



	Application for Residential Tenancy (One application to be completed per person)			
	PART 1: RENTAL PROPERTY DETAILS			
ITEM 1:	AGENT DETAILS			
II LIII I.	AGENCY NAME:			
	Asian Pacific Forest Lake Pty Ltd t/a @ap-realty			
	ADDRESS: P O Box 4292			
	SUBURB: FOREST LAKE	STATE: QLD POSTCOD	E: 4078	
	PHONE: MOBILE: FAX: EMAI			
	07 3372 0400 pm@ap-realty.com chris	@ap-realty.com.au		
ITEM 2:	PROPERTY DETAILS			
	ADDRESS:			
	SUBURB:	STATE: POSTCOD	E:	
	Rent: \$ Rent period: <i>← wee</i>	ekly / fortnightly / monthly Bond: \$		
	Tenancy Term: Fixed term agreement	Periodic agreement		
	Starting on: Ending on	:		
	PART 2: APPLICANT DETAILS			
ITEM 3:	CONTACT DETAILS			
	FULL NAME:		DATE OF BIRTH:	
	Have you been known by any other name(s)? Yes No			
	Have you been known by any other name(s)? Yes No If Yes, what other name(s) have you been known by?			
	If Yes, what other name(s) have you been known by?			
	If Yes, what other name(s) have you been known by?			
	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL	L: State:		
ITEM 4:	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL Driver's Licence/passport number:	L: State:		
ITEM 4:	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL Driver's Licence/passport number: Number of vehicles: Registration	L: State:		
ITEM 4:	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL Driver's Licence/passport number: Number of vehicles: Registration DEPENDANTS Do you have any dependants? Yes No	State: number(s):	PENDANT DATE OF BIRTH:	
ITEM 4:	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL Driver's Licence/passport number: Number of vehicles: Registration DEPENDANTS Do you have any dependants? Yes No	State: number(s):	PENDANT DATE OF BIRTH:	
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ITEM 4:	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL Driver's Licence/passport number: Number of vehicles: Registration DEPENDANTS Do you have any dependants? Yes No DEPENDANT FULL NAME(S):	State: I number(s): RELATIONSHIP TO APPLICANT: DE	PENDANT DATE OF BIRTH:	
	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL Driver's Licence/passport number: Number of vehicles: Registration DEPENDANTS Do you have any dependants? Yes No DEPENDANT FULL NAME(S): SMOKING Are you or any of the dependants living with you a smoker? Yes	State: I number(s): RELATIONSHIP TO APPLICANT: DE	PENDANT DATE OF BIRTH:	
	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL Driver's Licence/passport number: Number of vehicles: Registration DEPENDANTS Do you have any dependants? Yes No DEPENDANT FULL NAME(S):	State: I number(s): RELATIONSHIP TO APPLICANT: DE	PENDANT DATE OF BIRTH:	
ITEM 5:	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL Driver's Licence/passport number: Number of vehicles: Registration DEPENDANTS Do you have any dependants? Yes No DEPENDANT FULL NAME(S): SMOKING Are you or any of the dependants living with you a smoker? Yes	L: State: I number(s): RELATIONSHIP TO APPLICANT: DE State: No	PENDANT DATE OF BIRTH:	
ITEM 5:	If Yes, what other name(s) have you been known by? WORK PHONE: MOBILE: HOME PHONE: EMAIL Driver's Licence/passport number: Number of vehicles: Registration DEPENDANTS Do you have any dependants? Yes No DEPENDANT FULL NAME(S): SMOKING Are you or any of the dependants living with you a smoker? Yes PETS Do you intend to keep pets at the property? Yes No	L: State: Inumber(s): RELATIONSHIP TO APPLICANT: DE DE No	PENDANT DATE OF BIRTH:	

INITIALS (Note: initials not required if signed with Electronic Signature)



ITEM 7:	APPLICANTS ADDRESS HISTORY				
	CURRENT RESIDENTIAL ADDRESS:				
	PERIOD OF OCCUPANCY: TYPE OF OCCUPANCY:	POSTCODE:			
	CURRENT AGENT/LESSOR (If renting):				
	AGENT/LESSOR PHONE: FAX: EMAIL:				
	CURRENT RENT Rent period: Reason FOR LEAVING: **weekly / fortnightly / monthly** **meason FOR LEAVING: **mea	REASON FOR LEAVING:			
	PREVIOUS RESIDENTIAL ADDRESS:				
	SUBURB:	POSTCODE:			
	PREVIOUS AGENT/LESSOR:				
	AGENT/LESSOR PHONE: FAX: EMAIL:				
	PREVIOUS RENT: Rent period: Reason FOR LEAVING: weekly / fortnightly / monthly				
ITEM 8:	EMPLOYMENT DETAILS				
	Are you employed? Yes No (if no, please provide details of previous employer, if any) Employment status: Full time Part time Casual Contract Self employed OCCUPATION: NET INCOME (per week)				
	DATE COMMENCED EMPLOYMENT (approx.) DATE TERMINATED EMPLOYMENT (if any				
	EMPLOYER/BUSINESS NAME:				
	ADDRESS:				
	SUBURB: STATE: POSTCODE:				
	PHONE: FAX: EMAIL:				
	IF SELF EMPLOYED, ACCOUNTANT'S NAME:	PHONE:			
ITEM 9:	CENTRELINK PAYMENTS				
	Are you receiving any regular Centrelink payments? Yes No DESCRIPTION OF PAYMENT(S):				
	TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$				
ITEM 10:	STUDENT DETAILS				
	Are you studying full time?				
	NAME OF EDUCATION INSTITUTION YOU ARE CURRENTLY ATTENDING: STUDENT IDENTIFICATION NUMBER:				
	Are you an overseas student? Yes No If yes, Visa expiry date:				

INITIALS (Note: initials not required if signed with Electronic Signature)



ITEM 11:	PERSONAL REFEI	RENCES				
	Please do not list REFEREE 1:	relatives, another a	applicant or partners and pro	ovide business ho	ours contact numbers.	RELATIONSHIP:
	ADDRESS:					PHONE/MOBILE:
	REFEREE 2:					RELATIONSHIP:
	ADDRESS:					PHONE/MOBILE:
	SUBURB:					THONE-WOBILE.
ITEM 12:	PERSONAL REPR	ESENTATIVE				
	i.e. preferred pers	son(s) to be contact	ed in the event of an emerg	ency.		
	REPRESENTATIVE	≣ 1:				RELATIONSHIP:
	ADDRESS:					
						PHONE/MOBILE:
	SUBURB:			STATE:		
	REPRESENTATIVE	≣ 2:		_		RELATIONSHIP:
	ADDRESS:					
						PHONE/MOBILE:
	SUBURB:			STATE:	POSTCODE:	
	PART 3: SU	PPORTING D	OCUMENTS			
ITEM 13:	IDENTIFICATION					
	You are required The Agent/Lessor	to meet a 100 point r may photocopy ar	t identification criterion upon ny item and retain as part of	submission of your application.	our application.	
	Please tick the identifying documents you have provided with your application. IMPORTANT: At least one form of Photo Identification MUST be provided.					
	70 Points					
	Passport		Full birth certificate	Ci	tizenship certificate	
	40 Points					
	Australian Dri	iver's Licence	Student Photo ID	De	epartment of Veterans Af	fairs card
	Centrelink ca	rd	Proof of age card	St	ate/Federal Government	Photo ID
	25 Points					
	Medicare care	d	Council rates notice	M	otor vehicle registration	
	Telephone bil	II	Electricity bill	G	as bill	
	Tenancy Hist	ory Ledger	Bank statement	Cı	redit card statement	
	Last FOUR re	ent receipts	Rent bond receipt	Pr	revious tenancy agreeme	nt
ITEM 14:	PROOF OF INCOM	IE .				
	You are also requ	ired to supply the A	Agent/Lessor with proof of you	our income upon	submission of your applic	cation.
	Employed:	Employed: Last TWO pay slips.				
	Self employed:	Bank statements,	Group Certificate, Tax Retu	urn or Accountan	t's letter.	
	Not employed:	Centrelink statem	•			

PART 4: DECLARATION

, , , ,	AT IT DECEMBER TO THE PARTY OF			
PLEASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE or FALSE				
	I, the Applicant			
1.	Have never been evicted by an Agent/Lessor	True	False	
2.	Have no known reasons that would affect my ability to pay rent	True	False	
3.	Was refunded the rental bond for my last address in full (if applicable)	True	False	
	If false, please advise what deductions were made from your bond?			
4.	Have no outstanding debt to another Agent/Lessor?	True	False	
	If false, why are you in debt to your past Agent/Lessor?			
PA	RT 5: TENANCY DATABASES			
The	Agency may use the following tenancy databases to check the rental history of the Applicant/s:			
DΔ	RT 6: ACKNOWLEDGEMENT			
	ASE ACKNOWLEDGEMENT ASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES OF NO			
	I, the Applicant			
1.	Acknowledge that my personal contents insurance is not covered under any Lessor insurance policy/s and understand that it is my responsibility to insure my own personal belongings.	Yes	☐ No	
2.	Understand that you as the Agent/Lessor have collected this information for the purpose of determining whether I am a suitable tenant for the property - in particular to check my identification, my ability to care for the property, my character and my creditworthiness.	Yes	No	
	2.1 for such purposes, I authorise you to contact the persons named in this application, and to undertake such enquiries and searches (including tenancy databases searches) as you consider reasonably necessary.	Yes	No	
	2.2 in doing so, I understand that information provided by me may be disclosed to, and further information obtained from, referees named in this application and other relevant third parties.	Yes	☐ No	
3.	Acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide reasons as to why.	Yes	☐ No	
4.	Consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the Agent/Lessor to pass my details onto others which may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases.	Yes	No No	
5.	Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), the Standard Terms and any special terms before completing this application.	Yes	☐ No	
6.	Acknowledge that I have received or have available the Information Statement (Form 17a), body corporate by-laws (if applicable) before completing this application.	Yes	No	
7.	Acknowledge that I have signed the agency's Privacy Notice and Consent.	Yes	No	
8.	Acknowledge that the Lessor and Applicant (tenant) are bound by this agreement immediately upon communication of either the lessor or agent's acceptance of the application.	Yes	☐ No	
9.	Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 of the <i>Electronic Transactions (Queensland) Act 2001 (Qld)</i> and the <i>Electronic Transactions Act 1999 (Cth).</i>	Yes	No	
10.	Declare that the above information is true & correct and that I have supplied it of my own free will.	Yes	No	
Name of Applicant:				
	Signature: Date:		SIGN HERE	

INITIALS (Note: initials not required if signed with Electronic Signature)