Property applied for:
Rent: \$ per week (to be paid fortnightly in advance)
Bond: \$ Own Funds / Housing Trust Guarantee
(Bond is equal to 4 x weekly rent if the weekly rent is \$249 or less or, 6 x weekly rent if the weekly rent is \$250 or more)

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Term of Tenancy:	6 months / 12 months	Tenancy commencement date:	/ /

Applicant 1		Applicant 2	
Full Name:		Full Name:	
Current Address:		Current Address:	
Length of time at address:		Length of time at address:	
Date of Birth: / /		Date of Birth: / /	
Drivers Licence Number:		Drivers Licence Number:	
Phone Work:		Phone Work:	
Phone Home:		Phone Home:	
Mobile:		Mobile:	
Email:		Email:	
Children who will be living w	ith you	Children who will be living wi	th you
Childs Name:	Age:	Childs Name:	Age:
Childs Name:	Age:	Childs Name:	Age:
Childs Name:	Age:	Childs Name:	Age:
Childs Name:	Age:	Childs Name:	Age:
Pets that will be kept at the property		Pets that will be kept at the pr	operty
Pets: Yes / No If yes: Insi	de / Outside	Pets: Yes / No If yes: Insid	e / Outside
Types of pets:		Types of pets:	

Applicant 1	Applicant 2
Rental History	Rental History
Current Landlord/Agent:	Current Landlord/Agent:
Contact Name:	Contact Name:
Phone:	Phone:
Property Address:	Property Address:
Length of time at address:	Length of time at address:
Rent per week: \$	Rent per week: \$
Lease expiry date: / /	Lease expiry date: / /
Bond refunded? If not, why?	Bond refunded? If not, why?
Reason for leaving?	Reason for leaving?
Previous Landlord/Agent:	Previous Landlord/Agent:
Contact Name:	Contact Name:
Phone:	Phone:
Property Address:	Property Address:
Length of time at address:	Length of time at address:
Rent per week: \$	Rent per week: \$
Lease expiry date: / /	Lease expiry date: / /
Bond refunded? If not, why?	Bond refunded? If not, why?
Reason for leaving?	Reason for leaving?
No rental history? Please add reason:	No rental history? Please add reason:

Applicant 1	Applicant 2
Employment History	Employment History
Current Occupation:	Current Occupation:
Employers Name:	Employers Name:
Employers Address:	Employers Address:
Employers Phone (landline only):	Employers Phone (landline only):
Supervisors Name:	Supervisors Name:
Net Weekly Income (last 2 payslips required): \$	Net Weekly Income (last 2 payslips required): \$
Length of Service:	Length of Service:
If at current employer for less than 6 months	If at current employer for less than 6 months
Previous Occupation:	Previous Occupation:
Employers Name:	Employers Name:
Employers Address:	Employers Address:
Employers Phone (landline only):	Employers Phone (landline only):
Supervisors Name:	Supervisors Name:
Net Weekly Income: \$	Net Weekly Income: \$
Length of Service:	Length of Service:
If Self Employed	If Self Employed
Business Name:	Business Name:
ABN:	ABN:
Business Address:	Business Address:
Business Phone:	Business Phone:
Nature of Business:	Nature of Business:
Annual Income: \$	Annual Income: \$
Accountant Name and Phone:	Accountant Name and Phone:

Applicant 1	Applicant 2
If a Student	If a Student
Student ID Number:	Student ID Number:
Course:	Course:
University/TAFE/Other:	University/TAFE/Other:
Net Weekly Income: \$	Net Weekly Income: \$
Centrelink Benefits	Centrelink Benefits
Type of Payment/s:	Type of Payment/s:
Customer Reference Number:	Customer Reference Number:
Total Fortnightly Payment: \$	Total Fortnightly Payment: \$
Other Income	Other Income
Other Income per week: \$	Other Income per week: \$
Details of other income:	Details of other income:
Reference 1 (cannot be a relative)	Reference 1 (cannot be a relative)
Name:	Name:
Address:	Address:
Phone:	Phone:
Phone: Email:	Phone: Email:
Email:	Email:
Email:  Reference 2 (cannot be a relative)	Email:  Reference 2 (cannot be a relative)
Email:  Reference 2 (cannot be a relative)  Name:	Email:  Reference 2 (cannot be a relative)  Name:
Email:  Reference 2 (cannot be a relative)  Name: Address:	Email:  Reference 2 (cannot be a relative)  Name: Address:
Email:  Reference 2 (cannot be a relative)  Name: Address:  Phone:	Email:  Reference 2 (cannot be a relative)  Name: Address:  Phone:
Email:  Reference 2 (cannot be a relative)  Name: Address:  Phone: Email:	Email:  Reference 2 (cannot be a relative)  Name: Address:  Phone: Email:
Email:  Reference 2 (cannot be a relative)  Name: Address:  Phone: Email: Emergency Contact (cannot be other applicants)	Email:  Reference 2 (cannot be a relative)  Name: Address:  Phone: Email: Emergency Contact (cannot be other applicants)
Email:  Reference 2 (cannot be a relative)  Name: Address:  Phone: Email:  Emergency Contact (cannot be other applicants)  Name:	Email:  Reference 2 (cannot be a relative)  Name: Address:  Phone: Email:  Emergency Contact (cannot be other applicants)  Name:

I/We (please print clearly)				
Applicant (1)				
Applicant (2)				
herby authorise Green Triangle Real Es relevant to evaluate my tenancy applic employment, positions held, salary or wa	ation. This may include det		•	
Signed:	Dated:	/	/	
Signed:	Dated:	/	/	

## **AUTHORITY AND PRIVACY ACT**

The Applicants and each of them acknowledge and authorise the Letting Agent to make all necessary enquiries to verify the information provided herein, including information relating to employment, rental history and personal references, and to report on these matters to the Landlord under the provisions of the Privacy Act (SA) www.privacy.gov.au.

The Agent uses personal information collected from you to act as the agent and to perform its obligations as agent. The Agent may disclose information to other parties such as its client, to potential purchasers of the property, or to clients of the Agent both existing and potential, as well as to tradespeople, strata corporations, T.I.C.A, government and statutory bodies and to other parties as required by law. The Agent will only disclose information in this way to other parties as required to perform their duties for the purposes specified above or as otherwise allowed under the Privacy Act 1988. If you would like to access this information you can do so by contacting the Agent at the address and contact numbers inthis application form. You can correct any information if it is inaccurate, incomplete or out-of-date. Real estate and tax law requires some of this information to be collected.

## **Utility Connections**

YourPorter is a FREE service connecting utilities and other service
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YourPoner is a FREE Se	ervice connecting utili	lies and other service	<del>2</del> 8.
•	f assisting you to con	nect your utilities with	ng you by phone, SMS, or in 24 hours of receiving this
☐ Electricity	☐ Gas	Telephone	☐ Pay TV
☐ Internet	☐ Car Insurance	Life Insurance	☐ Health Insurance
☐ Home Loans	☐ Home & Conten	ts	
DECLARATION AND A	CCEPTANCE:		
contained in this form) to	YourPorter Pty Ltd (	ABN 36 252 576 050)	g any personal information for the purpose of allowing on of services as offered by
be able to provide the	se services to me/us	s. YourPorter will en	rmation, YourPorter will not sure that my/our personal vith the requirements of the
connection of any of the phone or SMS in relation that this consent permits are listed on the Do Not personal information in www.yourporter.com.au	e services listed abover to the connection YourPorter to contact Call Register. YourPort accordance with the large connection fees and connection fees in the services of the services and connection fees in the services are services in the	e. I/We consent to Yo of the services listed to me even if the numb orter will otherwise contheir privacy policies by/.YourPorter is a	a benefit in relation to the ourPorter contacting me by above. I/We acknowledge ers listed on this application llect, hold, use and discloses, which are available at free service, but I/We as connected (in addition to
in or failure to arrange o or expense in connect	r provide for any conr tion with such delay	nection of a service or or failure. By sigr	responsibility for any delay for any loss, damage, cost ing this application, I/We under no obligation to use
Signed:		Dated:	/ /