



WorldTower Commercial Suites
Level 15, Suite 1507,
87-89 Liverpool St
Sydney NSW 2000

Tel: 02 9269 0008 Fax: 02 9269 0002 ABN: 91 138 420 685

Property address: _____

No. of occupants will be in this property: _____ No. of children & ages (if any): _____

No. and type of pets (if any): _____

Length of tenancy: _____ Commencement date: _____ Rent per week: \$ _____

APPLICANT 1

Family name: _____ Given name: _____ Driver's license no: _____

Current address: _____

Home phone: _____ Work phone: _____ Mobile: _____

Email: _____ Date of birth: _____ Marital Status: _____

Current rental details

Landlord/Agent: _____ Phone: _____

Length of tenancy: _____ Rent per week: \$ _____

Previous rental details

Address: _____

Landlord/Agent: _____ Phone: _____

Length of tenancy: _____ Rent per week: \$ _____

Current employment details

Employer (Company): _____

Contact name (Manager): _____ Phone: _____

Position: _____ Length of employment: _____

Employment status: Full time Part time Others _____ Income: _____

Emergency contact details

Name: _____ Relationship: _____ Phone: _____

Address: _____

APPLICANT 2

Family name: _____ Given name: _____ Driver's license no: _____

Current address: _____

Home phone: _____ Work phone: _____ Mobile: _____

Email: _____ Date of birth: _____ Marital Status: _____

APPLICANT 2 CONTINUED**Current rental details**

Landlord/Agent: _____ Phone: _____

Length of tenancy: _____ Rent per week: \$ _____

Previous rental details

Address: _____

Landlord/Agent: _____ Phone: _____

Length of tenancy: _____ Rent per week: \$ _____

Current employment details

Employer (Company): _____

Contact name (Manager): _____ Phone: _____

Position: _____ Length of employment: _____

Employment status: Full time Part time Others _____ Income: _____**Emergency contact details**

Name: _____ Relationship: _____ Phone: _____

Address: _____

Personal/Business references (not relatives)

1. Name: _____ Relationship: _____ Phone: _____

2. Name: _____ Relationship: _____ Phone: _____

3. Name: _____ Relationship: _____ Phone: _____

Cost

Bond (4 weeks rent) \$ _____

Rent in advance \$ _____

Residential Tenancy Agreement preparation fee \$ _____

Less deposit \$ _____

Total \$ _____

I/We apply for approval to rent the premises referred to in this form. I/We acknowledge that the reservation fee of \$_____ has been paid to reserve the premises for a period of _____ days/weeks in my/our favour, subject to the approval of the landlord, and that if I/we do not proceed the tenancy, this fee will be forfeited to the landlord (on a per day basis). If the application is approved, a Residential Tenancy Agreement for the premises will be prepared. I/We declare that I/We am/are not a bankrupt or an undischarged bankrupt and that the information provided by me/us is true and correct. I/We have inspected the premises and wish to apply for tenancy of the premises for a period of _____ months, at a rental of \$_____ per week. This rental is within my/our means and I/we am/are over 18 years of age. I/We declare that the above information is true and correct acknowledge that I/we will be liable for prosecution if otherwise.

Signature of Applicant 1	Printed name of Applicant 1	Date
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Signature of Applicant 2	Printed name of Applicant 2	Date
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