

Residential Tenancy Application Form

Important information

Please read this before completing the *Residential tenancy application* form. This information has been taken from the Residential Tenancy Application devised by Consumer Affairs Victoria.

Each prospective tenant over the age of 18 should fill in an application form.

Warning: Enter text in spaces provided only. This form will be invalid if you remove or change any questions or other text.

Information for landlords and applicants

- This form is designed to help the landlord or real estate agent choose who will rent the nominated premises.
- This form is not, nor does it form any part of, a tenancy agreement. The rights and obligations of tenants and landlord are governed by the *Residential Tenancies Act 1997*.
- Applicants must be considered in accordance with the *Equal Opportunity Act 1995*. There must be no discrimination based on: age, sex, marital, parental or carer status, pregnancy, sexual orientation, disabilities, physical features, race, religious, political or industrial activities or beliefs or personal association with someone else who may be treated unfairly on the basis of any of the above.
- No fees can be charged for this application.
- Information supplied on this form is strictly confidential. Landlords/agents may use it to perform a rental history check but cannot provide it to any third party unless they have written approval from the applicant.
- If this application is unsuccessful, this form and any copies will be destroyed.
- If you need help with this application, call the Consumer Affairs Victoria Helpline on 1300 55 81 81 or visit consumer.vic.gov.au/renting

Information for applicants

- Each prospective tenant should complete a *Residential tenancy application* form.
- You should contact the landlord/agent two business days after lodging your application to see if you were successful.
- If the application is successful, you will be required to:
 - produce a driver's licence or passport for identification purposes
 - pay one months rent in advance
 - pay the bond amount listed on this form
 - complete a *Residential tenancy agreement* and *Condition report*.
- Remember, it is your responsibility to have all services such as telephone, gas, electricity and water connected in your name to coincide with your date of occupation.
- It is also your responsibility to insure your possessions. The landlord's insurance policy does not cover your possessions.

Rental property details (to be completed by landlord/agent)

Address:	
Postcode:	

Property rental amount (\$):	
Per week:	
Per calendar month:	

Property bond amount (\$):	
Tenancy start date:	/ /

Tenancy term

Periodic:		Fixed:	
If fixed, specify term (months):			

Name of property manager:	
Telephone number:	
Fax number:	
Name of estate agency (if applicable):	

Applicant details (to be completed by applicant)

Full name:

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Current address:

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Home telephone number:	
Work telephone number:	
Mobile telephone number:	

Date of birth (for rental check use):	/ /
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How long at this address:

Years:		Months:	
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Name of current landlord/agent:

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Telephone number of landlord/agent:

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Reason for leaving current address:

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Previous address:

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Postcode:	
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How long at this address:

Years:		Months:	
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Name of previous landlord/agent:

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Telephone number of landlord/agent:

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Reason for leaving previous address:

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Employment details

Occupation:					
Full time:		Part time:		Casual:	

Salary income per week (\$):	
Other net income per week (e.g. investments) (\$):	

Name of current employer:

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How long employed there

Years:		Months:	
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Position held:

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Address of current employer:	
Suburb:	
Postcode:	

Name of contact person:	
Telephone number:	

Name of previous employer:

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How long employed there

Years:		Months:	
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Address of previous employer:	
Suburb:	
Post code:	

Name of contact person:	
Telephone number:	

References

(If you have written references attach copies to this form)

1. Name:	
Relationship to applicant:	
Home telephone number:	
Work telephone number:	

2. Name:	
Relationship to applicant:	
Home telephone number:	
Work telephone number:	

Pets

No:		Yes:	
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If yes, number and type of pets:

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Declaration

I declare that the information given on this form is true and correct to the best of my knowledge.

Applicant's signature:

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Date:	/ /
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