

# LAKESIDE REAL ESTATE BELMONT

## Residential Tenancy Application

### Applicants Please Note

- We require 100 points of Identification to help us process your application.
- Please also provide proof of income such as pay slips, income statements.
- Applications will be processed when applicants have inspected the property.
- All applicants will be searched on TICA. Please sign the back page of application in order for this to occur.
- If approved for property we require 1 weeks holding deposit. Then bond (4 weeks rent) to be paid plus 1 additional week to be and remain 2 weeks in advance in your rent.
- Please feel free to contact our office to check on the progress of your application.

### Acceptable forms of Identification

- Drivers Licence
- Passport
- Proof of Age
- Health Care Card/Medicare Card
- Birth Certificate
- Tenancy Ledger
- Pay slips/Income Statement
- Bank Statement
- Gas, Electricity accounts

Please forward all applications and copies of supporting documents to:

[lakeside@people.net.au](mailto:lakeside@people.net.au) or 615 Pacific Hwy Belmont or Fax-49479009

# Lakeside Real Estate 615 Pacific Hwy Belmont 2280

Phone: 49454599

Fax: 49479009

Email: [lakeside@people.net.au](mailto:lakeside@people.net.au)

## ADDRESS OF PROPERTY APPLIED FOR:

## APPLICANT DETAILS

Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms	Date Of Birth:.....
Full Name:.....	
Current Address:.....	
Phone:.....	Work:.....
Email:.....	
Drivers Licence Number:.....	
Vehicle Registration:.....	
Occupation:.....	
Date Commenced:.....	
Employers Name:.....	
Contact:.....	
Employers Address:.....	
Net Income Per Week:.....	
Previous Employers Name:.....	Contact:.....
Previous Employers Address:.....	
Nearest Relative:.....	Contact:.....

Current Agency/Landord:.....

Phone:.....Fax:.....

Property Manager:.....

Date Of Commencement:.....Rent Paid:.....

Reason For Leaving:.....

Prior Landlord/Agent:.....

Phone:.....Rent Paid:.....

Prior Address:.....

Period Of Lease:.....

Reason For Leaving:.....

Was Bond refunded in full: Yes No If no why not:.....

Has your Tenancy ever been Terminated:  Yes  No

If yes please provide details:.....

Number of people to occupy premises:.....

Adults:..... Children:..... Ages Of Children:.....

Pets:  Yes  No Type/Breed:.....

Emergency Contact:..... Phone:.....

Relationship To You:.....

Personal Referee-Name:..... Phone.....

Relationship To You:.....

**DISCLAIMER/AUTHORITY**

I the said applicant, do solemnly and sincerely declare that the information contained in this application is true and correct. All information was given of my own free will. I further authorise the letting agent to contact or conduct any enquiries and or searches with regard to the information and references supplied in this application.

I, the said applicant do solemnly and sincerely declare:

- I understand and agree that the rent is to be paid every week and must be at least one week in advance at all times.
- That the rental bond on the property will be \$.....
- That this amount will be lodged with the Rental Bond Board
- I have been informed and agree that, should this application not be accepted the agent is not legally required or obliged to disclose why or supply any reason for rejection of this application.
- I require the property from:
- I require the property for a period of:
  
- **BANKRUPTCY**: I am not a bankrupt/undischarged bankrupt and affirm all information provided is true and correct.
  
- **ELECTRICITY/WATER**: Tenants are responsible for their own electricity, water, gas and phone. If water usage is not included in rent this will be forwarded onto the tenant and to be paid to the agent.
  
- **HOLDING DEPOSIT**: If accepted I will pay a holding deposit of 1 weeks rent immediately by cash, bank cheque or deposit into agents Trust Account to confirm my intention to lease this property. If I do not proceed monies paid will be forfeited.

**PRIVACY ACT ACKNOWLEDGEMENT**

In accordance with Section 18n(1) (b) of the Privacy Act I authorize you to give information to and obtain information information from all credit providers and references named in this application. I understand this can include information about my credit worthiness, credit standing, credit history or credit capacity. I understand this information may be used to assess my application.

APPLICANT SIGNATURE:..... DATE:.....

# OFFICE USE ONLY

APPLICATION ACCEPTED / REJECTED

100 POINTS IDENTIFICATION ACHIEVED  YES  NO

TICA CLEAR  YES  NO

REFERENCE CHECKED  YES  NO

EMPLOYMENT CONFIRMED  YES  NO

LEASE COMMENCEMENT DATE.....

PERIOD OF LEASE.....

RENT \$.....

BOND \$.....

TOTAL \$.....

LESS DEPOSIT \$.....

OWING \$.....