

360) PROPERTY MANAGEMENT

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***NOTE – ONE APPLICATION FORM MUST BE COMPLETED FOR EACH OCCUPANT OVER 18**

Property Details:

Date: ___/___/___

Address: _____

Rent Amount per week: \$ _____

Date to Commence Lease: _____ Term of Lease: 6 months or 12 months

How many Adults _____ will be residing at the property?

How many Children under 18 will be residing at the property? (*Please provide ages of all children under 18): _____

Pets: Yes No If yes Pet Application on pages 7 & 8 MUST be completed

Applicant:

Full Name: _____

Previous Name (if applicable): _____

Date of Birth: _____ Drivers License Number: _____

I.D 18+Card: _____ Passport: _____

Medicare Card #: _____ Vehicle Registration #: _____

Home Phone Number: _____ Mobile Number: _____

Email: _____

Current Residential Situation:

Are you Owner Renter other (please specify) _____

Address: _____

If Owner, what will you be doing with your property?

Rent, Private or Real Estate? Sell, Private or Real estate?

How long have you lived at your current address? _____ Years _____ Months

Name if Agent/Landlord (If applicable) _____

Phone number: _____ Rent paid per week: \$ _____

Reason for leaving: _____

Was bond repaid in full? Yes No

If No, please specify _____

NOTE - *Please Supply at least 2 years worth of tenancy history

Previous Residential Details:

Did you Own Rent other (please specify) _____

Address: _____

How long did you live at this address? _____ Years _____ Months

Name of Agent/Landlord (if applicable) _____

Phone Number: _____ Rent Paid per week: \$ _____

Reason for leaving: _____

Was bond refunded in full? Yes No

(If no, please specify): _____

Previous Residential Details:

Did you Own Rent other (please specify) _____

Address: _____

How long did you live at this address? _____ Years _____ Months

Name of Agent/Landlord (if applicable) _____

Phone Number: _____ Rent Paid per week: \$ _____

Reason for leaving: _____

Was bond refunded in full? Yes No

(If no, please specify): _____

Current Employment:

Occupation: _____ Full Time Part Time Casual

Employers Name (company): _____

Business address: _____

Contact Name (manager): _____ Telephone: _____

Date Commenced: _____

Nett Income (after Tax) (excl overtime) \$ _____ per Week Fortnight Month

Previous employment:

Occupation: _____ Full Time Part Time Casual

Employers Name (company): _____

Business address: _____

Contact Name (manager): _____ Telephone: _____

Date Commenced: _____ Date Finished: _____

Nett Income (after Tax) (excl overtime) \$ _____ per Week Fortnight Month

If self employed (please attach a business card)

Name of Business: _____ ABN: _____

Business Address: _____

Phone Number: _____ Industry: _____

Length of time in Business: _____ month's _____ years

List one major creditor: _____ Phone: _____

Accountant Name: _____ Phone: _____

Last tax return statement or profit & loss statement or bank statement (please attach)

Students- Please attach Student ID card

Institution: _____ Student ID #: _____

Faculty/ Department: _____

Expected duration: _____ Income Source: _____

Nett Income (after Tax) (excl overtime) \$ _____ per Week Fortnight Month

Centrelink Recipient

Type of Payment & CRN: _____

Total Centrelink Payment/Fortnight _____

Will you be applying for a bond loan? Y/N Will you be applying for rent assistance? Y/N

References:

Complete all 3 Reference Blocks Below and include either of the following:

- 1) Your parents or guardians
- 2) Your nearest relative not living with you
- 3) At least 2 must be permanent residents of Australia
- 4) At least 1 established trade, business or colleague reference
- 5) Same person must not be used twice

Name: _____ **Relationship:** _____

Home Ph: _____ **Mobile Ph:** _____ **Business Ph:** _____

How long known: _____

Name: _____ **Relationship:** _____

Home Ph: _____ **Mobile Ph:** _____ **Business Ph:** _____

How long known: _____

Name: _____ **Relationship:** _____

Home Ph: _____ **Mobile Ph:** _____ **Business Ph:** _____

How long known: _____

Emergency contact details- (must not reside with you)

1) Name: _____

Address: _____

Phone: _____ **Relationship:** _____

2) Name: _____

Address: _____

Phone: _____ **Relationship:** _____

Disclaimer/Authority: Please read before signing

- 1) I, the said applicant, do solemnly declare that the information provided in this application is true and correct and that all of the information given was of my own free will.
- 2) I consent to the lessor/agent contacting and/or conducting any enquiries and/or searches with regard to the information and references supplied which is required to process my application for tenancy.
- 3) I, the said applicant, do solemnly declare that I am over the age of 18 years
- 4) I confirm I have inspected the said property I am applying for and found it to be in a reasonably clean condition (applicable unless a Sight Unseen form is attached)
- 5) I have been informed, understand and agree that the rental for the said property is \$_____per week and is within my means of support
- 6) I acknowledge that this is an application to rent the said property and that it is subject to the landlords' final approval. I understand and agree that should this application not be accepted, the agent is not required or obligated 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 default database
- 7) I acknowledge, understand and agree that should my application be successful, I will pay a two week holding deposit immediately. Furthermore I agree to pay 4 weeks bond and sign the tenancy agreement within 48hours of approval.

Applicant Name: _____ Signed: _____

Dated: ____/____/____

**BEFORE ANY APPLICATION WILL BE CONSIDERED, EACH
 APPLICANT MUST ACHIEVE A MINIMUM OF 100 POINTS OF ID
 AND PROVIDE PROOF OF INCOME TO SUPPORT EACH APPLICATION.**

Source	Points
If you owned your own property copy of rates notice	50
DRIVERS LICENCE	50
LAST 4 RENT RECEIPTS	40
PHOTO I.D (Eg: 18+, Student card etc)	30
PASSPORT	30
MEDICARE	20
BIRTH CERTIFICATE	10
SAVINGS/CREDIT CARD	10
CURRENT VEHICLE REGO PAPER	10
References from Previous Landlord or Selling Agent	10
Total Number of Points	

PROOF OF INCOME MUST BE PROVIDED

Two (2) recent payslips, letter of offer from employer or Centrelink Statement.

If self employed please provide a statement of income from your accountant or a bank statement to show proof of income.

PET APPLICATION AND AGREEMENT

AGENCY DETAILS	360 Property Management		
PROPERTY ADDRESS			
TENANT NAME			
GENERAL	Use this form only for Properties where the Lessor has indicated that pets may be accepted. If unsure please contact our Agency prior to completing this application form.		
PET DETAILS If more than 2 pets, print and complete separate Pet Agreement.	ITEM	PET 1	PET 2
	TYPE OF PET/S		
	NAME/S		
	AGE		
	DESEXED	YES / NO	YES / NO
	COUNCIL REG #		
	DESCRIPTION		
	PHOTO PROVIDED (Photo must be provided)	YES (copy for file) / NO	YES (copy for file) / NO
EMERGENCY PET CARER The Tenant provides the following information for use in the case of an emergency.	Name		
	Address		
	Phone Number	Work Number	Mobile Number
VETERINARIAN The Tenant provides the following information for use in the case of an emergency.	Name		
	Address		
	Phone Number	Fax Number	After Hours Number
TERMS AND CONDITIONS	<p>The Tenant/s acknowledges and agrees to the following terms:</p> <ol style="list-style-type: none"> 1. The Lessor has agreed to permit pet/s at the premises as specified in the General Tenancy Agreement and this Pet Agreement. 2. Any pet other than the approved pet/s specified in the General Tenancy Agreement and this Pet Agreement must first be requested by Tenant/s in writing giving full details and then be approved in writing by the Lessor PRIOR to the pet/s being allowed onto the premises. Pet approval may be subject to specific criteria and must be complied with. Approval is NOT guaranteed. 3. The Tenant shall be liable for any damage or injury whatsoever caused by the pets on the Property, whether they are the pet of a Tenant or guest, Tenant's pets or their guests pets and regardless of their approval status. 4. The Tenant accepts full responsibility and indemnifies the Lessor for any claims by or injuries to third parties or their Property caused by, or as result of actions by their pet/s or their guests pet/s, and regardless of their approval status. 5. The Tenant agrees to arrange for Flea Fumigation at the end of the tenancy or at a time during the tenancy as required or requested by the Lessor / Lessor's Agent to be carried out by a Company complying with Australian Standards. 6. The pet/s are to be outside at all times, unless specified otherwise in the General Tenancy Agreement or this Pet Agreement. 7. By signing below you are only asking for approval of the above-mentioned pet/s to 		

	<p>be accepted at the property for which you are applying.</p> <p>8. If approved, you are required to, at the time of signing the Tenancy Agreement and associated paperwork, sign the Tenant Agreement section.</p>		
ACKNOWLEDGEMENT BY APPLICANT	Applicant Name	Signature	Date
AFTER PROCESSING APPLICATION			
APPLICATION RESULT	<p><input type="checkbox"/> Application for Pet/s – DECLINED</p> <p><input type="checkbox"/> Application for Pet/s – APPROVED</p> <p>The abovementioned pet/s have been approved by the Lessor of the property stated in this Agreement. This Agreement now forms part of the General Tenancy Agreement and the Tenant/s are now bound by the acknowledgement set out in the Application above.</p>		
AUTHORISATION ON BEHALF OF LESSOR / AGENT	Agent	Signature	Date
	360 Property Management		
TENANT AGREEMENT To be signed only if pet/s are approved.	Tenant Name	Signature	Date



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PRIVACY ACT ACKNOWLEDGEMENT

***NOTE – THIS MUST BE SIGNED BEFORE THIS APPLICATION CAN BE PROCESSED**

In accordance with the privacy act I/We the undersigned authorise the recipient of this form to provide any information requested to 360 Property Management regarding our/my rental history or to confirm employment details. I/We understand that this information will be used to assess my/our application.

All information supplied to 360 Property Management is treated confidentially.

Name: _____ Name: _____
Signature: _____ Signature: _____
Date Signed: _____ Date Signed: _____

{Nb – one application form must be completed for each occupant over 18 years of age}