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Residential Tenancy Application Form

Proposed Property Address: _____ Rent p/w: \$ _____

Length Of Tenancy: ☐ 6 Months (26wks) ☐ 12 months (52wks) ☐ Other: _____ Commencing: _____

First Name: _____ Middle Name: _____

Family/last Name: _____ Previous family/last name (if applicable): _____

Date of Birth: _____ Marital Status: _____ 18+ Card No.: _____

Drivers License No.: _____ State: _____ Vehicle Rego. No.: _____ State: _____

No. of cars/bikes to be park on premise: _____ Car/s ☐ Bike's ☐

Make, Model and Colour _____

Current Address: _____

Home Phone No.: _____ Work No.: _____

Mobile No.: _____ Email Address: _____

Occupation: _____ Medicare No.: _____

Are you or any of the dependents residing with you, smokers? ☐ Yes ☐ NoThe properties managed by this office may be protected by the Barclay MIS Protect & Collect Plan.Required if application successful: **48 hours after** notification, Rent (2 wks in advance) & Bond (equivalent to no less than 4 wks rent)

DEFENCE CLAUSE: Yes / No **REGISTERED WITH TERRITORY HOUSING:** Yes / No

WILL YOU BE PROPOSING TO RUN A BUSINESS FROM THE PROPERTY? Yes / No

If 'Yes', please provide the following details on a separate piece of paper:
What is the nature of the business? Do you have the relevant Insurance coverage? Do you have the relevant Government approval?

PLEASE NOTE: if the relevant documentation is not provided at application stage, then Landlord has NOT given permission for the above

COMPANY OR BUSINESS LEASE: (Confirmation letter to be provided on business letterhead, from person who will be signing the Lease). Yes / No

Note: please fill in 'Company or Business Lease' Form attached, if Yes has been circled.

******Before any application will be considered, you must achieve a minimum of 100 points, please provide copies****

Type of I.D.

No. of Points

Attached

Copy Of Rates Notice (if owned property) or Rent Ledger from current managing agent *must supply one	20	Points Value____
PROOF OF INCOME: A) Last 2 payslips. B) If self-employed- current bank statement; accountant contact details; previous tax return. C) If on Centrelink benefits, statement required and a copy of the Health Care Card.	15	Points Value____
Driver's License	30	Points Value____
Photo I.D. (18+ card)	30	Points Value____
Passport / Birth Certificate / Name change Certificate	30	Points Value____
Current car/bike registration papers	15	Points Value____
Copy of phone, electricity and/or gas accounts	15 each	Points Value____
Medicare Card, Bank Card/Statement, Credit Card, Private Health Care Card	15	Points Value____

Employment Details - NB: Weekly rent represents _____ % of your total income.If you are employed are you Full Time ☐ Part Time ☐ Casual ☐ Contract ☐

Company Name: _____ Contact Person: _____

Email _____ Ph Number: _____

How long have you worked there: _____ Nett Weekly Income (excl. over time): \$ _____

If employed less than 6 months please provide previous employer: _____

Address: _____ Email: _____

Length of employment: _____ Position held: _____

If you are self-employed

Registered name of business: _____ ABN: _____

Address: _____ Type of business: _____

Phone Number: _____ Personal Nett Income p/week: \$ _____

Name of Accountant: _____ Phone number: _____

Length of time in business: _____ List one major creditor: _____

If you are a student are you ☐ Full Time ☐ Part TimeAre you an overseas student ☐ Yes ☐ No If yes visa expiry date is : ____/____/____

Name of learning institution: _____ Department: _____

Student union number: _____ Student ID number: _____

Income Source: _____ Contact: _____ Nett Wkly income: _____

If you receive a Centrelink payment total amount received weekly (total payments): \$ _____Type Of Payment: _____ CRN Number: _____ Copy Of Card ☐ AttachedYour Rental History

Current Agent/Landlord: _____ Email: _____

Address of rented property: _____ Date vacated: ____/____/____

Rent per week: \$ _____ Period of tenancy: _____ Reason for leaving: _____

Was the bond refunded in full ☐ Yes ☐ No If no why: _____Previous Agent/Landlord: _____ Ph: _____

Address of rented property: _____ Date vacated: ____/____/____

Rent per week: \$ _____ Period of tenancy: _____ Agents Email: _____

Was the bond refunded in full ☐ Yes ☐ No If no why: _____Emergency Contact (not residing with you)

Name: _____ Relationship: _____

Address: _____ Phone: _____

References

Please complete all 5 references requested below, please do not use the same contact twice and do not use the same person as your emergency contact. Your 5 references should include, parent or guardian, family members not living with you, personal friends (must be Australian residents) and if self-employed at least one established trade or business reference.

1. Name: _____ Relationship: _____

Address: _____ Known for: _____ years/months

Hm Phone: _____ Mobile: _____ Relationship: _____

2. Name: _____ Relationship: _____

Address: _____ Known for: _____ years/months

Hm Phone: _____ Mobile: _____ Relationship: _____

3. Name: _____ Relationship: _____

Address: _____ Known for: _____ years/months

Hm Phone: _____ Mobile: _____ Relationship: _____

4. Name: _____ Relationship: _____

Address: _____ Known for: _____ years/months

Hm Phone: _____ Mobile: _____ Relationship: _____

5. Name: _____ Relationship: _____

Address: _____ Known for: _____ years/months

Hm Phone: _____ Mobile: _____ Relationship: _____

Will dependents reside at the property? ☐ Yes ☐ No If yes how many: _____ please list their names and ages: _____

Will there be any other persons living at the property? ☐ Yes ☐ No

If yes who: _____

Have they completed at Tenancy Application Form? ☐ Yes ☐ No

If no why? _____

Do you have any pets? ☐ Yes ☐ No - If yes how many and what type: _____

Do you intend to have pets residing at the property please complete a separate **'Pet Application'** form and attach herewith.

Do you own a lawnmower? ☐ Yes ☐ No If no how do you intend to care for the lawns? _____

Do you require approval for a storage container(shipping container), caravan etc to be stored at the property YES/NO

Disclaimer / Authority

I, the said applicant, do solemnly and sincerely declare that the information contained in this application is true and correct and that all of the information was given of my own free will. I further consent to the lessor/agent contacting and /or conducting any enquiries and/ or searches with regard to the information and references supplied in this application. I am also aware that copies of the 100 points ID will be kept on file with this application.

I, the said applicant, do solemnly and sincerely declare that I am over 18 years of age and have read and understand the contents of this agreement and have the competence and capacity to enter into this agreement. I further declare that I have inspected the property located at _____.

1. I have, of my own accord, decided that I wish to rent the aforementioned property commencing _____/_____/_____ for a period of _____ months.
2. I have been informed, understand and agree that the rental for the said property is to be \$_____ per week and is within my means.
3. (i) I have been informed, understand and agree that the rental for the said property is to be paid **Weekly** or **Fortnightly** and is to be paid before the due date **at all times**.
(ii) I have been informed, understand and agree that the lessor/agent will carry out an inspection on the property on a **3 monthly basis** and I further warrant that I will cooperate fully to allow this inspection to be carried out.
4. ☐ I have been informed, understand and agree that the acceptance of my application is subject to a satisfactory report being obtained from information supplied on the fully completed Tenancy Application submitted by me. I further consent to the agent carrying out any enquiries necessary to process my application for tenancy.
5. ☐ I have been informed, understand and agree that should the landlord be put to any expense or expend any moneys during the currency of the Tenancy Agreement or at the expiration of the Tenancy Agreement as a consequence of a breach by me in the performance and observance of my obligations under the Tenancy Agreement (including but not limited to : evictions, payment of rent, maintenance of the premises, making good any damage to the premises), that all and any such moneys expended by the landlord shall be recoverable from me and payable by me, including, but not limited to, legal fees, mercantile agents fees, accountants fees, etc..I further consent to the agent disclosing all personal information that they may hold for the purpose of:
 - listing my name with a database as a result of a tribunal order
 - enforcing a tribunal order
 - Commencing recovery action in relation to any debt owed as a result of outstanding rent, repairs and/or damage that occurred or occurs during my period of tenancy.

*** Please initial clauses 5 & 6**

6. I have been informed and understand that this property may be covered by the Barclay MIS Protect & Collect Plan and in this case, I further consent to the agent supplying my personal information to Barclay MIS Protect & Collect Pty Ltd.
7. I have been informed, understand and agree that should this application not be accepted, the agent is not required or obliged to disclose why or supply any reason for the rejection of this application unless the application is declined as a result of my name being listed with a tenancy data base.
8. I have been informed, understand and consent to the agent supplying all necessary information, as may be required, to any Tenancy Data Base/s that they use, subject to the Tenancy Data Base/s complying with the provisions of the Privacy Act. Furthermore I have read, understand and accept the agents Privacy Statement.
9. I have been informed, understand and acknowledge that the agent has the contact details for the Tenancy Data Base/s they use and that the agent will supply these contacts should I request them.

*** Have you initialled clauses 5 & 6?**

Applicants Full Name: _____

Applicants Signature: _____ Date: _____

Signature: _____ Date: _____

COMPANY OR BUSINESS LEASE: (Letterhead document to be provide)

NAME (Company or Business):	
PHYSICAL ADDRESS: physical	
ACN OR ABN:	DATE FORMED:
REPRESENTATIVE RESPONSIBLE FOR SIGNING THE LEASE:	
POSITION HELD:	
PHONE:	FAX:
EMAIL 1:	EMAIL 2:
ACCOUNTANT:	CONTACT:
ACCOUNTANTS ADDRESS:	
PHONE:	FAX:
EMAIL:	

Any other comments:

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