Residential Application Form

For your application to be processed you must answer all questions

(Including the reverse side) A. AGENT DETAILS **Ottoson Partners Real Estate** 9 Victoria Street Robe SA 5276 Ph (08) 8768 2600 Fax (08) 8768 2353 email: rentals@ottosonproperty.com.au **PROPERTY DETAILS** How would you like to find out if your application is successful or unsuccessful? Please provide Phone or Email: 1. What is the address of the property you would like to rent? Postcode 2. Lease commencement date? Dav Month Year 3. Lease term? Years Months 4. How many tenants will occupy the property? Adults Children 5. Names and ages of all people to occupy the property AGÉ **AGE** AGE AGE **APPLICANT ONE DETAILS** PLEASE PROVIDE COPY OF PHOTO ID 6. Please give us your details Other Mr Mrs Miss Ms Surname Given Name/s Date of Birth Driver's licence number Driver's licence expiry date Driver's licence state Passport no. Passport country Pension no. (if applicable) Pension type (if applicable) Medicare no. 7. Please provide your contact details Home phone no. Mobile phone no Work phone no Fax no. Email address 8. What is your current residential address? Postcode What is your current postal address?

Postcode



UTILITY CONNECTIONS

This is a FREE service that connects all your utilities and other services.

Direct Connect can help arrange for the connection or provision of the following utilities and other services:

Electricity Cleaners Gas Insurance Phone Removalist Internet Truck or van hire Pay TV



Please tick this box if you would like Direct Connect to contact you in relation to any of the above utilities and other services.



We guarantee that when you connect with one of our market leading electricity and gas suppliers, your services will be connected on the day you move in. Please refer to Direct Connect's Terms & Conditions for further information

Once Direct Connect has received this application Direct Connect will call you to confirm your details. Direct Connect will make all reasonable efforts to contact you within 24 hours of the nearest working day on receipt of this application to confirm your information and explain the details of the services offered. Direct Connect is a one stop connection service. Direct Connect's services are free. However, the relevant service providers may charge you a standard connection fee as well as ongoing service charges.

DECLARATION AND EXECUTION: By signing this application, you:

- 1. Acknowledge and accept Direct Connect's Terms and Conditions (which are included with this application).
- ${\bf 2. Invite\ Direct\ Connect\ to\ contact\ you\ by\ any\ means\ (including\ by\ telephone\ or\ SMS}$ even if the Customer's telephone number is on the Do Not Call Register) in order to provide Direct Connect's services to you, to enter into negotiations with you relating to the supply of relevant services as an agent for the service providers, and to market or promote any of the services listed above. This consent will continue for a period of 1 vear from the date the Customer enters into the Agreement
- 3. Consent to Direct Connect using the information provided by you in this application to arrange for the nominated services, including by providing that information to service providers for this purpose. Where service providers are engaged by you, they may use this information to connect, supply and charge you for their services.
- 4. Authorise Direct Connect to obtain the National Metering Identifier and / or the Meter Installation Reference Number for the premises you are moving to.
- 5. Agree that, except to the extent provided in the Terms and Conditions, Direct Connect has no responsibility to you for the connection or supply (or the failure to connect or supply) any of the services.
- 6. Acknowledge that Direct Connect may receive a fee from service providers, part of which may be paid to the real estate agent or to another person, and that you are not entitled to any part of any such fee.

By signing this application form, I warrant that I am authorised to make this application and to provide the invitations, consents, acknowledgements, authorisations and other undertakings set out in this application on behalf of all applicants listed on this application.

Signature /s	Date
O Box 1519, Box Hill, Victoria 3128. P: 1300 664 715 F:1300 664 18	www.directconnect.com.ar

DECLARATION

I hereby offer to rent the property from the owner under a lease to be prepared by the Agent. Should this application be accepted by the landlord I agree to enter Into a Residential Tenancy

I acknowledge that this application is subject to the approval of the owner/landlord. I declare that all information contained in this application (including the reverse side) is true and correct and given of my own free will. I declare that I have Inspected the premises and am not bankrupt.

- I authorise the Agent to obtain personal Information from:
- (a) The owner or the Agent of my current or previous residence;
- (b) My personal referees and employer/s;
- (c) Any record listing or database of defaults by tenants;
- If I default under a rental agreement, I agree that the Agent may disclose details of any such default to a tenancy default database, and to agents/landlords of properties I may apply for

I am aware that the Agent will use and disclose my personal information in order to:

- (a) communicate with the owner and select a tenant
- (b) prepare lease/tenancy documents
- (c) allow tradespeople or equivalent organisations to contact me
- (d) lodge/claim/transfer to/from a Bond Authority
- (e) refer to Tribunals/Courts & Statutory Authorities (where applicable)
- (f) refer to collection agents/lawyers (where applicable)
 (g) complete a credit check with NTD (National Tenancies Database)

I am aware that if information is not provided or I do not consent to the uses to which personal information is put. the Agent cannot provide me with the lease/tenancy of the premises. I am

aware that I may access personal into	ormation on the contact details above.
Signature /s	Date
Property Manager Name	Permanent Rentals
Application sent to Direct Connect (If Required)	Fax 1300 664 185
Electricity meter number if kno	own

F. APPLICANT ONE- HISTORY	H. CONTACTS / REFERENCES
9. How long have you lived at your current address?	17. Please provide a contact in case of emergency
Years Months	Surname Given name/s
10. Why are you leaving this address?	
, ,	Relationship to you Phone no.
11. Landlord/Agent details of this property (if applicable)	18. Please provide 2 personal references (not related to you)
Name of landlord or agent	1. Surname Given name/s
	T. Garnano
Landlord/agent's phone no. Weekly Rent Paid	
\$	Relationship to you Phone no.
12. What was your previous residential address?	
12. What was your provisus residential address.	2. Surname Given name/s
Postcode	
13. How long did you live at this address?	Relationship to you Phone no.
Years Months	
Tears Worthing	I. OTHER INFORMATION
14. Landlord/Agent details of this property (if applicable)	19. Car Registration
Name of landlord or agent	
Landlard/agant's phane no Weekly Bent Baid	20. Please provide details of any pets Breed/type Council registration / number
Landlord/agent's phone no. Weekly Rent Paid	Breed/type Council registration / number 1.
\$	
Was bond refunded in full? If not why not?	2.
	PLEASE NOTE
	Initial payments must be made by cash, bank cheque or money order
G. EMPLOYMENT HISTORY	within 24 hours after approval of application. No Personal Cheques
15. Please provide your employment details	accepted.
What is your occupation?	Keys will not be handed over until the lease agreement has been
	signed by all applicants.
What is the nature of your employment?	This application is accepted subject to the availability of the property
(FULL TIME/PART TIME/CASUAL)	on the due date and no action shall be taken by the applicant against the landlord and the agent should any circumstances arise whereby the
Employer's name (inc. accountant if self employed or institution if student)	property is not available for occupation on the due date.
	HOW DID YOU FIND OUT ABOUT THIS PROPERTY?
Favolence de la delace	realestate.com domain.com.au
Employer's address	
	Counter list Referral by
Postcode	Other (specify)
Contact name Phone no.	DI EASE PROVIDE HO WITH 400 POINTS OF IDENTIFICATION
	PLEASE PROVIDE US WITH 100 POINTS OF IDENTIFICATION
Not be seen	Driver's Licence 50
Length of employment Net Income	Passport 50
Years Months \$	Proof of Age Card 50
16. Please provide your previous employment details	Student ID Card 50
Occupation?	Copy of Mobile Phone Account 20
	Copy of Medicare Card 20
Employer's name	Concession / Pension Card 10
	Copy of gas/Water/Electricity account 30 each
	OFFICE USE ONLY
Length of employment Net Income	Property Rental
Years Months \$	\$ per week \$ per month

J. APPLICANT TWO- DETAILS		K. APPLICAI	NT HISTORY- co	nt'd	
PLEASE PROVIDE COPY	Y OF PHOTO ID	29. Landlord/A	Agent details of thi	s property (if a	pplicable)
21. Please give us your details					
Mr Mrs Miss	Ms Other				
Surname	Given Name/s	Landlord/agent	's phone no.	Weekly Ren	ıt
Date of Birth	Driver's licence number	Was bond refur	nded in full?	If not why no	nt?
Driver's licence expiry date	Driver's licence state				
Passport no.	Passport country	L. EMPLOYN	MENT HISTORY		
			vide your employr	ment details	
Pension no. (if applicable)	Pension type (if applicable)	What is your oo			
Medicare no.					
			e of your employment		
22. Please provide your contact det Home phone no.	ails Mobile phone no.	Employer's nar	ne (inc. accountant if	self employed or ir	nstitution if student)
Work phone no.	Fax no.	Employer's add	dress		
Email address				Postcod	le
23. What is your current residential	address?	Contact name		Phone no.	
	Postcode	Length of empl	oyment		Net Income
What is your current postal address?		Y	ears	Months	\$
That is your carroin poolar addition.		31. Please pro Occupation?	vide your previous	_ s employment o	details
	Postcode	Cccupations			
K. APPLICANT HISTORY		Employer's nar	ne		
24. How long have you lived at your	current address?				
Years M	Months	Length of empl	oyment		Net Income
25. Why are you leaving this address	s?	Y	ears	Months	\$
, ,					Y
		M. OTHER IN	NFORMATION		
26. Landlord/Agent details of this pr Name of landlord or agent	operty (if applicable)	32. Car Registi	ration		
Name of landiord of agent					
Landlord/agent's phone no.	Weekly Rent		vide details of any		giotrotion / number
Landiord/agent's priorie no.	\$	Breed/type 1.		Council re	gistration / number
27. What was your previous residen	tial address?	2.			
	Postcode				
28. How long did you live at this add	iress?				
Years	Months				



Residential Tenancy Application Tenant Reference Check



O: *Agent/Landlord		Fax no:			
Email:					
he Applicant has provided your details as a current or previous *. enancy from you. Please return the completed form by fax to (0)		has authorised us	to request information about the		
or email: rentals@ottosonproperty.com.au	6) 6706 2333				
PPLICANT(S):					
ROPERTY RENTED:					
We, the above named applicant/s agree for the information to be be provided showing complete rental history. SIGNATURE OF APPLICA		t Ledger Report			
	DATE: / / 20				
ERIOD OF RENTAL:	DATE: ///	20	TO: / / 20		
ENT PAID PER WEEK:	\$		10//_20		
ENT PAID PER WEEK: VAS THE APPLICANT THE LEASEHOLDER OR OCCUPANT?	→ Leaseholder	Occupant			
VAS THE APPLICANT THE LEASEHOLDER OR OCCUPANT:	Yes	No	If yes, please provide details:		
VAS THE KENT EVER IN ARREARS.			Tryes, prease provide details.		
VAS ANY NOTICE TO REMEDY ISSUED?	Yes	☐ No	If yes, please provide details:		
VAS THE PROPERTY KEPT IN A CLEAN AND TIDY MANNER?	Yes	☐ No			
VERE ANY PETS KEPT?	Yes	☐ No			
VERE THERE ANY PROBLEMS?	Yes	☐ No	If yes, please provide details:		
VAS THE GARDEN SATISFACTORILY MAINTAINED?	Yes	No			
VERE THERE ANY DEDUCTIONS FROM THE BOND OR ISPUTES AT THIS TIME?	Yes	☐ No	If yes, please provide details:		
VOLUD VOLUDENT TO THE ARRIVE ANT/S\ ACAIN2	Voc	No			
VOULD YOU RENT TO THE APPLICANT(S) AGAIN?	Yes	□ INO			
NY OTHER RELEVANT INFORMATION:					
Thank you for your assistance.					
	DATE: //	20			
Signature of Property Manager					