# Application for Residential Tenancy (One application to be completed per person)



Part 1	Rental Property Details	
Item 1:	Agent Details	
	Agency name:	
	KATTAY PTY LTD TRADING AS Q STATE PROPERTIES	
	Address:	
	PO BOX 32 BEAUDESERT QLD 4285	
	Phone: Mobile: Fax	:
		543 3854
	Email: ADMIN@QSTATEPROPERTIES.COM.AU	
Item 2:	Property Details	
	Property address	
	Rent   \$   a week   a fortnight   a month   E	Bond \$
	Tenancy term Insert "fixed term agreemen	t" or "periodic agreement".
	Starting on / / Ending on / /	
Part 2	Applicant Details	
Item 3:	Contact Details	
	Full name	Date of Birth
	Have you been known by any other name(s)? Yes No	
	If Yes, what other name(s) have you been known by?	
	Work phone Mobile Hon	ne phone
	Email:	
	Driver's licence/Passport number Stat	e
	Number of vehicles   Registration number(s)	
Item 4:	Dependants	
	Do you have any dependants? 🗌 Yes 🗌 No	
	Dependant full name(s) Relationship to Applicar	nt Dependant Date of Birth
Item 5:	Smoking	
nem J.	Smoking Are you or any of the dependants living with you a smoker? Yes No	
Item 6:	Pets	
	Do you intend to keep pets at the property? Yes No	
	Number of pets Type of pet/s	
	Are your pets registered with a council? Yes No	
	If Yes, please state which council:	
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# Item 7: Applicants Address History

Period of occupancy	Type of occupancy:
Current Agent/Lessor (if renting)	Agent/Lessor phone
Current rent	Reason for leaving:
\$ a week a fortni	ight a month
Previous residential address	
Period of occupancy	Type of occupancy:
	Rent Owner Other >
Previous Agent/Lessor	Agent/Lessor phone
	Reason for leaving:
\$ a week a fortni	ight a month
<b>Employment Details</b>	
	(if no, please provide details of previous employer, if any)
Employment status: 🗌 Full Time 🗌	Part Time Casual Contract Self employed
Occupation	Net income (per week
	\$
Occupation Date commenced employment (appro	\$
	\$
Date commenced employment (appro Employer/Business Name	Date terminated employment (if any)
Date commenced employment (appro	\$
Date commenced employment (appro Employer/Business Name Address	Date terminated employment (if any)
Date commenced employment (appro Employer/Business Name	Date terminated employment (if any)
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name	Date terminated employment (if any)
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name Centrelink Payments	S         Date terminated employment (if any)         Phone         Phone         Phone
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name <b>Centrelink Payments</b> Are you receiving any regular Centreli	S         Date terminated employment (if any)         Phone         Phone         Phone
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name Centrelink Payments	S         Date terminated employment (if any)         Phone         Phone         Phone
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name Centrelink Payments Are you receiving any regular Centreli Description of payment(s) Total income (per week)	S         Date terminated employment (if any)         Phone         Phone         Phone
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name <b>Centrelink Payments</b> Are you receiving any regular Centreli Description of payment(s)	Date terminated employment (if any)  Date terminated employment (if any)  Phone Phone Phone No
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name Centrelink Payments Are you receiving any regular Centreli Description of payment(s) Total income (per week)	Date terminated employment (if any)  Date terminated employment (if any)  Phone Phone Phone No
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name Centrelink Payments Are you receiving any regular Centreli Description of payment(s) Total income (per week) \$ Student Details	Date terminated employment (if any)  Date terminated employment (if any)  Phone Phone Phone No
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name Centrelink Payments Are you receiving any regular Centreli Description of payment(s) Total income (per week) \$ Student Details	S   Date terminated employment (if any)     Phone   Phone   Phone     Phone     Oute payments commenced     Yes     No
Date commenced employment (appro Employer/Business Name Address If self employed, Accountant's Name Centrelink Payments Are you receiving any regular Centreli Description of payment(s) Total income (per week) \$ Student Details Are you studying full time?	S   Date terminated employment (if any)     Phone   Phone   Phone     Phone     Oute payments commenced     Yes     No

### Item 11: Personal References

Please do not list relatives, another applicant or partners and provide business hours contact numbers.

Referee 1	Relationship
Address	Phone/Mobile
Referee 2	Relationship
Address	Phone/Mobile
Personal Representative	

i.e. preferred person(s) to be contacted in the event of an emergency.

Representative 1	Relationship
Address	Phone
Representative 2	Relationship
Address	Phone

## Part 3 Supporting Documents

#### Item 13: Identification

Item 12

You are required to meet a 100 point identification criterion upon submission of your application. The agent/lessor may photocopy any item and retain as part of your application.

Please tick the identifying documents you have provided with your application.

#### IMPORTANT: At least one form of Photo Identification MUST be provided.

	70 Points		Full birth certificate	Citizenship certificate	
	40 Points				
	Australian drive		Student Photo ID Proof of age card	<ul> <li>Department of Veterans Affairs card</li> <li>State/Federal Government Photo ID</li> </ul>	
	25 Points				
	Medicare card		Council rates notice	Motor vehicle registration	
	Telephone bill		Electricity bill	Gas bill	
	Tenancy Histor	ry Ledger	Bank statement	Credit card statement	
	Last FOUR rer	nt receipts	Rent bond receipt	Previous tenancy agreement	
Item 14:	Proof of Income				
	You are also requi	red to supply	the agent/lessor with proof c	of your income upon submission of your application	n.
	Employed: Self employed: Not employed:	Last TWO p Bank Staten Centrelink S	nents, Group Certificate, Tax	ax Return or Accountant's letter.	

# Part 4 | Declaration

Part

	ease declare the following by selecting either TRUE or FALSE I, the Applicant,		
1.	have never been evicted by an agent/lessor	True	F
2.	have no known reasons that would affect my ability to pay rent	True	F
3.	was refunded the rental bond for my last address in full (if applicable) If false, please advise what deductions were made from your bond?	True	F
4.	have no outstanding debt to another agent/lessor? If false, why are you in debt to your past agent/lessor?	True	F
	<b>cknowledgement</b> ease acknoweldge the following by selecting either Yes or No		
1.	acknowledge that my personal contents insurance is not covered under any lessor insurance policy/s and understand that it is my responsibility to insure my own personal belongings.	Yes	<u> </u>
2.	understand that you as the agent/lessor have collected this information for the purpose of determining whether I am a suitable tenant for the property - in particular to check my identification, my ability to care for the property, my character and my creditworthiness.	Yes	<u> </u>
	2.1 for such purposes, I authorise you to contact the persons named in this application, and to undertake such enquiries and searches (including tenancy databases searches) as you consider reasonably necessary.	Yes	
	2.2 in doing so, I understand that information provided by me may be disclosed to, and further information obtained from, referees named in this application and other relevant third parties.	Yes	<u> </u>
3.	acknowledge and accept that if this application is denied, the agent is not legally obliged to provide reasons as to why.	Yes	<u> </u>
4.	consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the agent/lessor to pass my details onto others which may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases.	Yes	<u> </u>
5.	acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), the standard terms and any special terms before completing this application.	Yes	<u> </u>
	acknowledge that I have received or have available the Information Statement (Form 17a), body corporate by-laws (if applicable) before completing this application.	Yes	
6.			
	acknowledge that I have signed the agency's Privacy Notice and Consent.	Yes	<u> </u>
7.	acknowledge that I have signed the agency's Privacy Notice and Consent. acknowledge that the lessor and applicant (tenant) are bound by this agreement immediately upon communication of either the lessor or agent's acceptance of the application.	Yes Yes	
7. 8.	acknowledge that the lessor and applicant (tenant) are bound by this agreement immediately upon		       

Signature

Date