

## RENTAL APPLICATION

**ELDERS REAL ESTATE WILLUNGA** 

# Proof of identification & income check

We require <u>each applicant</u> to provide the following identification, as well as proof of income statements (to confirm the rent is affordable for the applicant).

* Photo ID (at least 1 types):  ☐ Current Driver's Licence ☐ Proof of Age card—with photo	□ Passport (Current & Valid) □ Tertiary Education photo ID	
* Utilities bill (at least 2 types) showing Name & Address:		
□ Phone bill □ Council rates □ Current Agent Rent History Led୍	☐ Electricity or Gas bill ☐ Current Vehicle registration ger	
Extra optional identification documents showing Name & Address:  ☐ Centrelink / Pension Concession card ☐ Medicare		
* Proof of Income:		
☐ Bank statement (last months) ☐ Centrelink Statement of Income ☐ Payslips		

Your application will be processed with the information provided and submitted to the landlord for their acceptance or non-acceptance for tenancy. This is always a landlord decision. We are unable to give reasons for non-acceptance by a landlord.

IF YOUR APPLICATION IS SUCCESSFUL, you will be asked to pay the Bond and the first 2 weeks rent and sign the Lease as soon as possible. \*\* Water charges may apply — please check with the Property Manager.

#### **Utilities**

\* Required

Connection of electricity, telephone and gas to the property, is the responsibility of the tenant. If you require assistance, please let us know and we can refer you to our connection service.

**Elders Property Management** 

Willunga Office

4/41 High Street Willunga SA 5172 08 8550 3300

#### **BOND REQUIRED**

3x weeks

Bond equivalent to 4 weeks rent is required (+ 2 weeks rent up front)



### **APPLICATION FOR RESIDENTIAL TENANCY**

The Agent -	ELDERS Real Estate Willunga	
APPLICANTS NAMES -	1	
	2	
PROPERTY REQUIREME	ENTS -	
PROPERTY ADDRESS (If	If known)	
LOCATION	COMMENCEMENT DATE	
NO. BEDROOMS	TO Per week LEASE TER	.M 6 / 12 MONTHS
OTHER REQUIREMENTS	S	
	Diagonia di agrico de la companya de	
Please indicate now you	u propose to pay your bond: Please indicate how you propose to pa	y your initial rent:
□Own funds □ Borrowed	ed Funds ☐ Housing SA ☐ Own funds ☐ Borrowed Funds ☐ Hou	using SA
IMPORTANT- PLI	LEASE READ CAREFULLY	
2. that the terms and conditions conditions. 3. that upon viewing the property not to proceed, the agent will be Tenancies Act 1995. 4. That unless agreed otherwise basis. 5. Please Note: Our tenancy agre! I hereby offer to rent the propert! Into a Residential Tenancy Agree! I acknowledge that this applicatic I declare that I am not bankrupt. I authorise the Agent to obtain pe (a) The owner or the Agent of my (b) My personal referees and em (c) Any record listing or database! If I default under a rental agreem erties! I may apply for in the future! I am aware that the Agent will us: (a) communicate with the owner (b) prepare lease/tenancy docum (c) allow tradespeople or equivale (d) lodge/claim/transfer to/from a (e) refer to Tribunals/Courts & St (f) refer to collection agents/lawy (g) complete a credit check with I am aware that if information is	tion is subject to the approval of the owner/landlord. Intained in this three paged application is true and correct and given of my own free will. It. It. It. It. It. It. It. It. It. It	If the tenant agrees with these terms and ent is created and if the tenant(s) choose reletting as set down by the Residential elations. Costs to be calculated on a daily accepted by the landlord I agree to enter latabase, and to agents/landlords of prop-
SIGNATURES REQUIRED		
SIGNATURE	DATE/	
SIGNATURE	DATE/	

WE ARE UNABLE TO PROCESS THIS APPLICATION UNLESS ALL DETAILS ARE FULLY COMPLETED, PRIVACY ACT ACKNOWLEDGEMENT SIGNED, REQUESTED COPIES OF IDENTIFICATION AND PROOF OF INCOME IS RECEIVED



PERSON 1	PERSON 2
*(Mr/Mrs/Ms/Miss) Surname	*(Mr/Mrs/Ms/Miss) Surname
Given Names	Given Names
Age: years Date of Birth/	Age: years Date of Birth/
REQUIRE AT LEAST 2 CONTACT NUMBERS OR EMAIL	REQUIRE AT LEAST 2 CONTACT NUMBERS OR EMAIL
CONTACT Home	CONTACT Home
NUMBERS: Work	Numbers: Work
Mobile	Mobile
Email Address	Email Address
RENTAL HISTORY	RENTAL HISTORY
Please circle	Please circle
Are you <b>RENTING</b> or <b>OWN HOME</b> or <b>LIVING WITH FAMILY/FRIENDS</b>	Are you RENTING or OWN HOME or LIVING WITH FAMILY/FRIENDS
Current Address	Current Address
Start Date/ End/ Rent per week \$	Start Date/ End/ Rent per week \$
Landlord/Agent	Landlord/Agent
Phone	Page for vegeting
Reason for vacating	Reason for vacating
PREVIOUS LANDLORD/AGENT	PREVIOUS LANDLORD/AGENT
Previous Rental Address	Previous Rental Address
Start Date/ End/ Rent per week \$	Start Date/ End/ Rent per week \$
Landlord/Agent	Landlord/Agent
Phone	Phone
Reason for vacating.	Reason for vacating
Was bond fully refund YES / NO	Was bond fully refund YES / NO
If no, why not	If no, why not
PETS— If this question is not answered, we will assur	me you have NO PETS and pets will not be approved
Please supply full details of all pets (Breed, Age, Do	he pet(s) come inside— YES / NO esexed, Name)



#### **CURRENT EMPLOYMENT CURRENT EMPLOYMENT** Position/Occupation. Position/Occupation..... Business Name ..... Business Name Business Address ..... Business Address Supervisor/Manager..... Supervisor/Manager..... Phone (Work) ...... (M) ..... Phone (Work) ..... (M) ..... Length of Service ..... Casual / Part Time / Full Time Length of Service ..... Casual / Part Time / Full Time Income \$.....per week / fortnight Income \$.....per week / fortnight AND/OR OTHER INCOME AND/OR OTHER INCOME 1. Income \$.....per week / fortnight 1. Income \$.....per week / fortnight Income Source - Centrelink / Child Support / Other Income Source - Centrelink / Child Support / Other If other please specify ..... If other please specify ..... 2. Income \$.....per week / fortnight 2. Income \$.....per week / fortnight Income Source - Centrelink / Child Support / Other Income Source - Centrelink / Child Support / Other If other please specify ..... If other please specify ...... PREVIOUS EMPLOYMENT PREVIOUS EMPLOYMENT Position/Occupation..... Position/Occupation.... Business Name ..... Business Name ..... Business Address Business Address ..... Supervisor/Manager..... Supervisor/Manager..... Phone (Work) ...... (M) ..... Phone (Work) ...... (M) ..... Length of Service ..... \*months/years Length of Service ..... \*months/years Income \$.....per week gross Income \$.....per week gross **EMERGENCY CONTACT EMERGENCY CONTACT** (NOT LIVING WITH YOU) (NOT LIVING WITH YOU) Name Name Address..... Address..... Relationship to you..... Relationship to you..... Phone (H) ..... (W) ..... Phone (H) ..... (W) ..... Mobile ......Other..... Mobile ......Other.... FULL NAMES / AGES OF ANY OTHER PERSONS WHO WILL OCCUPY THE PREMISES Please note –all persons 18 years of age or over must fill in the application form as an applicant.

Name :..... Age ...... Age .....