

Tenancy Application

Lease Details

Property Address	Ideal start date	Rent amount *
<input type="text"/>	<input type="text"/>	<input type="text"/>
Ideal length of lease *		Have you inspected the property? *
<input type="checkbox"/> 6 months <input type="checkbox"/> 12 months <input type="checkbox"/> 18 months <input type="checkbox"/> 24 months		<input type="checkbox"/> Yes <input type="checkbox"/> No

Personal Details

Personal Information

First name *	Last name *	Mobile phone number	Email *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender *		Marital status *	
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		<input type="checkbox"/> Unmarried <input type="checkbox"/> Engaged <input type="checkbox"/> Married <input type="checkbox"/> Divorced	
		<input type="checkbox"/> Widowed	
Date of birth *	Age *		
<input type="text"/>	<input type="text"/>		
Smoking habits *			
<input type="checkbox"/> Non-smoker <input type="checkbox"/> Occasional <input type="checkbox"/> Frequent			

Emergency Contact

Full name *	Relationship *	Phone number *
<input type="text"/>	<input type="text"/>	<input type="text"/>

Personal Reference

First name *	Last name *	Relationship *	Phone number *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email *			
<input type="text"/>			

Rental History

How many places have you lived in the last 2 years? *

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4+

Address 1

Street number	Street name	Suburb	State
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Postcode	Move in date	Move out date	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Owned or rented			
<input type="checkbox"/> Unspecified <input type="checkbox"/> Owned <input type="checkbox"/> Rented			
Weekly rent amount			
<input type="text"/>			

Property Manager 1

Agency name

Contact name

Email

Phone number

Address 2

Street number

Street name

Suburb

State

Postcode

Move in date

Move out date

Owned or rented

☐ Unspecified

☐ Owned

☐ Rented

Weekly rent amount

Property Manager 2

Agency name

Contact name

Email

Phone number

Address 3

Street number

Street name *

Suburb

State

Postcode

Owned or Rented *

☐ Owned

☐ Rented

Weekly Rent Amount *

Property Manager 3

Agency Name

Contact name

Email

Phone number

Address 4

Street number *

Street name *

Suburb *

State *

Postcode *

Move in date *

Move out date *

Owned or rented *

☐ Owned

☐ Rented

Weekly rent amount *

Property Manager 4

Agency name *

Contact name *

Email *

Phone number *

Occupants

Co-Occupants

How many co-occupants will there be? *

☐ 0

☐ 1

☐ 2

☐ 3

☐ 4

☐ 5

☐ 6+

Occupant 1

First Name *

Last name *

Email *

Mobile phone *

Relationship *

Occupant 2

First name *

Last name *

Email *

Mobile phone *

Relationship *

Occupant 3

First name *

Last name *

Email *

Mobile phone *

Relationship *

Occupant 4

First name *

Last name *

Email *

Mobile phone *

Relationship *

Occupant 5

First name *

Last name *

Email *

Mobile phone *

Relationship *

Occupant 6

First name *

Last name *

Email *

Mobile phone *

Relationship *

Dependants

How many dependants? *

☐ 0

☐ 1

☐ 2

☐ 3

☐ 4+

Dependant 1

First name *

Last name *

Relationship *

Dependant 2

First name *

Last name *

Relationship *

Dependant 3

First name *

Last name *

Relationship *

Dependant 4

First name *

Last name *

Relationship *

Pets

How many pets? *

☐ 0

☐ 1

☐ 2

☐ 3

☐ 4+

Pet 1

Name *	Type *	Breed *
<input type="text"/>	<input type="text"/>	<input type="text"/>

Pet 2

Name *	Type *	Breed *
<input type="text"/>	<input type="text"/>	<input type="text"/>

Pet 3

Name *	Type *	Breed *
<input type="text"/>	<input type="text"/>	<input type="text"/>

Pet 4

Name *	Type *	Breed *
<input type="text"/>	<input type="text"/>	<input type="text"/>

Income

Are you currently receiving any government assistance (e.g. Centrelink) *

☐ Yes

☐ No

Type	Amount per week
<input type="text"/>	<input type="text"/>

Employment

How many places have you worked in the last 2 years? *

☐ 0

☐ 1

☐ 2

☐ 3+

Workplace 1

Company name *	Position *
<input type="text"/>	<input type="text"/>

Employment type *

☐ Full time

☐ Part time

☐ Casual

☐ Self employed

Salary *	Start date	End date	Accountant name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Accountant business name	Email	Phone	Contact name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email		Phone	
<input type="text"/>		<input type="text"/>	

Workplace 2

Company name *	Position *
<input type="text"/>	<input type="text"/>

Employment type *

☐ Full time

☐ Part time

☐ Casual

☐ Self employed

Salary *	Start date *	End date *	Accountant name *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Accountant business name *	Email *	Phone *	Contact name *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email *	Phone *		
<input type="text"/>	<input type="text"/>		

Workplace 3

Company name *	Position *
<input type="text"/>	<input type="text"/>
Employment type *	

☐ Full time ☐ Part time ☐ Casual ☐ Self employed

Salary *	Start date *	End date *	Accountant name *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Accountant business name *	Email *	Phone *	Contact name *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email *	Phone *		
<input type="text"/>	<input type="text"/>		

Other Income

How many other sources of income do you have? *

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4+

Source of income *	Amount per week *	Source of income *	Amount per week *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Source of income *	Amount per week *	Source of income *	Amount per week *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Supporting Docs

Primary ID

Type *

☐ Drivers licence ☐ Passport ☐ ID card ☐ Other

Attach file *

Please attach supporting documentation

Secondary ID

Type *

☐ Birth certificate ☐ Student card ☐ Medicare card ☐ Healthcare card ☐ Vehicle registration ☐ Other

Attach file *

Please attach supporting documentation

Proof of Income

Type *

Attach file *

Please attach supporting documentation

Proof of Rental History

Type *

☐ Rental receipts ☐ Utility bills ☐ Bank statement ☐ Rental reference

Attach file *

Please attach supporting documentation

Other

Type *

Attach file *

Please attach supporting documentation

Declaration

Moving Hub

PRIVACY CONSENT AND TERMS: By reading and signing this form you Acknowledge the following

The applicant acknowledges that: First, the landlord’s insurance will not cover the tenant’s contents and it is advised that the tenant should obtain content and public liability insurance. Second, that the terms and conditions were available at the time of applying as these form part of the tenancy agreement and the tenant agrees with these terms and conditions. Third, that unless agreed, otherwise the tenant shall be liable for all water costs pertaining to the property. Costs to be calculated on a daily basis. Lastly, please note that our tenancy agreements contain a special cause stating: No smoking inside the premises.

I hereby offer to rent the property from the owner under a lease to be prepared by the Agent. Should the application be accepted by the landlord, I agree to enter into a Residential Tenancy Agreement. I acknowledge that this application is subject to the approval of the Landlord/Owner. I declare that all information contained in this application (including the front page) is true and correct and given of my own free will. I declare that I have inspected the premises and am not bankrupt. I consent to the disclosure of this page of the Tenancy Application Form to Movinghub (ABN 73 603 267 465) for the purpose of notifying the water authority and to contact me with regards to services related to moving home. I acknowledge that neither the Agent or Movinghub accept any responsibility for the delay in, or failure to arrange or provide for any connection or disconnection of a utility, or for any such loss in connection such delay or failure. I acknowledge that the Agent and Movinghub may receive a benefit in relation to any services organised. I also authorise the Agent to obtain personal information about me from:

- 1. The owner or the Agent of my current or previous residences
- 2. My personal referees and employer/s
- 3. Any record listing or database of defaults by tenants
- 4. If I default under a rental agreement, I agree that the Agent may disclose details of any such default to a tenancy data base, and to agents/landlords of properties I apply for in the future

Movinghub (ABN 73 603 267 465) (Movinghub) will: acquire, use and disclose your data as subject to this form only provided to them to contact you by means provided here for the purpose of discussing connection services related to moving house. Related but not limited to; Water Authority, Gas & Electricity and Home telecommunication services. Consent to Movinghub using collected information as stated above to assist in the nominated services selected by yourself. This includes providing selected information as provided by you to nominated services providers and Service providers thus engaged by you. They may use all information to; Connect, Supply and charge you for their services. Consent to Movinghub to obtain identifiers for the premises you are moving to. Including National Metering Identifier and Water Metre Number. Agree that. except to the extend provided in the Terms and Conditions, Movinghub has no responsibility to you for the connection or supply including failure to connect or supply any of the services as engaged by you to them. Acknowledge that the agent and Movinghub may receive a benefit in relation to Home services organised throughout as agreed above You warrant that you are authorised to make this application and fill all related details out truthfully. You warrant that you are authorised to make this application on behalf of all applicants and/if alternative contact persons are provided and that each person consents and agrees to the handling of their information as the same terms as you have.

I am aware that the agent will use and disclose my personal information within this application to:

- 1. Communicate with the owner and select a tenant
- 2. Prepare lease/tenancy documents
- 3. Allow tradespeople or equivalent organisations to contact me
- 4. Lodge/claim transfer to/from a Bond Authority
- 5. Refer to Tribunals/Courts & Statutory Authorities (where applicable)
- 6. Refer to collection agents/lawyers (where applicable)
- 7. Complete a credit check with NTD (National Tenancies Database)

I am aware that if the information is not provided or I do not consent to the uses to which personal information is put, the Agent can’t provide me with the lease tenancy of the premises. I am aware that I may access my personal information on the contact details above.

By agreeing below I warrant that I am authorised to make this application and to provide the invitations, consents, acknowledgements, authorisations and other undertakings set out in this application on behalf of all applicants listed on this application.

I consent to my references being contacted and my information being shared with third parties for the purposes of verifying and supporting my application *

☐ Yes ☐ No

I consent and agree *

☐ Yes ☐ No

I confirm all details provided in this application are true and correct *

☐ Yes ☐ No

Signature *