Residential Application Form

For your application to be processed you must answer all questions (including the reverse side).



 What is the address of the pre- 	operty you wou	ıld like to	rent?	
The trib and address of the pr	oponty you woo	iid iiito to	Totic.	
	Postcode			41
Second preference rental addre	ess			on th
	Postcode			mo
2. Have you inspected the prope	The same former is a second] No		
3. Do you accept the property in its current condition?		□ No		☐ YES!! □
4. Lease commencement date?	5. Lease Te	erm?		☑ Water (
6. Property Rental?		Years	Months	ELECTRICITY
\$ per week	\$		per calendar month	Ph: 13
7. How many people will normal	ly occupy the p	roperty?		Terms & Conditions
	ldren Ages	S:		The Move contacting to disclose personal i
8. Do you smoke? ☐ Yes ☐ N	10			Please see On The M On The Move and you
Please provide details of any Breed / Type	pets. Council re	egistratio	n number	On The Move and you to connect your service
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
10. How did you find out about t	he property?			F. DECLARATION
☐ Internet ☐ Board ☐ Relo	cation Compan	y 🗆 Re	eferral	I hereby offer to re- be prepared by the
☐ Other (please specify)				the landlord I agree
B. PERSONAL DETAILS		12 70		I acknowledge that
11. Please give us your details.				owner/landlord. I d
\square Dr \square Mr \square Mrs \square Ms	☐ Miss ☐ Of	her		will. I declare that I
Surname	First name	9		I authorise the Age
Date of birth	Driver's lic	cence nu	mber	(a) the owner or the (b) my personal record, list if I default under a
Driver's licence state	Driver's lic	cence ex	piry	any such default to of properties I may I am aware that the
Passport number	Passport	country		in order to:
12. Plagge provide your contact	dataila			(a) communicate (b) prepare lease/
12. Please provide your contact Home phone number	Mobile ph	one num	ber	(c) allow organisa (d) lodge/claim/tra (e) refer to Tribuna
Work phone number				(f) refer to collecti
				Phone 1300 56
Email address				(h) transfer water I am aware that if ir
				uses to which person
C. IF YOU ARE A STUDENT, PL	EASE COMPLI	ETE THE	FOLLOWING	I have read, unders
13. Name of Institution.				provided to me. If Section E is comp
14. Course Undertaken.				application form to of Move to offer the co
15. Enrolment number.	16. Cours	e Co-ord	inator.	to On The Move dis me to utility service of the connection of Move nor the Agent
17. Source of income support.				arrange or provide to
				☐ I acknowledge t
D. SOCIAL SECURITY INFORM	ATION			
18. Type.				Print Name
				Signature
\$ per week	\$		per calendar month	

ECTIONS 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. would like On The Move to contact me. Standard connection for all applications). GAS. TELEPHONE, INTERNET, FOXTEL TENANT'S INSURANCE 00 850 360 Fax: 1300 661 160 - By ticking the box above you are consenting to On ou to arrange your services. On The Move may need formation to utility companies to arrange your services. ove's Privacy Policy at www.onthemove.c agent may receive a benefit for arranging your services. Agent do not accept responsibility for any delay or failure es. Standard connection fees and bonds may apply. OF APPLICANT

nt the property from the owner under a lease to Agent. Should this application be accepted by to enter into a Residential Tenancies Agreement idential Tenancies Act 1997.

this application is subject to the approval of the clare that all information contained in this application se side) is true and correct and given of my own free have inspected the premises and am not bankrupt.

nt to obtain personal information from:

- e Agent of my current or previous residence;
- ferees and employer/s;
- ng or database of defaults by tenants;

ental agreement, the Agent may disclose details of a tenancy default database, and to agents/landlords apply for in the future.

Agent will use and disclose my personal information

- vith the owner and select a tenant
- enancy documents
- ions/tradespeople to contact me
- sfer to/from the Residential Tenancies Bond Authority
- Is/Courts & Statutory Authorities (where applicable)
- on agents/lawyers (where applicable)
- dit check with NTD (National Tenancies Database 3 826 - Email info@ntd.net.au)
- ccount details into my name

formation is not provided or I do not consent to the onal information is put, the Agent cannot provide me cv of the premises.

tood and agree to the Tenant Privacy Statement

leted, I consent to the disclosure of this page of the On The Move for the purpose of enabling On The nnection and disconnection services to me. I consent closing personal information it has collected about providers for that purpose and to obtain confirmation disconnection. I acknowledge that neither On The accept any responsibility for any delay in, or failure to or, any connection or disconnection of a utility, or for

any loss in connection with such t	delay or failure.
☐ I acknowledge that I have read	d and understood this privacy statement.
Print Name	
Signature	Date

G. APPLICANT RENTAL HISTORY	I. PREVIOUS EMPLOYMENT DETAILS		
19. What is your current address?	30. Please provide your previous employment details.		
	What is your occupation?		
Destrode			
Postcode	What is the nature of your employment?		
20. How long have you lived at this address? Years Months	☐ FULL-TIME ☐ PART-TIME ☐ CASUAL Employer's name (inc. accountant if self-employed or institution if a student)		
21. Why are you leaving this address?	Employer's name (inc. accounts	ant if self-employed or institution if a student,	
21. Willy are you leaving this address:	Employer's address		
	Employer's address		
22. Is the property at this address:		Postcode	
☐ Rented ► Go to question 23 ☐ Owned ► Go to question 24	Employer Contact	Phone number (landline)	
☐ Other - Please provide details	Employer Contact	Thore number (landine)	
23. Please tell us about this rented property.			
Name of agent			
Name of agent	J. EMERGENCY CONTACT		
	31. Please provide a contact in		
Landlord/agent's address	Name	Surname	
Landlord/agent's phone number Weekly rent paid	Relationship to you	Phone / Mobile	
\$			
24. What was your previous residential address?			
24. What was your previous residential address:	K. REFERENCES		
	32. Please provide two persona	al references (not related to you).	
25. How long did you live at this address? Years Months	1. Name	Surname	
26. Why did you leave this address?	Relationship to you	Phone / Mobile	
27. Was this property:	2. Name	Surname	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
☐ Rented ► Go to question 28 ☐ Owned ► Go to question 29	Relationship to you	Phone / Mobile	
☐ Other - Please provide details			
28. Please give us further information about this rented property.			
Name of landlord or agent	L. OTHER INFORMATION		
	33. Car Registration.		
Landlord/agent's phone number Weekly rent paid			
\$	PLEASE NOTE		
Was bond refunded in full? ☐ YES ☐ NO		by bank cheque or money order	
If NO, why?		of application. No personal cheques	
		nd. Our methods for rental payments	
H. EMPLOYMENT HISTORY	are Direct Debit, DEFT or BPay Manager upon approval what y		
29. Please provide your employment details.	Keys will not be handed over un	ntil the lease agreement has been	
What is your occupation?	signed by all parties and first m	onth rent and bond has been paid.	
		bject to the availability of the property	
		shall be taken by the applicant against uld any cicumstances arise whereby	
What is the nature of your employment?	the property is not available for		
□ FULL-TIME □ PART-TIME □ CASUAL		4	
Employer's name (inc. accountant if self-employed or institution if a student)	PLEASE PROVIDE US WITH	100 POINTS OF ID	
	Applicants must supply a minin	num of two (2) types of identification	
	from the list below with a minim	num of 100 points. ID must include at	
Employer's address	least 1 type of Photo ID plus ID	that contains the applicants current	
	residential address and date of		
Postcode	Driver's Licence or Passport	50 50	
Employer Contact Phone number (landline)	Proof of Age Card (Keypass) Student ID Card	50	
	Copy of Mobile Phone Account	50	
	Copy of Medicare Card	20	
Length of Employment Net Income (annual)	Concession / Pension Card	10	
Years Months \$	Copy of Gas / Water / Electricity Ac		