TENANCY APPLICATION FORM

PLEASE NOTE IMPORTANT INFORMATION

Applications will not be processed unless all sections have been completed in full, and all supporting documentation and identification has been attached.

Should this application be successful, the applicant will be required to pay a holding deposit equivalent to 2 weeks rent and sign a Tenancy Agreement within 24 hours of approval in order to secure the property. The holding deposit is non refundable after 24 hours of being received, and will be paid toward rent once a Tenancy Agreement has been signed.

Prior to a tenancy commencing, a bond payment must also be made (equivalent to 4 weeks rent).

Bank account details for holding deposit, rent and bond payments;

Commonwealth Bank Account Name: NCL Property Management Trust Account BBS 064-450 Account 1042-3711. Please reference your payment with your full name.

IDENTIFICATION				
Each applicant must include 100 points of identification, along with at least one copy of photo identification. The below checklist will assist with providing the required identification.				
Drivers License or 18 Plus Card (30 points) Passport (30 points) Birth Certificate (30 points) Medicare Card (20 points)	 Previous Tenant Ledger (20 points) Copy of Bank Statement, ATM Card or Credit Card (20 points) Motor Vehicle Registration Papers (20 points) Copy of Electricity or Telephone Account (20 points) 			
If you are having difficulty providing the required ID, please contact our office for assistance.				
PROOF OF INCOME				
Please include at least one of the following items relating to proof of income;				
Recent Pay Slips equivalent to a month. Copy of last financial year Tax Return if self employed. Bank statement showing a month worth of deposits from employer. Bank statements showing 6 months worth of deposits if self employed. Copies of Centerlink Statements showing the last month worth of income if you are receiving government benefits.				

LODGING YOUR TENANCY APPLICATION

Once your Tenancy Application has been completed in full and the above identification & proof of income requirements have been attached, please submit to NCL Property Management via one of the below methods;

Email: Property Manager - Lawrence Cercone: lawrence@nclpm.com.au

Mobile: 0449 665 661 **Fax:** 07 5591 8085

Mail: Po Box 314 Chevron Island QLD 4217

In Person: Please make an appointment with the Property Manager if you will be submitting your application in person.

Please ensure that you have read and understood the information detailed on this page as well as the **Privacy Statement** and **Applicant Declaration and Privacy Act Acknowledgement** on Page 4 prior to submitting this application.

NCL Property Management will endeavour to process your application within 2 business days, however this is greatly dependent on the response time from your referees, employers and contacts.

PROPERTY DETAILS					
Property you wish to apply for:					
Preferred Lease Term	Preferred Lease Term Preferred Lease Commencement Date				
Rent Per Week Bond Total No Of Occupants To Reside On Premises					
List No of Adults	Children	Ages			
To Be Kept on Premises: Cars	Boats Other				
Pets to Reside On Premises: Yes	No List Number, Type, Breed &	Ages			
APPLICANTS PERSONAL DETAI	LS				
Mr Mrs Miss Ms F	ull Name				
Date of Birth	Drivers Licence Number, Passpo	ort No or Pensioner Number			
Home Phone	Work Phone	Mobile Phone			
Email	Car Registration No	Make / Model	State		
Next Of Kin (Not living with you) Name		_ Address			
Phone	Mobile	Are you a	smoker? Yes No		
DRODERTY DETAIL C. CURDENT					
PROPERTY DETAILS - CURRENT					
Current Address		Rented C	Owned		
If Rented, List Agency	Phone	Fax / Emai	I		
Rent Paid Per Week	Commencement of Tenar	ncy Lease	Expiry		
Have you received a Termination Notice	e? Yes No Reason				
Reason For Leaving					
Will bond be refunded in full? Yes	No If not, why				
Please assist us with a speedy application process by attaching a copy of your current tenancy ledger.					
If Owned, List Date of Purchase: / / As proof of ownership I have attached: Rates Notice or Contract of Sale					
PROPERTY DETAILS - PREVIOU	IS				
Address		Pented (Owned 🗀		
If Rented, List Agency			_		
Rent Paid Per Week					
Was bond refunded in full? Yes No If no, list deductions Did you receive a Termination Notice? Yes No Reason					
Other Reason For Leaving					
			or Contract of Cala		
If Owned, List Date of Purchase: /	/ As proof of ownershi	p I have attached: Rates Notice	or Contract of Sale		

EMPLOYMENT DETAILS				
Please tick your employment type: Self Employed Full Time Employee Part Time Employee Casual Employee				
Full Time, Part Time or Casual Employees To Complete:				
Occupation Employer / Company				
Payroll Department Contact No Managers Contact No				
Length of Time at Place of Employment Nett Weekly Earnings				
Are you on a probation period? Yes No				
If you have been employed for less than 6 months please list previous employer:				
Length of Time EmployedOccupation Nett Weekly Earnings				
Reason for Leaving Payroll / Manager Contact No				
Self Employed Persons To Complete:				
Business Name Business Type				
Number of Years Self Employed State State				
Accountant Phone				
Have you notified your accountant that we will be in contact to confirm your earnings? Yes No				
Alternatively you may wish to attach a letter from your account to confirm your earnings.				
Have you supplied 6 months worth of bank statements to confirm your income? Yes No or				
Have you supplied your last financial years Tax Return to confirm your earnings? Yes No				
If this business has been operating for under 6 months, please list previous employer:				
Length of Time EmployedOccupation Nett Weekly Earnings				
Reason for Leaving Payroll / Manager Contact No				
Additional Comments:				
OTHER INCOME				
Type Amount Per				
Have you attached proof of this income i.e. Statements / Bank Statements? Yes No				
Additional Comments				
TOTAL INCOME				
In total, I earn / receive the amount of \$ per Week Fortnight Month				



PERSONAL REFEREES - NO	RELATIVES / FRIENDS PLEASE		
1) Full Name	Relationship To Applicant		
Occupation	Phone Number		
2) Full Name	Relationship To Applicant		
Occupation	Phone Number		
3) Full Name	Relationship To Applicant		
Occupation	Phone Number		
DDIVACY CTATEMENT			
PRIVACY STATEMENT			
this form for the purpose of assessing your a your current and/or your previous employer you to the owner of the property to which the relationship including maintenance contractor You have the right to access personal inform	application for residential tenancy. We may be required to collect as well as your referees. Your consent to us collecting this informe application relates. Should this application be successful we may also send personal information	ement. If you do not complete this form or do not sign the consent	
APPLICANT DECLARATION	& PRIVACY ACT ACKNOWLEDGEMENT		
I, the applicant acknowledge that I have read and understood the privacy statement above. I hereby declare that the information I have provided in this application is true and correct. I authorize the leasing agent to conduct all enquiries & searches necessary in order to confirm the information I have supplied in this application. Furthermore, I authorize the leasing agent to contact all necessary contacts and referees supplied in this application for verification regarding my personal details, employment information and rental history. My consent is given for the leasing agent to conduct searches and request information from any person or company who has previously submitted my information to a tenancy default database. I authorise the agent to collect information from Tenancy Default Database which may contain personal information about me. In the event that my application is successful and I should default under a residential tenancies agreement, the agent is authorised to disclose my personal details to a national tenancy default database, as well as to any future prospective landlords or Agents who may request the information. I authorise the agent to disclose my personal information to the owner of the property for the purpose of verifying suitability of my application for residential tenancy. Should my application be successful I authorise the agent to disclose my personal information to organisations concerning the tenancy relationship including service providers and tradesman, as well as other third parties such as valuers, salespeople, contractors, body corporate, insurance companies, other Agents, tenancy tribunal, solicitors or debt collectors. I hereby authorize the leasing agent to use my personal information for the purpose of preparing tenancy documentation, as well as authorizing the agent to supply the relevant personal information to the Residential Tenancies Authority as required. I am aware that this application cannot be processed until such time as all sections have been comple			
I declare that I have inspected the premises which I am applying for, and confirm that it is in an acceptable condition for which I am able to occupy. I declare that I am not bankrupt nor am I bound by any debts which may affect my obligations to meet the required weekly rental payments for the property which I have applied for. I hereby declare that I have read and understood the above and give my consent regarding the collection and disclosure of my personal information.			
Applicant Signature	Print Name	Date	
Witness Signature	Print Name	Date	