

Tenancy Application Form

Please be advised, this application will only be processed once ALL details have been completed and all copies of all supporting documents attached. Each applicant must submit an individual form.

PROPERTY DETAILS :

Address: _____ / 60 Rocky Street, Maryborough, QLD 4650

Lease commencement date: _____ Lease Term: _____ No. occupying the property: ____

Details of any pets: _____ Breed: _____

PERSONAL DETAILS:

Given Name(s): _____ Surname: _____

Current Address: Unit/ Street _____

Suburb: _____ Post Code: _____

Home Phone: _____ Work Phone: _____ Mobile: _____

Email: _____ Date of Birth : _____

Drivers Licence No: _____ Drivers Licence State: _____

Passport No: _____ Passport Country: _____

Pension / Vet Affairs Number: _____ Gender: _____

FOODS Details:

Food Allergies: Yes / No

Details: _____

MEDICAL Details

Medical Allergies: Yes NO

Details: _____

How did you hear about us: Care provider / Internet / Newspaper / Friend / Social Worker / Hospital

Other please details: _____



CARER

Are you currently Receiving any care? Yes No

If so, who is your care Provider?

How many days a week do you receive support? _____

Support Carer:

Name : _____ Mobile No: _____

Have you been RAS/ACAT Assessed: Yes No

Have you been My Aged care Assessed: Yes No

Covid Vaccination Status; 1st Shot Vaccinated / Full Vaccinated / Booster Vaccinated / Not Vaccinated / Valid Medical Exemption

Please bring a copy of your vaccination certificate with you for the village manage to sight.

NEXT OF KIN

1. Given Name(s): _____

Surname: _____

Relationship: _____

Address: Unit/ Street: _____

Suburb: _____

Post Code: _____

Phone: _____

Mobile: _____

Email: _____

2. Given Name(s): _____

Surname: _____

Relationship: _____

Address: Unit/ Street: _____

Suburb: _____

Post Code _____

Phone: _____

Mobile: _____

Email: _____

CURRENT TENANCY DETAILS:

How Long you living current address: _____

Rent Paid: _____

Reason for leaving: _____

Name of Landlord / Agent: _____

Phone: _____

CURRENT EMPLOYMENT:

If you are on a pension please place that in Occupation, the rest will be n/a.

Occupation: _____ Current Employer: _____
 Employers Address: _____
 Contact Name (pay roll / manager): _____ Contact Number: _____
 Length of Employment: _____ Net weekly income: _____

REFEREES:

Personal referee (1): _____ Relationship: _____
 Contact number: _____ Mobile: _____
 Personal referee (1): _____ Relationship: _____
 Contact Number: _____ Mobile: _____

Comment:

Please answer the following:

Have any of your previous tenancies been terminated? Yes No
 Are you in debt to another lessor or Agent? Yes No
 Is there an existing reason that may affect your rent payment? Yes No
 If yes, please provide details: _____

Drivers Licence	40	Motor Vehicle Registration Certificate	20
Passport	40	Bank Statement	20
Other Photo ID	20	Telephone Account	20
Wage Advice/Pension Statement	30	Electricity Account	20
Previous Tenancy Reference	20	Medicare Card	20
Previous 2 Rent Receipts	20	Pension Card	30



PRIVACY STATEMENT

PRIVACY DISCLOSURE STATEMENT OF [Good Property Real Estate](#).

We are bound by the National Privacy Principles. We collect personal information about you in this form to assess your application for a residential tenancy. We may need to collect information about you from your previous landlords or letting agents, your current or previous employer and your referees. Your consent to us collecting this information is set out below. We may disclose personal information about you to the owner of the property to which this application relates. If this application is successful we may disclose your details to service providers relevant to the tenancy relationship including maintenance contractors and the landlord's insurers. We may also send personal information about you to the owners of any other properties at your request. You have the right to access personal information that we hold about you by contacting our privacy officer (see contact details above). If you do not complete this form or do not sign the consent below then your application for a residential tenancy may not be considered by the owner of the relevant property or, if considered, may be rejected.

PRIVACY CONSENT

I the Applicant acknowledge that I have read the Privacy Notice of [Good Property Real Estate](#). [Good Property Real Estate](#) authorise to collect information about me from:

1. My Previous letting agents and/or landlords;
2. My personal referees;
3. Any Tenancy Default Database which may contain personal information about me. I also authorise [Good Property Real Estate](#) to disclose details about any defaults by me under the tenancy to which this application relates to any tenancy default database to which it subscribes including Tenancy Information Centre of Australia (TICA), National Tenancy Database (NTD) and/or Trading Reference Australia (TRA).

I authorise [Good Property Real Estate](#) to disclose the personal information it collects about me to the owner of the property even if the owner is resident outside Australia and to any third parties – valuers, contractors, sales people, insurance companies, body corporates, other agents and tenancy default databases.

Full Name: _____

Signature: _____

Date: _____

Manager review application

Name: _____

Signature _____

Date: _____

Application Subject to Consent

Processing of this application will not commence unless all section has been completed and relevant documentation provided at the time of submission of application to agency.

MBK Australia Pty Ltd

Phone: 07 4122 3661

Mob: 0458 365 918

Email: rentals@goodpropertyrealestate.com.au

PO BOX 3113 Maryborough , QLD 4650