



Application for Residential Tenancy (One application to be completed per person)

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	PART 1: REN	TAL PROPERT	Y DETAILS				
ITEM 1:	AGENT DETAILS						
	AGENCY NAME: Pinnacle Properties Queensland Pty Ltd						
	ADDRESS: 4/191 W	ardell Street					
	SUBURB: ENOGGERA STATE: QLD POSTCODE: 4051						
	PHONE:	MOBILE:	FAX:	EMAIL:			
	0735558022	0423571883	0739101222	rent@pinnacleproperties.com.au			
ITEM 2:	PROPERTY DETAILS						
	ADDRESS:						
	SUBURB:			STATE:	POSTCODE:		
							
	Rent: \$	Rent pe	riod:	← weekly / fortnightly / monthly	Bond: \$		
	Tenancy Term:		Fixed term agreemen	Periodic agreement			
	Starting on:		E	inding on:			
	PART 2: APPL	LICANT DETAIL	LS				
ITEM 3:	CONTACT DETAILS						
	FULL NAME:				DATE OF BIRTH:		
	Have you been know	vn by any other name	(s)? Yes	No			
		ame(s) have you been					
	WORK PHONE:	MOBILE:	HOME PHONE:	EMAIL:			
	WORK FIIONE.	MOBILE.	HOWE FHONE.	LIVIAIL.			
	Dubaada Lisaasa ta sa						
	Driver's Licence/pas			State:	<u> </u>		
	Number of vehicles:		Re	gistration number(s):			
ITEM 4:	DEPENDANTS						
	Do you have any de	pendants? Y	es No				
	DEPENDANT FULL NA	AME(S):		RELATIONSHIP TO APPLICANT:	DEPENDANT DATE OF BIRTH:		
ITEM 5:	SMOKING						
	Are you or any of the	e dependants living wi	th you a smoker?	Yes No			
ITEM 6.		3	, , , , , , , , , ,				
ITEM 6:	PETS						
	Do you intend to kee	ep pets at the property	? Yes	No Number of pets:			
	Type of Pet/s:			Are your pets registered with a council?	Yes No		
	If Yes, please state v	which council:		-	<u> </u>		
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INITIALS (Note: initials not required if signed with Electronic Signature)



ITEM 7:	APPLICANTS ADDRESS HISTORY						
	CURRENT RESIDENTIAL ADDRESS:						
	-						
	SUBURB:	STA'	TE: POSTCODE:				
	PERIOD OF OCCUPANCY:	TYPE OF OCCUPANCY: Rent Owner Other: →					
	CURRENT AGENT/LESSOR (If renting):						
	AGENT/LESSOR PHONE:	FAX: EMAIL:					
	CURRENT RENT \$ Rent period:	REASON FOR LEAVING: weekly / fortnightly / monthly					
	PREVIOUS RESIDENTIAL ADDRESS:						
	SUBURB:	STA	TE: POSTCODE:				
	PERIOD OF OCCUPANCY:	TYPE OF OCCUPANCY:					
		☐ Rent ☐ Owner ☐ Other: →					
	PREVIOUS AGENT/LESSOR:						
	AGENT/LESSOR PHONE:	FAX: EMAIL:					
	PREVIOUS RENT: \$ Rent period:	REASON FOR LEAVING:					
ITEM 8:	EMPLOYMENT DETAILS						
	Are you employed? Yes	No (if no, please provide details of previous employer, if any)					
	Employment status: Full tim		f employed				
	OCCUPATION:	NET INCOME (per week)	Стрюуса				
		\$					
	DATE COMMENCED EMPLOYMENT (a	pprox.) DATE TERMINATED EMPL	OYMENT (if any):				
			<u> </u>				
	EMPLOYER/BUSINESS NAME:						
	4 D D D C C C C C C C C C C C C C C C C						
	ADDRESS:						
	CLIDLIDD	CTATE: DOCTOR	DE:				
	SUBURB:PHONE:	STATE: POSTCC FAX: EMAIL:	DE				
	THORE.	Linke.					
	IF SELF EMPLOYED, ACCOUNTANT'S NAME: PHONE:						
ITEM 9:	CENTRELINK PAYMENTS						
	Are you receiving any regular Centre	link payments? Yes No					
	TOTAL INCOME (PER WEEK):	FOTAL INCOME (PER WEEK).					
	\$	DATE PAYMENTS COMMENCED:					
ITEM CO							
ITEM 10:	STUDENT DETAILS	□ Voc □ No					
	Are you studying full time?	Yes No					
	AME OF EDUCATION INSTITUTION YOU ARE CURRENTLY ATTENDING: STUDENT IDENTIFICATION NUMBER:						
	Are you an overseas student?	Yes No If yes, Visa expiry date:					

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ITEM 11:	PERSONAL REFERENCES					
	Please do not list relatives, another applicant or partners a REFEREE 1:	RELATIONSHIP:				
			PHONE/MOBILE:			
	SUBURB:REFEREE 2:	STATE: POSTCODE:	RELATIONSHIP:			
			PHONE/MOBILE:			
	SUBURB:					
ITEM 12:	PERSONAL REPRESENTATIVE					
	i.e. preferred person(s) to be contacted in the event of an REPRESENTATIVE 1:	emergency.	RELATIONSHIP:			
		OTATE DOCTOOR	PHONE/MOBILE:			
	SUBURB:REPRESENTATIVE 2:	STATE: POSTCODE:	RELATIONSHIP:			
	ADDRESS:		PHONE/MOBILE:			
	SUBURB:	STATE: POSTCODE:				
	PART 3: SUPPORTING DOCUMENTS					
ITEM 13:	IDENTIFICATION					
	ou are required to meet a 100 point identification criterion upon submission of your application. The Agent/Lessor may photocopy any item and retain as part of your application.					
	Please tick the identifying documents you have provided v	with your application.				
	IMPORTANT: At least one form of Photo Identification	MUST be provided.				
	70 Points					
	Passport Full birth certific 40 Points	cate Citizenship certificate				
	Australian Driver's Licence Student Photo	ID Department of Veterans Af	fairs card			
	Centrelink card Proof of age ca					
	25 Points					
	Medicare card Council rates n	notice Motor vehicle registration				
	Telephone bill Electricity bill	Gas bill				
	Tenancy History Ledger Bank statemen					
	Last FOUR rent receipts Rent bond receipts	eipt Previous tenancy agreeme	nt			
ITEM 14:	PROOF OF INCOME					
	You are also required to supply the Agent/Lessor with pro	e also required to supply the Agent/Lessor with proof of your income upon submission of your application.				
	Employed: Last TWO pay slips.					
	Not employed: Centrelink statement.					

PART 4: DECLARATION

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:				
PA	RT 6: ACKNOWLEDGEMENT				
PLE	ASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES or 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		
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:				
			SIGN		
	Signature: Date:		HERE		

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