TENANCY APPLICATION

AGENCY NAME

Cartwright Property Group

ADDRESS

165 Long Street East, Graceville QLD 4075

PHONE

07 3373 5800

EMAIL

info@cartwrightpg.com.au



Please read and sign before submitting your application

Our agency welcomes your Application and any queries you may have about the Property, Tenancy or process. The following information will assist you to complete the Tenancy Application so it can be processed promptly.

One Application form is to be completed <u>per person</u> over the age of 18 years old and <u>must be submitted with legible copies</u> of 100 points of Identification. (refer to Supporting Document Checklist page 3 of 4, of the Tenancy Application attached.)

If applicant's parent/s are to act as guarantor/s, they must submit a tenancy application and provide 100 points of ID also.

Please note Cartwright Property Group does not offer photocopying services for the photocopying of identification etc.

Applications that are incomplete &/or unsigned will not be accepted

Policies of Cartwright Property Group Rentals

Tenancy Check- Upon authorisation, your application will be checked against a national tenancy database for information. If we discover personal information about you on a tenancy database during the application process, we will advise you in writing within 7 days of using the database. If you have ever had a problem with a previous tenancy, it is imperative that you advise us so that we can discuss it with you.

If Application accepted - I understand that if approved within 24 hours of being notified, all approved applicants are to sign the General Tenancy Agreement and pay the first 2 weeks rent and bond (equivalent to 4 weeks rent). I am then bound to the Terms of the Agreement and the Property will cease to be available for rent.

If Application not accepted - Applicant will be notified by the real estate agency. Our office will retain your application form for only one month after lodgement. At this point unless otherwise directed, it will be shredded as per the Privacy Act.

Condition Reports & **Inspections** - Our company conducts photo Condition Reports & Routine Inspection Reports, taking photographic images of the outside and internal areas of the property during the term of the Tenancy Agreement.

Rental payment method - Rent must be paid IN ADVANCE at all times. Our first preferred method of payment is electronically through DEFT Payment System or BPAY using specific reference number (please ask Property Management for this). Our office does not accept cash, money order, bank cheque or personal cheques. Only In office payments method we accept is eftpos. Please check daily limits. Please note AMEX cards are not accepted due to the banks processing procedure, it can take up to 3 business days to show into our trust account. You must ensure rent is paid before it is due including any possible banking delays. Dishonoured payments will incur an estimated charge of \$55.00 inc GST.

Privacy Consent - I authorise Cartwright Property Group to collect information about me from:

- My previous letting Agents and/or Lessors
- · My personal referees, employers and all other references on this application
- Tenancy Databases to which Cartwright Property Group subscribes.

tradespeople (to attend to work required at this Property), salespeople (primary and secondary Agents), valuers, the Lessor, other Agents, database operators, other Property Managers, Body Corporate, Insurance companies, Financial services, Government agencies if required in the future, and to Authorties as required by law.

Electronic Transmisson — I give consent to receive any documenation relevant to the Tenancy by email/fax and the method of receiving advice or notification by SMS is accepted.

Was the Property in a satisfactory condition when you inspected? _______ If not, list items:

I have read, understood and agree with the above policies and wish to submit an application for a property through Cartwright Property Group.

Name: _______

Date:

Signature:_____

I authorise Cartwright Property Group to refer my name and contact details to an arranger or service provider including





Application for Residential Tenancy

	(One application	on to be completed	per person)								
	PART 1:	RENTAL PR	OPERT	Y DETAILS							
ITEM 1:	AGENT DETAILS										
	AGENCY NAME:										
	Cartwright P	roperty Group P	ty Ltd								
	ADDRESS: 16	55 Long Street E									
	-	RACEVILLE					STAT	E: QLD	POSTCODE: 4075	5	
	PHONE:	MOBILE;		FAX:	EMA						
-	07 3373 5800		07 3278 6237		info	@cart\	vrightpg.com.au			_	
ITEM 2:	ADDRESS:	ETAILS									
	_						Date you insp			_	
	SUBURB:								POSTCODE:		
	Rent:	·	Rent peri	od:	← we	ekly / f	ortnightly / monthly	Bono	: \$		
	Tenancy Term	n:	_ 🔲 F	ixed term agreem	ent	[Periodic agree	ment			
	Starting on:				Ending on	E:					
	PART 2: A	APPLICANT	DETAIL	S							
ITEM 3:	CONTACT DET	AILS									
	FULL NAME:								DATE O	F BIRTH:	
	Have you been known by any other name(s)?										
	If Yes, what of	her name(s) have	you been k	nown by?							
	WORK PHONE:	MOBILE:		HOME PHONE:	EMAI	L:					
	Driver's Licenc	e/passport numb	er:			5	State:				
	Number of veh	icles:		F	Registration	numbe	er(s):				
ITEM 4:	DEPENDANTS										
	Do you have a	ny dependants?	Yes	No 🗌 No							
	DEPENDANT FU	JLL NAME(S):			F	RELATIO	ONSHIP TO APPLICA	NT:	DEPENDANT	DATE OF BIRTH:	
									_		
ITEM 5:	SMOKING										
		of the dependan	e livina with	Vou a smoker?	☐ Ye		No				
ITEM 6:	PETS	or the appendix	wang was	you a smaker:	□ ''e	3 L					
TTEMT 0.		to keep pets at th	e property?	Yes	□ No	•	Number of pets:				
	Type of Pet/s:			_	Are work	note re	egistered with a cour	ncil2	Voc		
		state which counc	٠. ٠	-Fill out Pet				iulis [_	Yes No		
	100, picase s	ALCO WINGII COURT	ю.	-Fill Out F61		anaci	icu				

ITEM 7:	APPLICANTS ADDRESS HISTORY								
	CURRENT RESIDENTIAL ADDRESS:								
	SUBURB:	7/75 05 050			STATE:	POSTCODE:			
	PERIOD OF OCCUPANCY:	TYPE OF OCCU							
	CURRENT AGENT/LESSOR (if renting):	Rent	Owner		Other: → AGENT/LESSOR PHONE:				
	CURRENT RENT Rent period:	← weekly / fortnightly / monthly			REASON FOR LEAVING:				
	PREVIOUS RESIDENTIAL ADDRESS:								
	SUBURB:				STATE:	POSTCODE:			
	PERIOD OF OCCUPANCY:	TYPE OF OCCU	-						
	PREVIOUS AGENT/LESSOR:	Rent	Owner		Other: → AGENT/LESSOR PHONE:				
	PREVIOUS RENT: \$ Rent period:	← weekly / fortnightly / monthly			REASON FOR LEAVING:				
EM 8:									
LM Q.	Are you ampleted?	□ No Of wa							
	Are you employed? Yes No (if no, please provide details of previous employer, if any)								
	Employment status: Full time	Part time	Casual		Contract Self employe	ed			
	OCCUPATION:				NET INCOME (per week)				
	DATE COMMENCED EMPLOYMENT (approx.) DATE TERMINATED EMPLOYMENT (if any):								
	EMPLOYER/BUSINESS NAME:					PHONE:			
	ADDRESS:					_			
	SUBURB:				STATE:POSTCODE:				
	IF SELF EMPLOYED, ACCOUNTANT'S NAME:								
EM 9:	CENTRELINK PAYMENTS								
	Are you receiving any regular Centrelink payments?								
	DESCRIPTION OF PAYMENT(S):								
	TOTAL INCOME (PER WEEK):	DATE PAYMENT	TS COMMENCED:						
TEM 10:	STUDENT DETAILS								
	Are you studying full time?								
		LI ADE CUDDENTO V	ATTENDING:	CTUDEN					
	NAME OF EDUCATION INSTITUTION YOU	U ARE CURRENTLY	ATTENDING.	STUDEN	TIDENTIFICATION NUMBER:				

ITEM 11:	PERSONAL REF	ERENCES							
	Please do not lis REFEREE 1:	st relatives, anothe	RELATIONSHIP:						
	ADDRESS:					PHONE/MOBILE:			
	SUBURB:			STATE:	POSTCODE:	FINAL MODILE.			
	REFEREE 2:					RELATIONSHIP:			
	ADDRESS:								
	SUBURB:			STATE:	POSTCODE;	PHONE/MOBILE:			
ITEM 12:	PERSONAL REP								
11 EM 12.		rson(s) to be conta							
	REPRESENTATIV		RELATIONSHIP:						
	ADDRESS:								
	SUBURB:			STATE:	POSTCODE:	PHONE/MOBILE:			
	REPRESENTATIV	/E 2:			_ POSICODE:	RELATIONSHIP:			
	ADDRESS:								
	SUBURB:					PHONE/MOBILE:			
	DADT 0: 01					-			
		JPPORTING	DOCUMENTS						
TTEM 13:	YOU are required to meet a 100 point identification criterion upon submission of your application								
	You are required to meet a 100 point identification criterion upon submission of your application. The Agent/Lessor may photocopy any item and retain as part of your application.								
	Please tick the identifying documents 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								
	Australian D	river's Licence	Student Photo ID	De	partment of Veterans Aff	airs card			
	Centrelink ca	ard	Proof of age card	St.	ate/Federal Government	Photo ID			
	25 Points								
	Medicare car	rd	Council rates notice	□ мо	otor vehicle registration				
	Telephone bill		Electricity bill	=	s bill				
	Tenancy History Ledger		Bank statement	Cr	edit card statement				
	Last FOUR rent receipts Rent bond receipt Pre				evious tenancy agreemer	t			
ITEM 14:	PROOF OF INCOM	Æ							
	You are also requ	uired to supply the	Agent/Lessor with proof of y	our income upon :	submission of your applic	ation.			
	Employed:	Last TWO pay sl	ips.						
	Self employed:		, Group Certificate, Tax Ret	um or Accountant	s letter.				
	Not employed:	Centrelink staten	nent.						

PART 4: DECLARATION

PLEASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE or FALSE

	I, th	e Applicant		
1.	Hav	re never been evicted by an Agent/Lessor	☐ True	False
2.	Hav	e no known reasons that would affect my ability to pay rent	True	False
3.	Was	s refunded the rental bond for my last address in full (if applicable)	True	False
	If fa	lse, please advise what deductions were made from your bond?		
4,	Hav	re no outstanding debt to another Agent/Lessor?	True	☐ False
	If fa	lse, why are you in debt to your past Agent/Lessor?		
The	Agen A (Te	5: TENANCY DATABASES cy may use the following tenancy databases to check the rental history of the Applicant/s: enancy Information Centre of Australia) 1902 220 346 or P.O. Box 120 Concord NSW MIS Protect & Collect 1300 883 916 or P.O. BOX 553 WYNNUM QLD 4178	2137	
PA	RT (6: ACKNOWLEDGEMENT		
PLE	ASE	ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES or NO		
		e Applicant		
1.	Acki polit	nowledge that my personal contents insurance is not covered under any Lessor insurance cyls and understand that it is my responsibility to insure my own personal belongings.	Yes	☐ No
2.	dete	lerstand that you as the Agent/Lessor have collected this information for the purpose of ermining whether I am a suitable tenant for the property - in particular to check my identification, ability to care for the property, my character and my creditworthiness.	Yes	☐ 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.	Ack reas	nowledge and accept that if this application is denied, the Agent is not legally obliged to provide cons as to why.	Yes	☐ No
4.	tena may	sent and understand that should my tenancy be accepted and upon commencement of the uncy agreement, there may be cause for the Agent/Lessor to pass my details onto others which include (but is not limited to) insurance companies, body corporates, contractors, other real te agents, salespeople and tenancy default databases.	Yes	☐ No
5.	Acki the	nowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), Standard Terms and any special terms before completing this application.	Yes	☐ No
6.	Ack	nowledge that I have received or have available the Information Statement (Form 17a), y corporate by-laws (if applicable) before completing this application.	Yes	☐ No
7.	Ack	nowledge that I have signed the agency's Privacy Notice and Consent.	Yes	☐ No
8.	Ack	nowledge that the Lessor and Applicant (tenant) are bound by this agreement immediately upon munication of either the lessor or agent's acceptance of the application.	Yes	☐ No
9.	of th	sent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 the Electronic Transactions (Queensland) Act 2001 (Qld) and the Electronic Transactions Act 19 (Cth).	Yes	☐ No
10.	Dec	lare that the above Information is true & correct and that I have supplied it of my own free will.	Yes	☐ No
	Nan	ne of Applicant:		
	Sign	nature: Date:		

INITIALS

PET APPLICATION AND AGREEMENT

PROPERTY ADDRESS

TENANT NAME					
RESIDENTIAL Use this form only for Proper	ties where the Lessor has indicated that pet/s may be a	ccepted. If unsure please contact our Agency			
prior to completing this applie					
PET DETAILS					
If more than 2 pets, print and	complete a separate Pet Agreement form.				
ITEM	PET 1	PET 2			
TYPE OF PET/S					
BREED					
NAME/S					
AGE					
DESEXED	YES / NO	YES / NO			
COUNCIL REG #					
DESCRIPTION					
COLOUR					
PHOTO PROVIDED	YES (copy for file) / NO	YES (copy for file) / NO			
EMERGENCY PET CARER					
The Tenant provides the follow	ving information for use in the case of an emergency.				
Name					
Address					
Phone Number	Work Number	Mobile Number			
VETERINARIAN					
The Tenant provides the following information for use in the case of an emergency.					
Name					
Address	The state of the s				

TERMS AND CONDITIONS

The Tenant acknowledges and agrees to the following terms:

1. The Lessor has agreed to permit pet/s at the Premises as specified in the General Tenancy Agreement and this Pet Agreement.

Fax Number

2. Any pet/s other than the approved pet/s specified in the General Tenancy Agreement and this Pet Agreement must first be requested by the Tenant in writing via a separate Pet Application giving full details and then be approved in writing by the Lessor

Phone Number

After Hours Number

PRIOR to the pet/s being allowed onto the Premises. Pet approval may be subject to specific criteria and must be complied with. Approval is NOT guaranteed.

- 3. The Tenant shall be liable for any damage or injury whatsoever caused by the pet/s on the Property, whether they are the Tenant's pets or their guests pets and regardless of their approval status.
- 4. The Tenant accepts full responsibility and indemnifies the Lessor for any claims by or injuries to third parties or their Property caused by, or as result of actions by their pet/s or their guests pet/s, and regardless of their approval status.
- 5. The Tenant agrees to arrange for Flea Fumigation at the end of the Tenancy or at a time during the Tenancy as required or requested by the Lessor's Agent to be carried out by a Company complying with Australian Standards.
- 6. The pet/s are to be outside at all times, unless specified otherwise in the General Tenancy Agreement or this Pet Agreement.

 Guide dogs are an exception.
- 7. If the pet is a dog, the Tenant agrees to restrain or remove the dog from the premises for the duration of inspections arranged by the Agent with the required notice given.
- 8. By signing below you are only asking for approval of the above-mentioned pet/s to be accepted at the Property for which you are applying.
- 9. If approved, you are required to, at the time of signing the General Tenancy Agreement and associated paperwork, sign the Tenant Agreement section.

ACKNOWLEDGENIENT BY APPLICANT						
Applicant Name						
Signature	Date					
Applicant Name						
Signature	Date					
APPLICATION RESULT	The second secon					
☐ Application for Pet/s – DECLINED						
☐ Application for Pet/s - APPROVED						
The above mentioned pet/s is/are approved by the Lessor of the Property stated in this Agreement. This Agreement now forms part of the General Tenancy Agreement which includes additional terms related to the pet/s and the Tenant are now bound by the Agreement set out in the Application above as well as the General Tenancy Agreement.						
AUTHORISATION ON BEHALF OF LESSOR / AGENT						
Agency Name						
Signature	Date					
TENANT AGREEMENT						
To be signed only if pet/s are approved.						
Tenant Name						
Signature	Date					
Tenant Name						
Signature	Date					

ACURIONAL EDICERSENT DV ADDLICANT