



APPLICATION FOR TENANCY

IMPORTANT

THE PROPERTY **MUST** BE INSPECTED BEFORE AN APPLICATION CAN BE PROCESSED, NO APPLICATION WILL BE ACCEPTED UNLESS THE FOLLOWING INFORMATION IS PROVIDED:

Application Form	<ul style="list-style-type: none">● Fully Completed● Disclaimer Authority Signed● Privacy Act Acknowledgement Signed
Identification	<ul style="list-style-type: none">● Drivers Licence● Birth Certificate● Passport● Photo Identification
Proof of Current Address	<ul style="list-style-type: none">● Vehicle Registration● Electricity Account● Gas Account● Home Telephone Account● Bank Statements
Proof of Income	<ul style="list-style-type: none">● Employment Agreement Details● Letter from Employer with Proof of Income● 2 x Recent Payslips● Centre link Statements● Bank Statements
If Renting with an Agency	<ul style="list-style-type: none">● Current Lease● Rental Ledger
If Renting Privately	<ul style="list-style-type: none">● Copy of Bond Lodgement● Rent Receipts

PLEASE ALLOW APPROXIMATELY 2 WORKING DAYS FOR THE APPLICATION TO BE PROCESSED

P 1300 322 396
E rentals@pbapm.com.au
PO Box H139, Hurlstone Park NSW 2193
W www.pbapm.com.au
ABN 59 492 172 927

Property Address: _____

RESIDENTIAL TENANCY APPLICANT 1

Date: _____

PROPERTY APPLYING FOR

Property Address: _____

Property Shown to You By: _____

Lease Term: 6 Months 12 Months

Lease Start Date: _____ Rent Payable: \$ _____ Per Week

NUMBER OF OCCUPANTS

Adults: _____ Ages: _____ Children: _____ Ages: _____

PERSONAL DETAILS

Full Name: _____

Date of Birth: _____

Contact Numbers: (H) _____ (W) _____ (M) _____

Email Address: _____

Drivers Licence Number: _____

Expiry: _____ State: _____

Car Registration: _____

Expiry: _____

Passport Number: _____

Passport Country: _____

Proof Of Age/18+ Card: _____

Expiry: _____ State: _____

Main Language Spoken other than English: _____

Marital Status: _____

Smoke: Yes No

PRESENT ADDRESS

Owner Renter Other Specify: _____

Owner or Other (Fill in if applicable):

Address: _____

Period of Occupancy: _____ Reason for Leaving: _____

Renter (Fill in if applicable):

Agent/Landlord: _____ Contact: _____

Phone: _____ Period of Occupancy: _____

Rent Paid: \$ _____ per week Bond: \$ _____

Was the bond refunded in full? Yes No If No Why? _____

Reason for Leaving: _____

PREVIOUS ADDRESS

Owner Renter Other Specify: _____

Owner or Other (Fill in if applicable):

Address: _____

Period of Occupancy: _____ Reason for Leaving: _____

Renter (Fill in if applicable):

Agent/Landlord: _____ Contact: _____

Phone: _____ Period of Occupancy: _____

Rent Paid: \$ _____ per week Bond: \$ _____

Was the bond refunded in full? Yes No If No Why? _____

Reason for Leaving: _____

PETS (MUST REMAIN OUTSIDE AT ALL TIMES)

Pets Owned: Yes No

Number of Pets: _____

Type(s): _____

Registered: _____

OCCUPATION (PRESENT)

Company Name: _____ Position: _____
Employer Name: _____ Phone: _____
Address: _____
Period of Employment: _____ Income: \$ _____

OCCUPATION (PREVIOUS)

Company Name: _____ Position: _____
Employer Name: _____ Phone: _____
Address: _____
Period of Employment: _____ Income: \$ _____

OTHER INCOME (Fill in if applicable)

Additional Income or Benefits Received: _____ Amount: \$ _____

IF SELF EMPLOYED (Fill in if applicable)

Business Name: _____ A.C.N. or A.B.N: _____
Address: _____
Accountant: _____ Name: _____
Address: _____
Phone: _____ Fax: _____

*Note: If self employed evidence will be required such as Tax or Annual Returns)

PERSONAL REFERENCES

Name: _____ Phone: _____
Address: _____
Relationship to You: _____ How Long Known: _____
Name: _____ Phone: _____
Address: _____
Relationship to You: _____ How Long Known: _____

EMERGENCY CONTACT

Name: _____ Phone: _____
Address: _____
Relationship to You: _____

HOW DID YOU FIND OUT ABOUT THE PROPERTY

Internet Newspaper Signboard Word of Mouth

Applicant 1 Full Name _____ Applicants Signature _____

RESIDENTIAL TENANCY APPLICANT 2

Date: _____

PROPERTY APPLYING FOR

Property Address: _____

Property Shown to You By: _____

Lease Term: 6 Months 12 Months

Lease Start Date: _____ Rent Payable: \$ _____ Per Week

NUMBER OF OCCUPANTS

Adults: _____ Ages: _____ Children: _____ Ages: _____

PERSONAL DETAILS

Full Name: _____

Date of Birth: _____

Contact Numbers: (H) _____ (W) _____ (M) _____

Email Address: _____

Drivers Licence Number: _____

Expiry: _____ State: _____

Car Registration: _____

Expiry: _____

Passport Number: _____

Passport Country: _____

Proof Of Age/18+ Card: _____

Expiry: _____ State: _____

Main Language Spoken other than English: _____

Marital Status: _____

Smoke: Yes No

PRESENT ADDRESS

Owner Renter Other Specify: _____

Owner or Other (Fill in if applicable):

Address: _____

Period of Occupancy: _____ Reason for Leaving: _____

Renter (Fill in if applicable):

Agent/Landlord: _____ Contact: _____

Phone: _____ Period of Occupancy: _____

Rent Paid: \$ _____ per week Bond: \$ _____

Was the bond refunded in full? Yes No If No Why? _____

Reason for Leaving: _____

PREVIOUS ADDRESS

Owner Renter Other Specify: _____

Owner or Other (Fill in if applicable):

Address: _____

Period of Occupancy: _____ Reason for Leaving: _____

Renter (Fill in if applicable):

Agent/Landlord: _____ Contact: _____

Phone: _____ Period of Occupancy: _____

Rent Paid: \$ _____ per week Bond: \$ _____

Was the bond refunded in full? Yes No If No Why? _____

Reason for Leaving: _____

PETS (MUST REMAIN OUTSIDE AT ALL TIMES)

Pets Owned: Yes No Number of Pets: _____

Type(s): _____ Registered: _____

OCCUPATION (PRESENT)

Company Name: _____ Position: _____
Employer Name: _____ Phone: _____
Address: _____
Period of Employment: _____ Income: \$ _____

OCCUPATION (PREVIOUS)

Company Name: _____ Position: _____
Employer Name: _____ Phone: _____
Address: _____
Period of Employment: _____ Income: \$ _____

OTHER INCOME (Fill in if applicable)

Additional Income or Benefits Received: _____ Amount: \$ _____

IF SELF EMPLOYED (Fill in if applicable)

Business Name: _____ A.C.N. or A.B.N: _____
Address: _____
Accountant: _____ Name: _____
Address: _____
Phone: _____ Fax: _____

*Note: If self employed evidence will be required such as Tax or Annual Returns)

PERSONAL REFERENCES

Name: _____ Phone: _____
Address: _____
Relationship to You: _____ How Long Known: _____
Name: _____ Phone: _____
Address: _____
Relationship to You: _____ How Long Known: _____

EMERGENCY CONTACT

Name: _____ Phone: _____
Address: _____
Relationship to You: _____

HOW DID YOU FIND OUT ABOUT THE PROPERTY

Internet Newspaper Signboard Word of Mouth

Applicant 2 Full Name _____ Applicants Signature _____

DISCLAIMER AUTHORITY

Property Address: _____

In order to process this application all questions must be answered. The completion of this application is not an acceptance. Failure to complete this application may result in the application not being processed. I, the said applicant, declare that all the information contained in this application is true and correct, and that the information provided of my own free will. I further authorise PBA Property Management to contact any of the referees supplied by me in this application for verification.

I declare the following

1. I inspected the above property on the _____.
2. I wish to apply to rent the above property for a period of _____ months commencing on _____.
3. I agree that the rent is \$_____ per week and that the rental bond is \$_____.
4. I the applicant, declare that I am not bankrupt and that I have not entered into any scheme of arrangement for payment of monies to any creditors. I further declare that I am not paying off any previous rental debt.
5. I authorise PBA Property Management to access and check any information that may be listed on me on the **TICA DEFAULT TENANCY DATABASE** and any other tenancy database which may be available.
6. I agree and understand that in the event of this application being rejected there is no requirement of law for PBA Property Management to disclose to me/us any reason for such rejection. I also agree that I will not raise any objection for not being provided a reason for any rejection of this application.
7. I understand in the event of this application being approved, a holding deposit is payable of one weeks rent, I also understand if for some reason I withdraw my application once the holding deposit has been paid, the deposit becomes non-refundable.
8. I agree and understand that in the event of this application being approved, PBA Property Management may report any defaults that may occur from time to time in the tenancy with **TICA DEFAULT TENANCY DATABASE** and any other tenancy database which may be available. I understand that in the event of a default being reported, the removal of such information is subject to the guidelines of the database companies.
9. I agree and understand that in the event of this application being approved all initial monies will be paid to PBA Property Management in **BANK CHEQUE OR MONEY ORDER ONLY** I agree that no keys for the property will be provided by PBA Property Management to me/us until such time as all monies owed are paid in full in accordance with Clause 8 above.
10. I agree that I/we will abide by the policies of PBA Property Management as may be provided to me in relation to this tenancy.
11. I agree to allow PBA Property Management to photocopy the information supplied by me for their records.
12. I agree that upon communication of acceptance of this application by the Landlord or PBA Property Management that this tenancy shall be binding on both the Landlord and the tenant. I further agree that I will sign the Residential Tenancy Agreement, and be bound by the Terms and Conditions of the agreement.

Applicant 1 Full Name _____ Applicant 1 Signature _____

Applicant 2 Full Name _____ Applicant 2 Signature _____

PRIVACY ACT ACKNOWLEDGEMENT FOR TENANT APPLICANTS & APPROVED OCCUPANTS

This form provides information about how we the below named Agent handle your personal information, as required by the National Privacy Principles in the Privacy Act 1988, and seeks your consent to disclosures to TICA Default Tenancy Control Pty Ltd in specified circumstances. If you do not consent to the disclosure of your personal information to TICA we cannot process your application.

Member Name: PBA Property Management
Postal Address: PO Box H139, Hurlstone Park NSW 2193
Phone: 1300 322 396
Email: rentals@pbapm.com.au

At PBA Property Management, we collect personal information about you. The information we collect can be accessed by you by contacting our office on the above number or address.

PRIMARY PURPOSE

Before an applicant is accepted we collect your information to assess the risk to our clients in providing you with the property you have requested to rent.

In order to assess your application we disclose your personal information to:

- The Agent / Landlord for approval or rejection of your application.
- TICA Default Tenancy Control Pty Ltd to assess the risk to the Landlord and verify the details provided in your Tenancy Application.
- Referees to validate information supplied in your application.
- Other Real Estate Agents to assess the risk to the Landlord.

SECONDARY PURPOSE

During and after the tenancy we may need to disclose your personal information to:

- Tradespeople to contact you for repairs and maintenance of the property.
- Refer to Tribunals or Courts having jurisdiction to seek orders or remedies.
- Refer to Debt Collection Agencies where Tribunal / Court orders have been awarded.
- Refer to TICA Default Tenancy Control Pty Ltd to record details of your tenancy history.
- Refer to the Agent / Landlord insurer in the event of an insurance claim.
- To provide future rental references to other Agents / Landlords.

If you fail to provide your personal information and do not consent to the uses set out above we cannot properly assess the risk to our client or carry out our duties. Consequently we cannot provide you with the property requested to rent.

TICA STATEMENT

As TICA may collect personal information about you, the following information about TICA is provided in accordance with the National Privacy Principles in the Privacy Act 1988.

TICA Default Tenancy Control Pty Ltd (A.B.N. 84 087 400 379) is a tenancy database that records tenants personal information from its members including tenancy application inquiries and tenancy history. In accordance with the National Privacy Principles you are entitled to have access to any personal information that we may hold on any of our databases.

To obtain your information from TICA Default Tenancy Control Pty Ltd, proof of identity will be required and can be made by any of the following ways:

Phone: 1902 220 346 calls are charged at \$5.45 per minute including G.S.T. (Higher from mobile or pay phones).

Mail: TICA Public Inquiries – PO Box 120, Concord NSW 2137 a fee of \$14.30 plus stamped self addressed envelope is required.

PRIMARY PURPOSE

TICA collects information from its members on tenancy related matters and provides such information to other members as a risk management system for the purpose of assessing a tenancy application. TICA does not provide any information that it collects to any other individual or organisation for any other purpose other than assessing a tenancy application or risk management system other than government departments and or agencies allowed by law to obtain information from TICA.

The personal information that TICA may hold is as follows:

- Name
- Date of Birth
- Drivers Licence Number
- Proof of Age Card Number and or Passport Number (Except Australian)
- Comments made by a TICA member in relation to your tenancy
- Which members you rented through and which members you applied to.

FURTHER INFORMATION ABOUT TICA

Full details about TICA can be found on TICA's website at www.tica.com.au under Tenant Information and Privacy Policies or by contacting TICA on our Helpline 1902 220 346 calls are charged at \$5.45 per minute including G.S.T. (Higher from mobile or pay phones). If your personal information is not provided to TICA the member may not proceed with assessing your application and you may not be provided with the rental property.

Applicant 1 Full Name _____ Applicant Signature _____

Applicant 2 Full Name _____ Applicant Signature _____