

Application to Lease Residential Premises

Thank you for choosing to fill in your application for rent. Please ensure that your application is fully completed to ensure prompt processing. **We guarantee processing of an application within 48 hours, unless a public holiday or during the closing periods of General Real Estate Agencies.**

Please note that all applications received are subject to the landlord's approval.
Regardless, New Edge Real Estate will call you to advise.

General Information

All persons over the age of 18 must provide ID and Income Support Documents and fill in their details as per an applicant.

If you require a telephone line connected to the premises it is your responsibility to make enquiries with a telephone provider 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.

Identification & Income

Please provide the following

1. Photographic ID for each applicant over the age of 18, Passport, Driver's License
2. Another form of ID for example, Medicare Card, Concession Card, Bank Card
3. Copy of all Visas where an Australian Passport is not held
4. If employed, the 4 most recent pay slips
5. If unemployed, proof of income from Centrelink or bank statements
6. If self-employed, last Tax Return & Business Registration
7. Document to provide proof of current address, e.g. Utilities bill, phone/internet account

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



PRIVACY DISCLOSURE STATEMENT OF SCHIONA SWART T/AS NEW EDGE REAL ESTATE

New Edge Real Estate is bound by the Australian Privacy Act. We collect personal information about you in this form to assess your application for a residential tenancy. We will be collecting information from your current and previous landlord/agents, current employment and references. We will also conduct a Tenancy Database Check and Credit control check as part of the process of this application. We use the Databases National Tenancy Database and TICA (Tenancy Default Control Pty Ltd). We will disclose all information to you, if you have been listed on any of these databases.

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

You have the right to access personal information that we hold about you by contacting our privacy officer or the contact details on our website.

If you do not complete this form or do not sign the consent below, then your application will be unable to be processed.

Privacy Consent

If you do not complete this form or do not sign the consent below, then your application will be unable to be processed.

I/We, the Applicant/s, acknowledge that I/We have read the Privacy Disclosure Statement above and hereby authorize New Edge Real Estate and their Agent to collect information about me from:

1. My current and previous landlord/agent and employment
2. My references
3. Tenancy Database Check, for example NTD and/or TICA and where necessary Credit Control such as Barclays.
4. Provide personal information collected about me to the owner of the property even if the owner is a resident outside Australia
5. Provide personal information about me to any third parties, such as valuers, contractors, sales people, insurance companies, body corporate, tenancy default databases to which reasonable necessary to disclose in relation to the tenancy agreement.

Names:

Signatures:

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Tenancy Information

1. I/We wish to apply for the property at _____
2. You require the tenancy for a period of _____ months Starting from _____ Ending date _____
3. At a rent of \$ _____
4. Total number of persons to occupy the Premises Adults: _____ Children: _____ Ages: _____
5. Pets to be considered: Total amount of pets: _____
Type of Pet _____ Breed _____ Age _____
Type of Pet _____ Breed _____ Age _____
Type of Pet _____ Breed _____ Age _____
6. Do you intent applying for a residential tenancy bond from a State Government Department? YES/NO
If Yes: \$ _____ Branch _____
7. Any special conditions requested by you: _____

Conditions:

1. You declare that You are not bankrupt and that all the information supplied in this Application is true and correct and is not misleading in anyway.
2. You acknowledge that having inspected the Premises, you will accept possession of the Premises in the condition it was in as at the date of inspection.
3. By signing this application, you are making an application to lease the Premises.

Applicant 1

Applicant 1 Information			
Full Name (including middle names):			
Date of birth:	Phone:	Mobile:	
Email:			
Place of Birth:	Family Name at Birth:	Australian Citizen: YES / NO	
Driver's License #	Issue State:	License Expiry:	
Number of Vehicles:			
Smoker: YES / NO			
Rental/Ownership Information			
Current address:			
City:	State:	Postcode:	
Own Rent (Please circle)	Weekly payment or rent:	How long?	
Name of Agent rent paid to:			Tel:
Reason for leaving:			
Previous address:			
City:	State:	ZIP Code:	
Owned Rented (Please circle)	Weekly payment or rent:	How long?	
Name of Agent rent paid to:			Tel:
Reason for leaving:			
Employment Information			
Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	
IF LESS THAN 12 MONTHS:	Previous Employer:		
Emergency Contact			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			
References			
Name:	Relationship:	Phone:	
By signing this document, you are making an application to enter into a Residential Tenancies Agreement in relation to the Premises. Your Application may or may not be successful.			
Signature of applicant:			Date:

Applicant 2

Applicant 1 Information			
Full Name (including middle names):			
Date of birth:	Phone:	Mobile:	
Email:			
Place of Birth:	Family Name at Birth:	Australian Citizen: YES / NO	
Driver's License #	Issue State:	License Expiry:	
Number of Vehicles:			
Smoker: YES / NO			
Rental/Ownership Information			
Current address:			
City:	State:	Postcode:	
Own Rent (Please circle)	Weekly payment or rent:	How long?	
Name of Agent rent paid to:			Tel:
Reason for leaving:			
Previous address:			
City:	State:	ZIP Code:	
Owned Rented (Please circle)	Weekly payment or rent:	How long?	
Name of Agent rent paid to:			Tel:
Reason for leaving:			
Employment Information			
Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	
IF LESS THAN 12 MONTHS:	Previous Employer:		
Emergency Contact			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			
References			
Name:	Relationship:	Phone:	
By signing this document, you are making an application to enter into a Residential Tenancies Agreement in relation to the Premises. Your Application may or may not be successful.			
Signature of applicant:			Date:

Applicant 3

Applicant 1 Information			
Full Name (including middle names):			
Date of birth:	Phone:	Mobile:	
Email:			
Place of Birth:	Family Name at Birth:	Australian Citizen: YES / NO	
Driver's License #	Issue State:	License Expiry:	
Number of Vehicles:			
Smoker: YES / NO			
Rental/Ownership Information			
Current address:			
City:	State:	Postcode:	
Own Rent (Please circle)	Weekly payment or rent:	How long?	
Name of Agent rent paid to:			Tel:
Reason for leaving:			
Previous address:			
City:	State:	ZIP Code:	
Owned Rented (Please circle)	Weekly payment or rent:	How long?	
Name of Agent rent paid to:			Tel:
Reason for leaving:			
Employment Information			
Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	
IF LESS THAN 12 MONTHS:	Previous Employer:		
Emergency Contact			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			
References			
Name:	Relationship:	Phone:	
By signing this document, you are making an application to enter into a Residential Tenancies Agreement in relation to the Premises. Your Application may or may not be successful.			
Signature of applicant:			Date:

Applicant 4

Applicant 1 Information			
Full Name (including middle names):			
Date of birth:	Phone:	Mobile:	
Email:			
Place of Birth:	Family Name at Birth:	Australian Citizen: YES / NO	
Driver's License #	Issue State:	License Expiry:	
Number of Vehicles:			
Smoker: YES / NO			
Rental/Ownership Information			
Current address:			
City:	State:	Postcode:	
Own Rent (Please circle)	Weekly payment or rent:	How long?	
Name of Agent rent paid to:			Tel:
Reason for leaving:			
Previous address:			
City:	State:	ZIP Code:	
Owned Rented (Please circle)	Weekly payment or rent:	How long?	
Name of Agent rent paid to:			Tel:
Reason for leaving:			
Employment Information			
Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	
IF LESS THAN 12 MONTHS:	Previous Employer:		
Emergency Contact			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			
References			
Name:	Relationship:	Phone:	
By signing this document, you are making an application to enter into a Residential Tenancies Agreement in relation to the Premises. Your Application may or may not be successful.			
Signature of applicant:			Date:



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Extra Comments:

THANK YOU!
We will be in touch real soon.