONE:
WEEKLY INCOME (NETT): \$	PERIOD EMPLOYMENT:

APPLICANT 2 INCOME DETAILS

CURRENT OCCUPATION:	
EMPLOYER:	CENTRELINK? <input type="checkbox"/>
ADDRESS:	PHONE:
WEEKLY INCOME (NETT): \$	PERIOD EMPLOYMENT:
PREVIOUS EMPLOYER:	
ADDRESS:	PHONE:
WEEKLY INCOME (NETT): \$	PERIOD EMPLOYMENT:

CONTACTS / REFERENCES

(1) NAME:	COMPANY:
RELATIONSHIP TO YOU:	PHONE:
(2) NAME:	COMPANY:
RELATIONSHIP TO YOU:	PHONE:
(3) NAME:	COMPANY:
RELATIONSHIP TO YOU:	PHONE:

DECLARATIONS

PLEASE ANSWER THE FOLLOWING QUESTIONS	APPLICANT 1	APPLICANT 2
Have you ever been evicted by any landlord or agent?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever been refused or declined another property?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you in debt to another landlord or agent?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Is there any reason that would affect your rent payments?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you a smoker?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

MISLEADING OR INCOMPLETE DETAILS MAY JEOPARDISE YOUR APPLICATION

DEPENDANTS

DO YOU HAVE ANY DEPENDANTS: YES NO

DEPENDANT FULL NAME/S	DATE OF BIRTH	RELATIONSHIP TO APPLICANT/S
1.		
2.		
3.		
4.		

ANY OTHER PERSON/S TO OCCUPY THE PREMISES

WILL THERE BE APPROVED OCCUPANTS AT THE PREMISES: YES NO

OCCUPANTS FULL NAME/S	DATE OF BIRTH	CONTACT NUMBER
1.		
2.		
3.		

EACH APPROVED OCCUPANT MUST SUPPLY ONE ID DOCUMENT FROM COLUMN A

DISCLAIMER

The following information is required to process this Application:

1. Name Identification - Passport, Drivers Licence , 18+ Card, Birth Certificate & Medi-Pass
2. Two References from Previous Lessors/Agents or Tenant Ledger/Receipts
3. Proof of Current Residential Address - Telephone or Electricity Account, rates, Bank Statement
4. Proof of Income - Pay slips, Centrelink Statement, Letter of Offer, Bas Statement
5. Supporting Identification - Medicare Card, Concession Card, Bank Card, Credit Card

UPON APPLICATION APPROVAL, PAYMENT OF TWO WEEKS RENT BY ADVANTAGE CARD, CHEQUE OR MONEY ORDER AND SIGNING OF THE GENERAL TENANCY AGREEMENT (LEASE) IS REQUIRED WITHIN 24 HOURS OF NOTIFICATION



RAY WHITE GLADSTONE RENTALS IS A CASH FREE OFFICE

TENANTS MAY PAY RENTAL PAYMENTS BY CHEQUE OR MONEY ORDER OR BY RAY WHITE ADVANTAGE CARD, WITH A CHOICE OF TELEPHONE, INTERNET OR DIRECT DEBIT PAYMENTS. FURTHER DETAILS ON ADVANATGE CARD ARE AVAILABLE OUR RECEPTION UPON REQUEST (CHARGES APPLY).

OFFICE USE ONLY

DATE PROCESSED: / /	NOTES	APPLICANT 1	APPLICANT 2
Personal References Checked?		YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
TICA Tenancy Database Checked?		YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Previous Lessor / Agent Checked?		YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Employment / Income Checked?		YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Notified or Approved by Lessor?		YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

IMPORTANT: PRIVACY DISCLOSURES & DECLARATIONS



PRIVACY STATEMENT

PRIVACY STATEMENT OF REAL ESTATE TRADING CO. PTY LTD ABN 46 521 080 705 TRADING AS RAY WHITE GLADSTONE:

We are an independently owned and operated business. We are bound by the National Privacy Principles. 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 or letting agents, your current employer and your referees. We will also check whether any details of tenancy defaults by you are held on a tenancy default database. 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 application relates. If this application is successful we may disclose your details to service providers relevant to the tenancy relationship including maintenance contractors and the landlord's insurers. We may also send personal information about you to the owners of any other properties at your request. You have the right to access personal information that we hold about you by contacting our privacy officer (see contact details above). 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.

PRIVACY CONSENT

I/We the Applicant acknowledge that I have read the Privacy Notice of Real Estate Trading Co. Pty Ltd trading as Ray White Gladstone.

I/We authorise Ray White Gladstone to collect information about me/us from:

(a) My/Our Previous letting agents and/or landlords;

(b) My/Our personal referees;

(c) Any Tenancy Default Database which may contain personal information about me. I/We also authorise Ray White Gladstone to disclose details about any defaults by me/us under the tenancy to which this application relates to any tenancy default database to which it subscribes including Tenancy Information Centre of Australia (TICA).

I/We authorise Ray White Gladstone to disclose the personal information it collects about me/us to the owner /lessor of the property even if the owner/lessor is resident outside Australia and to any third parties – valuers, contractors, salespeople, insurance companies, body corporates, other agents and tenancy default

I/We declare that
I/We:
Have
Have Not
Inspected the
property

APPLICANT 1: NAME _____ SIGNATURE: _____ DATE: _____

APPLICANT 2: NAME _____ SIGNATURE: _____ DATE: _____

DECLARATION

I/We the applicant/s hereby offer to rent the property from the owner/lessor under a General Tenancy Agreement (Lease) to be prepared by the Agent.

I/We acknowledge that I will be required to pay rental in advance and a rental bond, and that this New Tenancy Application is subject to the approval of the owner/lessor.

I/We declare that all information contained in this New Tenancy Application (inclusive of Pages 1 to 4 contained herein) is true and correct and given of my/our own free will.

I/We declare that am/are not bankrupt.

I/We acknowledge that Ray White Gladstone is a cash free office and that payment method options and choices outlined on Page 3 of this New Tenancy Application are acceptable to me/us.

APPLICANT 1: NAME _____ SIGNATURE: _____ DATE: _____

APPLICANT 2: NAME _____ SIGNATURE: _____ DATE: _____

IMPORTANT NOTICE: RAY WHITE GLADSTONE WILL NOT ACCEPT CASH PAYMENTS.

Ray White Gladstone is a Cash Free Office.

TO:

FAX No:

APPLICANTS DETAILS

APPLICANT NAME(S):

FORMER ADDRESS:

APPLICANT AUTHORISATION

I/We, hereby authorise Ray White Gladstone, as the letting agent, to conduct any inquiries and/or searches so as to verify my/our application.

SIGNED:

DATE: / /

WITNESS:

(Ray White Property Manager)

FORMER TENANCY VERIFICATION

YES

NO

Were the Applicant/s listed as Tenant/s?

Did your office terminate the tenancy?

During the tenancy was the Applicant/s ever in arrears?

If yes, how many NRB/NTL were issued?

NRB

NTL

Did the Applicant/s ever receive any other Notice to Remedy?

If yes, what were they issued for:

Were periodic inspections of the property acceptable?

Were pets kept on premises?

If yes, were there any damages to the property

Did the Applicant/s leave the property in good order?

Was the bond refunded in full to the Applicant/s?

Would you rent to the Applicant/s again?

Were the Applicant/s reasonable to deal with?

PERIOD OF OCCUPANCY:

START DATE:

END DATE:

RENT: \$

p/w

CAN YOU PLEASE FAX THROUGH A TENANT LEDGER ALONG WITH THIS REFERENCE

COMMENTS

Thank you for completing this New Tenancy Reference, your assistance is appreciated.

YOUR AGENCY DETAILS

PROPERTY MANAGER:

PHONE:

SIGNATURE:

DATE:

PLEASE FAX BACK TO RAY WHITE GLADSTONE (07) 4972 3393