

Date:

Mobile: 0438594645

P O Box 896,

Beenleigh QLD 4207

ABN: 41416574704

Date received (AGENT USE ONLY)

Email:jane@homescope.com.au

To process your application, we require all of the following:

Complete <u>ALL</u> details and sign the application form with all relevant information and reference details.

All occupants 18 years and above must provide their information as an applicant.

Copies of identifying documents must be provided and originals sited prior to lease sign up.

NAME:	PROPERTY ADDRESS:
DECLARATION - APPLICATION	
I /we acknowledge: the offer to rent the pro	operty from the owner under a lease to be prepared by the Agent.
Should this application be accepted by the la	ndlord I agree to enter into a Residential Tenancy Agreement.
that this application is subject to the approve	
That should my/our application be approve transferred to the bank account details provide	ed one weeks rent as deposit is required within 24 hours to be electronically ded by agent.
gareement is entered into— (a) the holding depo	ation Act 2008 - Section 161 Rights and obligations about holding deposits — (5) If the sit must be applied in full or part payment of the rental bond for the agreement; (b) if an of the rental bond—the amount must be applied in payment of rent.
You have 48 hours to withdraw the application and paid to the owner of the property.	on after the deposit is paid for a full refund, after this time the deposit will be lost
that should my/our application be approved	I/we will be required to pay two weeks rent in advance and four weeks bond.
that I/we will be required to attend a sign-up	appointment should this application be approved.
That keys will not be handed over until idensigned and accept that if this application is re	tification is confirmed, all monies are received in clear funds and all paperwork is ejected, the agent is not legally obliged to give reasons for the rejection.
Applicant 1:	Signature:



Application Form Page 2 Privacy Declaration

NAME:	PROPERTY ADDRESS:
Consent and collection of persona	al information
I/we authorise the agent to obtain per	sonal information about me/us from:
Owner/agent of my current or previous	residences;
Employer/s and personal references	
,	ts by tenants; Its by tenants such as TICA or Barclays MIS for checking your tenancy access my/our personal information by contacting:
TICA 1902 220 346 (charges will apply)	
	53, Wynnum QLD 4178 (via replied paid envelope) and disclose my/our personal information within this application in order;
To communicate with the owner and se	elect a tenant Prepare lease/tenancy documents
Allow tradespeople or equivalent organ	isations to contact tenants
Lodge/claim/transfer to/from a Bond A	uthority
Refer to Tribunals/Courts & Statutory A	uthorities (where applicable)
Refer to collection agents/lawyers (whe	ere applicable)
Complete a check with TICA	
I am aware if information is not provid Agent may not provide me with the leas	ed or I do not consent to the uses to which personal information is put, the se/tenancy of the premises.
	nformation on the contact details above.
Agents reasonably considers has an inte	
If we discover personal information above in writing within 7 days of using the	out you on a tenancy database during the application process, we will advise ne database.
	led and contained in this application is true and correct and given of my/our
own free will. I/we declare that I/we haw was in when inspected. I/we declare the	ive inspected the rental property and accept the property in the condition it
was in when inspected. If we decide an	at the are not in any may bank appr
Applicant 1:	Signature:
Date:	Date received (AGENT USE ONLY)



Application for Residential Tenancy PART 1: RENTAL PROPERTY DETAILS ITEM 1: AGENT DETAILS AGENCY NAME: Home Scope ADDRESS: P O Box 896 STATE: QLD POSTCODE: 4207 SUBURB: Beenleigh MOBILE: FAX: EMAIL: 0438594645 jane@homescope.com.au ITEM 2: PROPERTY DETAILS ADDRESS: SUBURB: STATE: POSTCODE: ← weekly / fortnightly / monthly Rent period: Bond: \$____ Periodic agreement Tenancy Term: Fixed term agreement Ending on: Starting on: PART 2: APPLICANT DETAILS CONTACT DETAILS ITEM 3: DATE OF BIRTH: FULL NAME: Yes No Have you been known by any other name(s)? If Yes, what other name(s) have you been known by? MOBILE: HOME PHONE: EMAIL: WORK PHONE: State: Driver's Licence/passport number: Number of vehicles: Registration number(s): ITEM 4: **DEPENDANTS** ☐ No Do you have any dependants? Yes DEPENDANT DATE OF BIRTH: RELATIONSHIP TO APPLICANT: DEPENDANT FULL NAME(S): Are you or any of the dependants living with you a smoker? ITEM 6: PETS Yes Number of pets: Do you intend to keep pets at the property? Are your pets registered with a council? Yes Type of Pet/s: If Yes, please state which council:

INITIAL 000008378725

PERIOD OF OCCUPANCY: TYPE OF OCCUPANCY: Other: → CURRENT AGENT/LESSOR (If renting): Rent Owner Other: → AGENT/LESSOR PHONE: FAX: EMAIL: CURRENT RENT Rent period: ← weekly / fortnightly / monthly REASON FOR LEAVING: PREVIOUS RESIDENTIAL ADDRESS: STATE: POSTO PERIOD OF OCCUPANCY: TYPE OF OCCUPANCY: Other: → PREVIOUS AGENT/LESSOR: FAX: EMAIL: AGENT/LESSOR PHONE: FAX: EMAIL: PREVIOUS RENT: ← weekly / fortnightly / monthly REASON FOR LEAVING: *** BENDOYMENT DETAILS Are you employed? Yes No (if no, please provide details of previous employer, if any) Employment status: Full time Part time Casual Contract Self employed OCCUPATION: *** *** *** *** DATE COMMENCED EMPLOYMENT (approx.) *** *** *** EMPLOYER/BUSINESS NAME: *** *** *** ADDRESS: *** *** *** *** ADRESS: <th>TEM 7:</th> <th>APPLICANTS ADDRESS HISTORY</th> <th></th> <th></th> <th></th> <th></th> <th></th>	TEM 7:	APPLICANTS ADDRESS HISTORY						
PERIOD OF OCCUPANCY:		CURRENT RESIDENTIAL ADDRESS:						
PERIOD OF OCCUPANCY:		-				CTATE.	DOSTOODE:	
CURRENT AGENT/LESSOR (If rening): AGENTALESSOR PHONE: FAX: EMAIL: CURRENT RENT		The second secon		Owner \square	Other: →	SIAIE:	POSTCODE:	
CURRENT RENT \$ Rent period:		CURRENT AGENT/LESSOR (If renting):		Owner	Outer. 7			
\$ Rent period:		AGENT/LESSOR PHONE: FA	AX:	EMAIL:				
SUBURB:			← weekly / forti	nightly / monthly	REASON FOR	LEAVING:		
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PERIOD OF OCCUPANCY:		SUBURB:			8	STATE:	POSTCODE:	
AGENT/LESSOR PHONE: FAX: EMAIL: PREVIOUS RENT: \$		PERIOD OF OCCUPANCY:						
PREVIOUS RENT: \$ Rent period:		PREVIOUS AGENT/LESSOR:						
Rent period:		AGENT/LESSOR PHONE: FA	AX:	EMAIL:	127			
Are you employed?			← weekly / fort	nightly / monthly	REASON FOR	LEAVING:		
Employment status:	EM 8:	EMPLOYMENT DETAILS						
OCCUPATION: DATE COMMENCED EMPLOYMENT (approx.) EMPLOYER/BUSINESS NAME: ADDRESS: SUBURB: PHONE: FAX: EMAIL: IF SELF EMPLOYED, ACCOUNTANT'S NAME: PHONE CENTRELINK PAYMENTS Are you receiving any regular Centrelink payments? DESCRIPTION OF PAYMENT(S): TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL STUDENT DETAILS Are you studying full time? Yes No		Are you employed? Yes	No (if no, please pro	vide details of pre	vious employer	, if any)		
OCCUPATION: DATE COMMENCED EMPLOYMENT (approx.) EMPLOYER/BUSINESS NAME: ADDRESS: SUBURB: PHONE: FAX: EMAIL: IF SELF EMPLOYED, ACCOUNTANT'S NAME: PHONE CENTRELINK PAYMENTS Are you receiving any regular Centrelink payments? DESCRIPTION OF PAYMENT(S): TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TEM 10: STUDENT DETAILS Are you studying full time? Yes No		Employment status: Full time	e Part time	Casual	Contract	Self employe	ed	
DATE COMMENCED EMPLOYMENT (approx.) EMPLOYER/BUSINESS NAME: ADDRESS: SUBURB: PHONE: FAX: EMAIL: IF SELF EMPLOYED, ACCOUNTANT'S NAME: PHONE CENTRELINK PAYMENTS Are you receiving any regular Centrelink payments? DESCRIPTION OF PAYMENT(S): TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TEM 10: TEM 10: TEM 10: TEM 10: TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED:					NET INCOME	(per week)		
EMPLOYER/BUSINESS NAME: ADDRESS: SUBURB: PHONE: FAX: EMAIL: IF SELF EMPLOYED, ACCOUNTANT'S NAME: PHONE EM 9: CENTRELINK PAYMENTS Are you receiving any regular Centrelink payments? Are you receiving any regular Centrelink payments? TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TOTAL STUDENT DETAILS Are you studying full time? Yes No					\$			
ADDRESS: SUBURB: PHONE: FAX: EMAIL: IF SELF EMPLOYED, ACCOUNTANT'S NAME: PHONE EM 9: CENTRELINK PAYMENTS Are you receiving any regular Centrelink payments? DESCRIPTION OF PAYMENT(S): TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ EM 10: STUDENT DETAILS Are you studying full time? Yes No		DATE COMMENCED EMPLOYMENT (ap	prox.)		DATE TERMIN	IATED EMPLOYMENT	(if any):	
SUBURB:		EMPLOYER/BUSINESS NAME:						
PHONE: FAX: EMAIL: IF SELF EMPLOYED, ACCOUNTANT'S NAME: PHONE TEM 9: CENTRELINK PAYMENTS Are you receiving any regular Centrelink payments? Yes No DESCRIPTION OF PAYMENT(S): TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TEM 10: STUDENT DETAILS Are you studying full time? Yes No		ADDRESS:						
PHONE: FAX: EMAIL: IF SELF EMPLOYED, ACCOUNTANT'S NAME: PHONE TEM 9: CENTRELINK PAYMENTS Are you receiving any regular Centrelink payments? Yes No DESCRIPTION OF PAYMENT(S): TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ TEM 10: STUDENT DETAILS Are you studying full time? Yes No		CURURR			STATE.	POSTCODE:		
TEM 9: CENTRELINK PAYMENTS Are you receiving any regular Centrelink payments?			AX:	EMAIL:				
Are you receiving any regular Centrelink payments?		IF SELF EMPLOYED, ACCOUNTANT'S N	NAME:				PHONE:	
DESCRIPTION OF PAYMENT(S): TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$ DESCRIPTION OF PAYMENT(S): DATE PAYMENTS COMMENCED: TEM 10: STUDENT DETAILS Are you studying full time? Yes No	EM 9:	CENTRELINK PAYMENTS						
\$ TEM 10: STUDENT DETAILS Are you studying full time?		The second secon	ink payments? Yes	☐ No				
Are you studying full time? Yes No			DATE PAYMENTS COMMEN	CED:				
	ΓEM 10:							
				S: STUDEN	NT IDENTIFICATI	ON NUMBER:		
Are you an overseas student?		Are you an overseas student?	Yes No	If yes, V	/isa expiry date:	: , <u></u>		

ITEM 11:	PERSONAL REFERENCES				
	Please do not list relatives, another REFEREE 1:	applicant or partners and pro	ovide business hours	contact numbers.	RELATIONSHIP:
	ADDRESS:				PHONE/MOBILE:
	SUBURB: REFEREE 2:		STATE:F	POSTCODE:	RELATIONSHIP:
					PHONE/MOBILE:
	SUBURB:		STATE:	POSTCODE:	
ITEM 12:	PERSONAL REPRESENTATIVE				
	i.e. preferred person(s) to be contact	ted in the event of an emerge	ency.		
	REPRESENTATIVE 1:				RELATIONSHIP:
	ADDRESS:				PHONE/MOBILE:
					FIIONE/MOBILE.
	SUBURB:REPRESENTATIVE 2:		_ STATE: F	POSTCODE:	RELATIONSHIP:
					PHONE/MOBILE:
	SUBURB:		STATE:	POSTCODE:	
	PART 3: SUPPORTING	DOCUMENTS			
ITEM 13:	IDENTIFICATION				
	You are required to meet a 100 point The Agent/Lessor may photocopy a	nt identification criterion upon ny item and retain as part of	submission of your your application.	application.	
	Please tick the identifying documen	ts you have provided with you	ur application.		
	IMPORTANT: At least one form o	f Photo Identification MUST	Γ be provided.		
	70 Points				
	Passport	Full birth certificate	Citize	enship certificate	
	40 Points Australian Driver's Licence	Student Photo ID	□ Dena	rtment of Veterans Af	fairs card
	Centrelink card	Proof of age card		/Federal Government	
	25 Points				
	Medicare card	Council rates notice	Moto	r vehicle registration	
	Telephone bill	Electricity bill	Gas I	bill	
	Tenancy History Ledger	Bank statement	Credi	it card statement	
	Last FOUR rent receipts	Rent bond receipt	Previ	ous tenancy agreeme	ent
ITEM 14:	PROOF OF INCOME				
	You are also required to supply the	Agent/Lessor with proof of ye	our income upon sub	omission of your appli	cation.
	Employed: Last TWO pay s	slips.			
	Self employed: Bank statement	s, Group Certificate, Tax Retu	urn or Accountant's I	letter.	
	Not employed: Centrelink state	ment			

PART 4: DECLARATION

EF015 07/16

PLE	ASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE or FALSE		
	I, the Applicant		
1.	Have never been evicted by an Agent/Lessor	True	False
2.	Have no known reasons that would affect my ability to pay rent	True	False
3.	Was refunded the rental bond for my last address in full (if applicable)	True	False
	If false, please advise what deductions were made from your bond?		
4.	Have no outstanding debt to another Agent/Lessor?	True	False
	If false, why are you in debt to your past Agent/Lessor?		
PA	RT 5: TENANCY DATABASES		
The	Agency may use the following tenancy databases to check the rental history of the Applicant/s:		
Tica	, Barclays MIS		
PA	RT 6: ACKNOWLEDGEMENT		
PLE	ASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES or NO		
	I, the Applicant		
1.	Acknowledge that my personal contents insurance is not covered under any Lessor insurance policy/s and understand that it is my responsibility to insure my own personal belongings.	Yes	☐ No
2.	Understand that you as the Agent/Lessor have collected this information for the purpose of determining whether I am a suitable tenant for the property - in particular to check my identification, my 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.	Acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide reasons as to why.	Yes	☐ No
4.	Consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the Agent/Lessor to pass my details onto others which may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases.	Yes	☐ No
5.	Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), the Standard Terms and any special terms before completing this application.	Yes	☐ No
6.	Acknowledge that I have received or have available the Information Statement (Form 17a), body corporate by-laws (if applicable) before completing this application.	Yes	No
7.	Acknowledge that I have signed the agency's Privacy Notice and Consent.	Yes	☐ No
8.	Acknowledge that the Lessor and Applicant (tenant) are bound by this agreement immediately upon communication of either the lessor or agent's acceptance of the application.	Yes	☐ No
9.	Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 of the <i>Electronic Transactions</i> (Queensland) Act 2001 (Qld) and the <i>Electronic Transactions Act</i> 1999 (Cth).	Yes	☐ No
10.	Declare that the above information is true & correct and that I have supplied it of my own free will.	Yes	☐ No
	Name of Applicant:		
	Name of Applicant:		
	Signature: Date:		SIG HER



Date:

Application Form Page 3 Free Utility Connection Service

myconnect is a FREE and easy to use utility connection service Select utilities: Electricity Gas Internet Phone Pay TV Phone: 1300 854 478 Fax: 1300 854 479 Email: enquiry@myconnect.com.au Web: www.myconnect.com.au	If this section is complete, I/we: Consent to the disclosure of information on this form to myconnect ABN 65 627 003 605 for the purpose of arranging the connection of nominated utility services; consent to myconnect disclosing personal information to utility service providers for the stated purpose and obtaining confirmation of connection; consent to myconnect disclosing confirmation details (including NMI, MIRN, utility provider) to the Real Estate Agent, its employees and myconnect may receive a fee/incentive from a utility provider in relation to the connection of utility services; acknowledge that whilst myconnect is a free service, a standard connection fee and/or deposit may be required by various utility providers; acknowledge that, to the extent permitted by law, the Real Estate Agent, its employees and myconnect shall not be liable for any loss or damage (including consequential loss and loss of profits) to me/us or any other person or any property as a result of the provision of services or any act or omission by the utility provider or for any loss caused by or in connection with any delay in connection or provision of, or failure to connect or provide the nominated utilities. I acknowledge that myconnect record all calls for coaching, quality and compliance purposes. Tick here to opt out
nant 1 Name:	Date of Birth:
one:	Email:
ivers Licence/18+ Card	Passport:
nant 2 Name:	Date of Birth:
one:	Email:
ivers Licence/18+ Card	Passport:
nant 3 Name:	Date of Birth:
one:	Email:
ivers Licence/18+ Card	Passport:
ove in Date:	Connection Date:
Applicant 1:	Signature:
Applicant 2:	Signature:

Date: _