Tenancy Application Form

Please be advised, this application will only be processed once ALL details have been completed and all copies of all supporting documents attached. Each applicant must submit an individual form.

A. AGENCY DETAILS

Quantum Property Services

Address: Shop 2, 161 Old Pacific Highway, Oxenford QLD 4210

Phone: (07) 5529 9777 Fax: (07) 5529 9500

Email: pm1@qps2000.com - Beau or rentals@qps2000.com - Jessica

B. PROPE	RTY DETAILS	
1. Address of Pro	operty:	
2. Lease Comme	ncement Date:	
	Day	Month Year
3. Lease Term:		
	Years	Months
	nants will occupy the	
Adults	Children	Ages of Children
C. PERSOI	NAL DETAILS	
5. Please give us	your details	
Mr Ms	Miss	Mrs Dr Other
Surname		Given Name/s
Date of Birth		Driver's licence number
Driver's license	avnim data	Driver's licence state
Driver's licence	expiry date	Driver's licence state
Passport no.		Passport country
Pension no. (if a	pplicable)	Pension type (if applicable)
	e your contact details	Mobile phone no.
Home phone no	•	Wobile phone no.
Work phone no.		Fax no.
Email address		
D CONTAC	CTC /BEFERENCES	
	CTS/REFERENCES a contact in case of	omorgongy
Surname	e a contact in case of	Given name/s
Relationship to y	ou	Phone no.
8. Please provide 1. Surname	2 personal reference	es (not related to you) Given name/s
21 3411141116		
Relationship to y	ou	Phone no.
-		
2. Surname		Given name/s
Relationship to y	rou	Phone no.
. ,		



E. APP	LICANT	HISTC	DRY							
9. What is yo	our curren	t resid	ential	addre	ss?					
10. How long	g have you	lived	at you	r curr	ent a	ddress?				
			Yea	ırs					Mont	ths
11. Why are	you leavin	g this	addre	ss?						
12. Landlord	/Agent de	tails of	f this p	roper	ty (if	applicab	le)			
Name of lan	dlord or ag	gent								
Landlord/ag	ent's PHOI	NE	FAX r	numb	er		_	We	ekly Rent	Paid
								\$		
Email addres	SS									
13. What wa	s your pre	vious	reside	ntial a	ddre	ss?				
14. How long	g have you	lived	at you	r prev	ious	address?	•			
			Yea	ırs					Mont	hs
15. Why are	you leavin	g this	addres	ss?						
•	•									
16. Landlord	/Agent de	tails of	f this p	roper	ty (if	applicab	le)			
Name of lan	dlord or ag	gent								
Landlord/ag	ent's PHOI	NE	FAX r	numb	er		_		ekly Rent	Paid
								\$		
Was the bon	d returne	d in ful	ll? If no	ot wh	y not	?				
F. EM	PLOYME	NT H	ISTO	RY						
17. Please pi	•		loyme	nt det	ails					
What is your	occupatio	on?								
What is the	nature of v	our er	mnlovi	mont?) (circ	اما:				
FULL T				ART T		.ie,		CAS	UAL	
Employer's r		L untant i				institution	if stu			
Employer's a	ıddress (ac	countai	nt if sel	f empl	oyed	or instituti	ion if s	student)		
Contact nam	10				Pho	ne no.				
contact nam					FIIO	ile ilo.				
Length of en	nlovment					Net Incor	me			
zengui oi en	Years			Mor		\$				
18 . Please p	l	ır nrov	ious a	Mor		_				
Occupation?	-	ii piev	ious e	inplo	yiiici	it details				
Employer's r	name									
Length of en	ployment	:			_	Net Incor	ne			
	Years			Mor	nths	\$				

9. Please provide details of any pets		
reed/type Council registration / number	٦	
1.		
2.]	
]	
3.		
4.		
	_	
H. UTILITY CONNECTIONS		
Successful applicants will be contacted by one of our Quantum electricity, gas, water and broadband. We can also source oblig services and much more.	=	
		\sim
Please tick this box if you would like Quantum Connect Movologists to contact you in relation to any of the above utilities and other services.	$(\mathbb{A})(\mathcal{Y})(\mathbb{Y})(\mathbb{Y})$	$\mathbf{A})(\mathbf{r})(\mathbf{x})$
DECLARATION:		powered by Movinghu
I consent to the disclosure of this page of the Tenancy Applicati	on Form to Movinghub (ABN 73 603	267 465) for the nurnose
contacting me with regards to services related to moving home	-	207 403/101 the purpose
I acknowledge that neither the Agent or Movinghub accept any	responsibility for the delay in, or fai	lure to arrange or provide fo
any connection or disconnection of a utility, or for any such loss	in connection such delay or failure	
,	s in connection such delay of failure.	
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I acknowledge that the Agent and Movinghub may receive a be	•	
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I acknowledge that the Agent and Movinghub may receive a be By signing this application form, you acknowledge that you are	nefit in relation to any services organ	nised. on from the client to be
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