Residential Application Form

For your application to be processed you must answer all questions (Including the reverse side)

A. AGENT DETA	AILS						
Hayden Real		ean Grove					
75 The Terrace							
Ocean Grove							
Ph: 03 525							
Fax: 03 525							
B. PROPERTY I		manter care visit blibs to mant?					
1. What is the addre	ss of the pro	perty you would like to rent?					
		Postcode					
Property Rental							
\$	norwook	c					
ð	per week	\$ per month					
2. Lease commence	ment date?						
Day		Month Year					
3. Lease term?							
Years		Months					
4. How many tenant	s will occupy	the property?					
Adults	Children	Ages					
C. PERSONAL	DETAILS						
5. Please give us yo							
		Mrs Other					
Mr Ms	Miss						
Surname		Given Name/s					
Date of Birth		Driver's licence number					
Driver's licence expire	y date	Driver's licence state					
Passport no.		Passport country					
Popoion no (if applie	abla)	Dension type (if applicable)					
Pension no. (if application	able)	Pension type (if applicable)					
6. Please provide yo	our contact de	etails					
Home phone no.		Mobile phone no.					
Work phone no.		Fax no.					
Email a 11							
Email address							
7. What is your curr	ent address?						
	Postcode						
Property Manager Na	ıme						



DECLARATION

I hereby offer to rent the property from the owner under a lease to be prepared by the Agent. Should this 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 owner/landlord. I declare that all information contained in this application (including the reverse side) is true and correct and given of my own free will. I declare that I have Inspected the premises and am not bankrupt.

I authorise the Agent to obtain personal Information from

(a) The owner or the Agent of my current or previous residence

(b) My personal referees and employer/s;

(c) Any record listing or database of defaults by tenants such as NTD, TICA or TRA for the purpose of checking your tenancy history; I am aware that I may access my personal information by contacting -

NTD: 1300 563 826

- TICA: 1902 220 346
- TRA: (02) 9363 9244

If I default under a rental agreement, I agree that the Agent may disclose details of any such default to a tenancy default database, and to agents/landlords of properties I may apply for in the

I am aware that the Agent will use and disclose my personal information in order to

- (a) communicate with the owner and select a tenan
- (b) prepare lease/tenancy documents
- (c) allow tradespeople or equivalent organisations to contact me
- (d) lodge/claim/transfer to/from a Bond Authority
- (e) refer to Tribunals/Courts & Statutory Authorities (where applicable)
- (f) refer to collection agents/lawyers (where applicable) (g) complete a credit check with NTD (National Tenancies Database)
- (h) transfer water account details into my name

I am aware that if information is not provided or I do not consent to the uses to which personal 9

Signature Date	
240	

UTILITY CONNECTIONS

This is a free service that connects all your utilities Direct Connect

make a connection

Once we have received this application we will call you to confirm your details.

Direct Connect will make all reasonable efforts to contact you within 24 hours of the nearest working day on receipt of this Application to confirm the information on this Application and explain the details nection service.

of the services offered. Direct Connect is a utility one stop co
Please tick utilities as required
Electricity Phone Internet Pay T
Gas Water Insurance

DECLARATION AND EXECUTION: By signing this application, I/we: consent to Direct Connect arranging for the connection and disconnection of the nominated utility services and to providing information contained in this application to utility providers for this purpose; acknowledge having been provided with terms and Conditions of Supply of Direct Connect and having read and understood them together with the Privacy Collection Notice set out below; declare that all the information contained in this application is true and correct and given of their own free will; expressly authorise Direct Connect to provide any information disclosed in this Application to a supplier or potential supplier of the Services in accordance with the Privacy Collection Notice and to obtain any information necessary in relation to the Services; expressly authorise Direct Connect to provide any information disclosed in this Application to an information provider for the purpose of that information provider disclosing it to a supplier or potential supplier of the Services in accordance with the Privacy Collection Notice and to obtain any information necessary in relation to the Services; consent to Direct Connect contacting me by telephone or by SMS in relation to the marketing or promotion of all of the services listed under the heading "Utility Connections" above even if we/I have not applied for the connection of those services in this application. This consent will continue [for a period of 1 year from the date of our/my execution of this application/until [28] days after well disconnect the last of the services in respect of which this application is made]; acknowledge that this consent will permit Direct Connect to contact us/me even if the telephone numbers listed on this application form are listed on the Do Not Call Register; understand that under the requirements of the Privacy Act 1988, Direct Connect will ensure that all personal information obtained about me/us will be appropriately collected, used, disclosed and transferred and will be stored safely and protected against loss, unauthorised access, use, modification or disclosure and any other misuse; authorise the obtaining of a National Metering Identifier (NMI) for my residential address to obtain supply details; consent to Direct Connect disclosing my/our details to utility providers (including my/our NMI and telephone number); declare and undertake to be solely responsible for all amounts payable in relation to the connections and/or supply of the Services and hereby indemnify Direct Connect and its officers, servants and agents and hold them indemnified against any charges whatsoever in respect of the Services; acknowledge that, to the extent permitted by law, Direct Connect 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 the services or any act or omission by the utility provider or for any loss caused by or in connection with any delay in connection, disconnection or provision of, or failure to connect or disconnect or provide, the nominated utilities; acknowledge that whilst Direct Connect is a free service I/we may be required to pay standard connection fees or deposits required by various utility providers; acknowledge that the Services will be provided according to the applicable regulations and that the time frames and terms and conditions of the nominated utility providers bind me/us and that after hours connections may incur additional service fees from utility providers; acknowledge that the real estate agent listed on this application form may receive a benefit from Direct Connect in connection with the provision of the service being provided to me/us by Direct Connect; and acknowledge the entitlement of Direct Connect and its associates, agents and contractors, to receive a fee or remuneration from the utility provider and that such fee or remuneration will not be refunded to me as a rebate in connection with the provision of the utility connection services By signing this application form, I warrant that I am authorised to make this

application and to provide the consents, acknowledgements, authorisations and other undertakings set out in this application form on behalf of all applicants listed in this application form.

١	Signature	Date	
	PO Box 1519, Box Hill, Victoria 3128. P: 1300 664 715 F:1300 664	4 185. www.directconnect.com	 .au

F. APPLICANT HISTORY			H. CONTACTS / REFERENCES			
8. How long have you lived at your current address?			16. Please provide a contact in case of emergency			
Years I	Months		Surname		Given name/s	
9. Why are you leaving this address	s?					
, i , i , i i , i i i i i i i i i i i i			Relationship to yo	ou	Phone no.	
10. Landlord/Agent details of this p	roperty (if a	oplicable)	47 Disease massis			
Name of landlord or agent			17. Please provide 2 personal references (not related to you) 1. Surname Given name/s			
			1. Surname		Given name/s	
Landlord/agent's phone no. Weekly Rent						
	\$		Relationship to yo	ou	Phone no.	
11. What was your previous residen	itial address	6?	2 Curnama		Given name/s	
			2. Surname		Given hame/s	
	Postcod	е				
12. How long did you live at this add	dragg?		Relationship to yo	ou	Phone no.	
Years I	Months					
13. Landlord/Agent details of this pr	roperty (if a	nnlicable)	I. OTHER INFORMATION			
Name of landlord or agent	. opolity (u	spirousio,	18. Car Registrat	tion		
			19. Please provid	de details of any p	ets	
Landlord/agent's phone no.	Weekly Ren	t	Breed/type	,,,	Council registration / number	
	\$		1.			
			2.			
Was bond refunded in full?	If not why no	ot?				
			21. Are you a sm	noker?		
			Yes	No	Inside / Outside (please circle)	
G. EMPLOYMENT HISTORY			PLEASE NOTE			
14. Please provide your employmen	nt details				ank shaqua ar manay ardar	
What is your occupation?			within 24 hours after	approval of application	ank cheque or money order on. No Personal Cheques	
			accepted. Ongoing rental payments must be direct debit or direct deposit. I acknowledge that my application is subject to the owners' approval and the			
What is the nature of your employment?			availability of the premises on the due date. No action will be taken against the			
(FULL TIME/PART TIME/CASUAL)			Landlord or Agent if the applicant is unsuccessful or upon acceptance should the premises not be ready for occupation on this date, for whatever reason. I accept			
Employer's name (inc. accountant if self e	employed or in	stitution if student)	that rental amounts are subject to change by providing the required notice.			
			DISCLAIMER	I confirm th	ne following:	
Forming and the second			During my inspe	ection of this property	I found it to be in relatively clean condition	
Employer's address		OR				
		I believe the following items should be attended to prior to my tenancy commencing. I acknowledge that these items are subject to the owner's approval.				
Postcode			commending, radiatometage that these terms are subject to the owner's approval.			
Contact name	Phone no.					
Solitable Halling	THORIC HO.					
Length of employment		Net Income				
Years I	Months	\$	HOW DID YOU F	IND OUT ABOUT 1	THIS PROPERTY?	
15. Please provide your previous en	mployment o	details	OBoard	O The Internet	O Local Paper	
Occupation?			Ocunter List	Other (specify	<i>y</i>)	
		PLEASE PROVIDE US WITH 100 POINTS OF IDENTIFICATION				
[Englander and			Passport Passport	L 03 WITH 100 P	50	
Employer's name			Driver's Licence		50	
			Proof of Age Card Student ID Card		50 20	
Length of employment		Net Income	Copy of Mobile Phor		20	
	Months		Copy of Medicare Concession / Pension	on Card	20 10	
Years Years	Months	\$	Copy of Gas/Water/li Copy of Current Pay		30 30 each	
İ				r		