

Address: 907 Princes Highway

Springvale, VIC 3171

Phone: Email address: Website: (03) 9769 1188 Mob: 0434 647 407 rentals@sovereignproperties.com.au sovereignpropertiesvictoria.com.au

Residential Tenancy Application Form	All sections of this form must be completed & signed for your application to be processed					
Proposed Rental Property Address	Postcode					
Rent per week: \$ Bond Amount \$	Have you inspected the property?: YES / NO (please circle)					
Length of tenancy: Years Months	Tenancy To Commence					
Pets: YES / NO (please circle) How many tenants will occupy the property?  Adults  Dependants  Ages  If yes attach a PHOTO OF EACH pet						
Pet type: Breed	Reg. No: Outdoor only: YES / NO					
Pet type: Breed	Reg. No: Outdoor only: YES / NO					
Vehicle 1 Rego: Model/Year/Colour	Vehicle 2 Rego: Model/Year/Colour					
1. First Applicant 2. Second Applicant AND/OR Partner						
Title First Name Initial	Title First Name Initial					
Last name Smoker: Yes/No	Last name Smoker: Yes/No					
Name at Birth: Place of Birth:	me at Birth: Place of Birth:					
Date of Birth / / Age (Years/Months)	Date of Birth / / Age (Years/Months)					
Drivers Licence No. State	Drivers Licence No. State					
Passport Medicare No. Ref:	Passport Medicare No. Ref:					
Pension Type (if applicable)	Pension Type (if applicable) No					
Home Ph Mobile Ph	Home Ph Mobile Ph					
Email	Email					
Marital status: Single Married De Facto Sep/Div Friends Relatives	Marital status: Single Married De Facto Sep/Div Friends Relatives					
2. Rental History - Applicant 1	2. Rental History - Applicant 2					
Current Address	Current Address					
Suburb Postcode	<u>Suburb</u> Postcode					
How long have you lived at your current address? Years Months	How long have you lived at your current address? Years Months					
Reason for leaving Rent per week: \$	Reason for leaving Rent per week: \$					
Landlord/Agent: Phone:	Landlord/Agent: Phone:					
Email: fax:	Email: fax:					
Previous Address	Previous Address					
Suburb Postcode	Suburb Postcode					
Length at previous address? Years Months	Length at previous address? Years Months					
Reason for leaving Rent per week: \$	Reason for leaving Rent per week: \$					
Landlord/Agent: Phone:	Landlord/Agent: Phone:					
Email: fax:	Email: fax:					
Bond Refunded Yes/No If not why?	Bond Refunded Yes/No If not why?					
3. Employment Details - Applicant 1	3. Employment Details - Applicant 2					
Occupation Employers Name	Occupation Employers Name					
Employment Address	Employment Address					
Suburb Postcode	Suburb Postcode					
Employer Phone No Contact Name	Employer Phone No Contact Name					
Length at current employment Years Months	Length at current employment Years Months					
Net Income \$ Per Week \$ Per Month \$	Net Income \$ Per Week \$ Per Month \$					
Are you self employed? Yes / No ABN:	Are you self employed? Yes / No ABN:					
Accountant Name: Phone:	Accountant Name: Phone:					
4. Social Security Benefits OR Centrelink Payment	4. Social Security Benefits OR Centrelink					
Type CRN:	Type CRN:					
\$ Per Week \$ Per Month	\$ Per Week \$ Per Month					

5. Referees - Applicant 1 - (NOT co-applica	ant)	5. Re	eferees - Applicant 2 - (NOT co-applicant)			
1. Reference name		1. Reference name				
Address:		Address:				
Home Phone Mobile No	obile No Hon		Phone Mobile No			
2. Reference name 2. Ref		2. Refe	rence name			
Address: Addr		Address	Address:			
Home Phone Mobile No		Home F	lome Phone Mobile No			
6. Emergency Contact Details - Not same a	as co-applicant	6. Em	ergency Contact Details - No	t same as c	o-applicant	
Name		Name				
Address		Address	Address			
Suburb Postcode		Suburb	Suburb Postcode			
Email Address		Email A	ddress			
7. Please ensure you provide Min. 100 points	Identification - at least ONE it	_		to copy ALL	& bring originals	
Section ONE	Section TWO		Section THREE	_	(10) 0	
(40) Drivers License	(30) Latest 3 Current Pay Slips OF	5	(30) Previous tenancy re (20) Previous two rent re		(10) Gas account (10) Pet rego papers	
(40) Passport (complete the following) Name at Birth:	Current Bank Statement	OR	(20) Home owner MUST	SUPPLY _	(10) Birth Certificate (10) Medicare Card	
Place of Birth:	Centre Link income State	ment	(10) Motor vehicle registr		(10) mealeare care	
Passport Country:			(10) Telephone account (10) Electricity account		TOTAL POINTS	
8. FREE Utilities Connections User Consent	Form		(10)			
connectnow.	P: 1300 554 323   F: 1300 8 E: info@connectnow.c		PRIVACY CONSENT AND TERM and agree to the following: Con	nect Now Pty	Ltd (ABN 79 097 398 662)	
We get things sorted.  Moving made easier  W: connectnow.com.ac			("connectnow") will collect, use and disclose your personal information to contact you (including electronically) about providing moving, connection and disconnection services and to inform you about products and services offered by its related companies and third-party suppliers.			
services include electricity, gas, internet, pay TV, home phone connections and much more. Plus, our home moving service is free – it's our way of ensuring your move is as seamless as possible.  We'll attempt to contact you within 1 working day of receiving this application to provide you with our connection service. If you don't hear from us, please call 1300 554 323 to ensure your services are connected.		e – it's g this don't	it's you can request from them. You consent to connectnow continuing to market to you unless you opt out, including by emailing <a href="mailto:info@connectnow.com.au">info@connectnow.com.au</a> . To the extent permitted by law and except where expressly guaranteed, connectnow are not responsible or liable for delayed or failed connections or the service providers' connection charges, which you must pay to them directly. Connectnow may receive commissions or fees from your selected retailer(s), and your real estate agent may also receive commissions or fees from your selected retailer(s), and your real estate agent may also receive commissions or fees from			
Yes, I accept the Terms. Please call me to connect my new services.			contact person on this application, you authorise them to act on your behalf to arrange moving, connection and disconnection services, including accepting third-party terms. You warrant that you are authorised to make this application on behalf of all applicants and alternative contact persons listed and			
Signed:	Date:		that each person has consented and agreed to the handling of their personal information on the same terms as you have.			
9. Declaration for Authority						
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;		nent. at all	I am aware that if information is not provided or I do not consent to the uses to which personal information is put, the Agent cannot provide me with the lease/tenancy of the premises.  Printed Name Applicant 1:			
(b) My personal referees and employer/s;	ersonal referees and employer/s;  ercord listing or database of defaults by tenants such as NTD, TICA or TRA for the			Date		
purpose of checking your tenancy history;			Applicant 1:			
I am aware that I may access my personal information by contacting - **TD: 1300 563 826 *TICA: 1902 220 346 *TRA: (02) 9363 9244  If I default under a rotal except that the Agent may displace details of any such			Printed Name Applicant 2:			
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			Signature Applicant 2:		Date	
future.  I am aware that the Agent will use and disclose my personal information in order to:		10. Payment Details				
(a) communicate with the owner and select a tenant (b) prepare lease/tenancy documents		Property Rental Per Week \$:				
(c) allow tradespeople or equivalent organisations to contact me (d) lodge/claim/transfer to/from a Bond Authority			Rent in Advance \$			
(e) refer to Tribunals/Courts & Statutory Authorities (wh (f) refer to collection agents/lawyers (where applicable)	,		Rental Bond (1 month's rent)	\$		
(g) complete a credit check with NTD (National Tenanci (h) transfer water account details into my name	ies Database)			\$		
I am aware that if information is not provided or I do r information is put, the Agent cannot provide me with the		onal	Total Due \$ EFT/Bank Cheque/Money Order			
PLEASE SIGN		PLEA	ASE SIGN			