

PROSPECTIVE TENANT APPLICATION FORM – THE MELBOURNE RESIDENCES

Apartment Number:	
Lease Length (months) 6 <input type="checkbox"/> 12 <input type="checkbox"/> Other:	Ideal Move in Date:
Weekly Rent \$	Bond \$

or

<i>Please choose your preference/s & we can allocate you the perfect apartment:</i>			
Aspect Preference: 1	2	3	4
Layout Preference: 1	2	3	
Furniture Preference:			
PRICE: Please indicate your maximum weekly rental budget: \$ _____ per week			

INSPECTION CONFIRMATION
I confirm:

Before you complete your application please remember:

- An inspection of the apartment is recommended.
- One application is required per person.
- ARIA Living will contact you within 24-48 business hours after the application has been received.
- If the application is approved by ARIA Living and the Landlord/s the General Tenancy Agreement is to be signed by all approved leaseholders within 24 hours.

Before you submit your application:

- Have all pages been completed?
- Has each applicant filled out a separate application form?
- Have you provided 3 forms of supporting documents, as per below?
- Have you signed the Authority & Privacy Disclaimer on Page 3?

To submit your application:

- Email completed form & supporting documents to rentals@arialiving.com.au
- Hand deliver completed form & supporting documents to The Melbourne Residences onsite management team

One of EACH of the below items MUST be provided when submitting completed application form.

If anything is missing, your application will not be processed:

ITEM	OPTION 1	OPTION 2	OPTION 3	Office Use Only
Photo ID	Current Driver's License	Current Passport	Current 18+ Card	
Confirmation of Employment	3 most recent pay slips	Bank statement showing income deposited	Offer of Employment/ Government Income Statement	
Confirmation of Current Address	Most recent gas bill	Most recent electricity bill	Current Tenancy Agreement	
Confirmation of regular housing payments	3 most recent rent receipts	Tenant ledger from agent or bank statement	Most recent local council rates notice (if owned)	

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RESIDENCES

APPLICANT INFORMATION		
Name:		
No. of people residing:	Date of birth:	Phone:
Email:		
Car Registration:	Driver's License:	Passport/18+ No:
No. of vehicles to be kept onsite:	Are all cars registered? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you a smoker? Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have pets? Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you have contents insurance? Yes <input type="checkbox"/> No <input type="checkbox"/>	

ACCOMMODATION INFORMATION (CURRENT & PREVIOUS)		
Current address:		
City:	State:	Post Code:
Own <input type="checkbox"/> Rent <input type="checkbox"/>	Weekly payment of rent:	Period of occupancy:
Name of Agent or Landlord:		
Agent or Landlord	Email:	Phone:
Previous address:		
City:	State:	Post Code:
Own <input type="checkbox"/> Rent <input type="checkbox"/>	Weekly payment of rent:	Period of occupancy:
Name of Agent or Landlord:		
Agent or Landlord	Email:	Phone:

EMERGENCY CONTACT		
Name of a person not residing with you:		
Address:		
City:	State:	Post Code:
Relationship:		Phone:
Email:		

EMPLOYMENT INFORMATION		
Current employer:		
Employer address:	Period of Employment:	
Phone:	E-mail:	
City:	State:	Post Code:
Position:	Weekly wage:	Annual income:
Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Casual <input type="checkbox"/> (Hours per week)	Student <input type="checkbox"/> \$	Per Week/Fortnight
Self Employed <input type="checkbox"/> Name of Business:	Wage \$	
Business Address:	ABN:	
City:	State:	Post Code:
How Long Established?	Accountant Name :	Accountant Phone:
Other Income <input type="checkbox"/> (ie: Savings, Investments)	Other Income \$	

PROFESSIONAL REFERENCES - Not a family member or friend		
Name of a person not residing with you:		
Relationship:	Phone:	Email:
Name of a person not residing with you:		
Relationship:	Phone:	Email:
Name of a person not residing with you:		
Relationship:	Phone:	Email:

THE MELBOURNE

RESIDENCES

HOW DID YOU FIND OUT ABOUT THE MELBOURNE RESIDENCES?			
Building Sign <input type="checkbox"/>	Internet <input type="checkbox"/>	Recommendation <input type="checkbox"/>	Other: _____

HAVE YOU EVER BEEN EVICTED, OR ARE YOU IN DEBT TO ANOTHER OWNER/AGENT?	
Yes <input type="checkbox"/>	No <input type="checkbox"/> If Yes, please give details: _____

WOULD YOU BE INTERESTED IN EXTRA STORAGE FOR \$20 PER WEEK? (*Subject to availability)	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

AUTHORITY & PRIVACY DISCLAIMER

It is agreed that acceptance of this application is subject to a satisfactory report as to the tenants' credit worthiness. I understand that you as the agent are bound by the Privacy Act and the National Privacy Principles and authority

I hereby offer to rent the property from the owner under a lease to be prepared by the Agent. Should the landlord accept this application I agree to enter into a Residential Tenancy Agreement. I acknowledge that this application is subject to the approval of the owner/landlord. I declare that all information contained in this application is true and correct and given of my own free will. I declare that I have inspected the premises and am not bankrupt.

I authorise the Agent to obtain personal information from:

- (a) The owner or the Agent of my current or previous residence;
- (b) My personal referees and employer/s;
- (c) Any record listing or database of defaults by tenants;

If I default under a rental agreement, I agree that the Agent may disclose details of any such default to a tenancy default database, and to agents/landlords of properties I may apply for in the future.

I am aware that the Agent will use and disclose my personal information to:

- (a) communicate with the owner and select a tenant
- (b) prepare lease/tenancy documents
- (c) allow tradespeople or equivalent organisations to contact me
- (d) lodge/claim/transfer to/from a Bond Authority
- (e) refer to Tribunals/Courts & Statutory Authorities (where applicable)
- (f) refer to collection agents/lawyers (where applicable)
- (g) complete a credit check with TICA (Tenancy Information Centre Australia) and NTD (National Tenancy Database)

I understand I have the right to access my personal information by contacting your agency. I also have the right to correct this information if it is inaccurate, incomplete or out of date. I am aware that if my application is not successful it will be stored for a period of one (1) month only, after this it will be destroyed in compliance with Privacy Legislation. I am aware that if I do not complete this form or do not sign the consent below that my Application may not be considered by the owner of the relevant Property or, if considered, may be rejected, due to insufficient information.

Name _____ Date _____

Signature _____

Office use only:

App Approved / /	Owner notified / /	Owner Approved / / : am/pm
Tenant Notified / /	Lease Start / /	Lease Sign up / / : am/pm
Rent \$	Bond \$	Entered into PropertyMe / /
Lease drawn / /	Bond Loan? Y <input type="checkbox"/> N <input type="checkbox"/>	Welcome pack prepared / /

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