

TENANCY APPLICATION FORM

BURNHAM REAL ESTATE

273 Barkly Street, Footscray, Vic 3011

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before proceeding. This is signed along with

property lease.

Phone: 9363 63333 FAX: 93638728 Email: deerpark@burnham.com.au

Proposed Property Property Address: Rent: \$ _____ Length of Tenancy: ____ Months (e.g. 12 months) Tenancy to Commence: ___/__/ Bond: \$ _____ Payable to RTBA* Move in Date: __/ /____ How many people will be living at property? Adults: ____ Children: ___ Ages of Children: ____ PLEASE NOTE: If you are approved for the property, the bond needs to be paid when you sign your lease agreement. You can pay it by Bank Cheque or Money Order made out to: Residential Tenancies Bond: Authority (RTBA) - BY LAW, WE ARE NOT ABLE TO ACCEPT CASH PAYMENTS FOR BOND. Applicant 1 Details Applicant 2 Details Name: Name: _ Date of Birth: ___/___ Drivers Lic No: _____ Date of Birth: ___/___ Drivers Lic No: _____ _____ Expiry Date: ___/___/ _____ Expiry Date: ___/__/___ Car Rego: _____ Make: ____ Model: _____ Car Rego: _____ Make: ____ Model: _____ _____ Mobile: __ Home Phone: Home Phone: _____ Mobile: __ Passport ID: _____ Passport date of expiry: ___ Passport ID: Passport date of expiry: E-Mail: E-Mail: Are you a Smoker? No Yes If Yes: Inside/Outside Are you a Smoker? No Yes If Yes: Inside/Outside Pets? No Yes Now many?: Pets? No Yes Now many?: _____ Type Pet: Breed: Breed: Type Pet: Current Home Details (Applicant 1) Current Home Details (Applicant 2) Address: Address: _____ ____ Post Code: ____ _____ Post Code: ____ Suburb: Suburb: Renting Own Current Rent: \$ Renting Own Current Rent: \$ Landlord/Agent: Private Landlord: Landlord/Agent:_____ Private Landlord: _____ Landlord contact number: Landlord contact number: How long at Current Address?: _____ Years ____ Months How long at Current Address?: Years Months Reason for Leaving this Address: ___ Reason for Leaving: _____ Bond Refunded: If not why? Bond Refunded: _____ If not why? _____ UTILITY CONNECTIONS (Free service that connects your utilities) Upon application, Fast Connect will electronically lodge your request and ensure that your utility CONNECT provider has all the relevant details to connect on your requested date. Confirmation will be sent to you and your real estate agent. Both Agent and Provider receive a commission for connection. Tick **Connection Date** FAST CONNECT PRIVACY POLICY To provide application lodgment services to Supplier Tick to Connect WATER our customers (you) it is necessary to collect certain information about you. You may Tick to Connect choose not to supply some or all of the infor-AGL **ELECTRICITY** ARE YOU INTERESTED IN?: mation requested by Fast Connect. Full policy is with AGL disclosure. PAY TV **MAINS** AGL Tick to Connect **Broadband Internet** Applicants must sign a separate AGL ac-**TELEPHONE TELSTRA** Tick to Connect knowledgment and disclosure document

Broadband Wireless

Previous Home Deta	ils (Applicant 1)	Previous Home Detai	ils (Applicant 2)	
Address:		Address:		
	Post Code:	Suburb: Post Code:		
Renting Own Current Rent: \$		Renting Own	Current Rent: \$	
Landlord/Agent (if applicable):		Landlord/Agent (if applicable):		
Landlord/Agents Phone No:		Landlord/Agents Phone No:		
How long at previous address?: Years Months Reason for Leaving:		How long at previous add		
Bond Refunded: If not why?		Bond Refunded: If not why?		
Current Employmen	t (Applicant 1)	Current Employment		
Occupation:		Occupation:		
Nature of your Employme	ent: full time / part time/ casual (circle)	Nature of your Employme	ent: Full time / Part time/ Cas	sual (circle)
Length Employment:	Wage: \$PW Net	Length Employment:	Wage: \$	PW Net
Employer:		Employer:		
Contact Name:	Phone:	Contact Name:		
Previous Employment (Applicant 1)		Previous Employment (Applicant 2)		
Previous Employer:		Previous Employer:		
Contact Name:	Phone:	Contact Name:	Phone:	0
Length Employment:	Wage: \$PW Net	Length Employment:	Wage: \$	PW Net
If Not Employed (App Student Pensioner	licant 1) Unemployed Other Income	If Not Employed (Appl	icant 2) Unemployed Othe	er Income
Details:		Details:		
		Allowance/Wage: \$		
Self Employed - if ap		Self Employed - if ap		
Business Name:		Business Name:		
	ACN:	Business ABN:		
	Phone:	Accountant:	Phone:	
Emergency Contact	- Next of Kin (Applicant 1)	Emergency Contact		
		Name:		
	Work Phone:	Mobile Phone:		
Relationship to you:		Relationship to you:		
Address:		Address:		
	Post Code:		Post Coc	de:
Contacts/Reference	s - Not related (Applicant 1)	Contacts/References	s - Not related (Applic	ant 2)
1) Name:		1) Name:		
Address:		Address:		
	Post Code:		Post Code:	
Home Phone:	Work Phone:	Home Phone:	Work Phone:	
Mobile:	Relationship:	Mobile:	Relationship:	
2) Name:		2) Name:		
Address:		Address:		
	Post Code:		Post Cod	de:
Home Phone:	Work Phone:	Home Phone:	Work Phone:	
Mobile:	Relationship:	Mobile:	Relationship:	

To assist in processing your application, please provide the following:

- Complete ALL details on application thoroughly
- Photo identification
- Rental Ledgers from previous agent/landlord
- 3 most recent payslips
- Current bank statement

Upon lodgement of your application, please allow 3-4 business days to obtain a status of the decision (please be patient and bare in mind that it takes time to contact referees and Landlords).