RayWhite.

Tenancy Application Form

IDENTIFICATION PROPERTY DETAILS Street Address: Drivers Licence No: Passport Number: years months Passport Issuing Country: Lease commencement date: EMERGENCY CONTACT DETAILS Rent: \$ Name: weekly monthly Names of all other applicants: Relationship: Address: Mobile: Number of Occupants Adults: Home Phone: Ages of Children: Work Phone: PERSONAL DETAILS CURRENT TENANCY DETAILS Given name(s): Street Address: Surname: Mobile: Time at Address: years months Home Phone: Rent paid: \$ Reason for Leaving: Work Phone:



Date of Birth:

Let **On The Move** reduce your stress and save you time by arranging your utility connections at the property... at no extra cost! We will contact you within 2 hours to confirm.

Name of Landlord/Agent:

Landlord/Agent Phone:

Landlord/Agent Email:

ELECTRICITY, GAS, TELEPHONE, INTERNET, PAY TV, TENANCY INSURANCE
Ph: 1300 850 360 Fax: 1300 661 160 Email: sales@onthemove.com.au

Terms & Conditions - You are consenting to On The Move contacting you to arrange your services. On The Move may need to disclose personal information to utility companies to arrange your services. Please see On The Move's Privacy Policy at www.onthemove.com.au. On The Move and your Agent may receive a benefit for arranging your services. On The Move and your Agent do not accept responsibility for any delay or failure to connect your services. Standard connection fees and bonds may apply.

No, I will connect the required utilities on my own accord but acknowledge that if the property has a separate water meter
my contact details must be given to the relevant water provider, who will read the meter and commence billing.

PREVIOUS TENANCY DETAILS IF SELF EMPLOYED PLEASE COMPLETE Street Address: Company Name: Suburb: Business Type: Time at Address: From: Business Address: Rent paid: \$ Suburb: Postcode: weekly monthly Name of Landlord/Agent: ABN: Landlord/Agent Phone: Accountant Name: Was the bond refunded in full?: No Accountant Phone: If No, please specify reasons why: Accountant Email: Accountant Street Address: INCOME PROFESSIONAL REFERENCE Employment Income: weekly annually Reference Name: Other Income: weekly annually Relationship: Phone: Other Income source(s): CURRENT EMPLOYMENT DETAILS PERSONAL REFERENCE 1 Reference Name: Business Name: Relationship: Phone: Street Address: Suburb: NEXT OF KIN Contact Name: Given Name(s): Surname: Contact Phone: Relationship: Length of Employment: years Address: PREVIOUS EMPLOYMENT DETAILS Phone: Mobile: Position Held: Email: Business Name: ADDITIONAL INFO Street Address: Pets: Smokers: Yes No Yes No Suburb: Postcode: If yes, please state: Pet type: Contact Name:

Council registration:

From:

Contact Phone:

Length of Employment

SUPPORTING DOCUMENTS

Provide 100 points of identification photocopied and attached to this application.

80 pts	Drivers License
80 pts	Passport Photo Page
20 pts	Other Photo ID
20 pts	Medicare Card
20 pts	Telephone/ Electricty / Gas Account

REQUIRED DOCUMENTS

We are unable to process your application until all applicable documents are received,

FULL Recent Bank Statement	(Mandatory for all applicants)
Employed - 3x most recent pay slips	
Unemployed - Centrelink income state	ement
Self Employed - Most recent tax retur	n
Home Owner - Rates notice and detai	ls of selling agent

PAYMENT DECLARATION

I, the Applicant, hereby offer to rent the property from the owner under a lease to be prepared by the Agent. Should this application be approved, I acknowledge that I will be required to pay the following amounts:

Rent amount: \$	weekly	monthly
First payment of rent in advance:	\$	
Rental Bond:	\$	
Subtotal:	\$	
Amount payable upon signing Tenancy Agreement:	\$	

PRIVACY POLICY

CONSENT