



32 Boronia Ave, Epping NSW 2121 Tel: 9869 4151

APPLICATION FOR TENANCY

email: kylie@leasellproperty.com.au

or fax to: 9869 4074

ADDRESS OF PREMISES RENTAL *pw*

NAME OF APPLICANT DATE OF BIRTH

(Please provide an individual application form for each person who will be living at the property)

YOUR PRESENT ADDRESS HOME TEL

Do you currently rent these premises? Yes/No For how long? Current rent paid

WORK TEL MOBILE TEL EMAIL

OCCUPATION COMPANY NAME

Contact at work to confirm your employment TEL

Period of employment If Self employed, please give your accountant's details

CURRENT LANDLORD/AGENT TEL

PREVIOUS LANDLORD/AGENT TEL

Address of the previous place you rented

DRIVERS LICENCE VEHICLE REGISTRATION Or PASSPORT NO

Number of people who will occupy the property Adults Children

Do you have any pets? Yes/No If yes, what kind?

(Please note that pets are not permitted in any of our rented premises without the prior written consent of the Landlord or his Agent)

In the case of an emergency please provide the details of a contact relative or your next of kin

TEL

What date would you like to move into the property?

What term of lease do you request?

6 months / 12 months / 18 months / 2 years

How do you wish to pay your rent?:

weekly or **calendar monthly**

Please indicate how you would like to pay your rent

INTERNET / DEPOSIT BOOK / CHEQUE

PERSONAL REFERENCES

persons not related to you 1.

Tel

2.

Tel

Note:

It is acknowledged by the applicant that these references will be verified by the agent, and the applicant consents.

Please be advised that the status of all phone lines into the property is unknown by the agent and should be investigated by the prospective tenant. The tenant is responsible for any costs associated with phone connections.

Signature of Applicant

Date

- **Please ensure that a copy of your driver's license or passport accompanies this application.**

Please ensure that applications are either emailed, faxed or delivered to our office by 10.00am of the next business day.

Office Address: 32 Boronia Avenue, Epping NSW 2121 Fax: 9869 4074

Holding of the property – HOLDING DEPOSIT

1. Once an application has been approved, a holding fee equivalent to one week's rent must be paid, in order to remove the property off the rental market. This fee will only hold the property for seven (7) days.
 2. Should the applicant decide not to proceed with the property, the full amount of the holding deposit will be forfeited to the landlord.
 3. During this holding period, no fee will be taken from any other applicant nor will the premises be held in another's favour.
-

OFFICE USE ONLY

Application Taken By

BOND \$ _____

References Checked By

RENT \$ _____

TOTAL \$ _____

Comments _____

DEPOSIT TAKEN \$ _____

_____/_____/_____

BALANCE DUE ON SIGNING

Landlord Approved

Y / N

\$ _____



32 Boronia Avenue, Epping NSW 2121 • Tel: 02 9869 4151 • Fax: 02 9869 4074

Current Real Estate Agent's details:

TO: _____ **DATE:** ____/____/____

ATTENTION: _____

FAX or EMAIL:

**Please complete and return to our office by fax to: (02) 9869 4074
Or email to: kylie@leasellproperty.com.au**

RENTAL REFERENCE REQUEST

In accordance with the current Privacy Policy I/we the undersigned authorize the recipient of this fax to give information to Leasell Property regarding my/our rental history. I/we understand this information will be used for my/our application.

SECTION ONE (To be completed by Applicant)

Applicant's Name: _____

Current Address: _____

Signature: _____ Date: _____

SECTION TWO (To be completed by Lessor/Agent)

“Please attach a rental ledger when returning this form”

During the tenancy how would you describe the rental payments?
Good Satisfactory Poor Ledger Attached

What was the rental amount paid? \$_____ per week / month

Were the tenants ever in arrears? No Occasionally Often

Were the tenants ever served a Termination Notice? Yes / No

How would you describe the condition of the property on periodic or at the final inspection? _____

How did you find the tenants to deal with?
Co-operative Usually Co-operative Difficult

Would you rent these tenants another property? Yes No

Referring Property Manager's name: _____

Signature: _____ Date: ____/____/____

We sincerely thank you for your time and honesty.