

RENTAL APPLICATION FORM

18 Dunstan Street, Clayton VIC 3168

T 03 9975 7888

clayton@fncjxre.com.au



**first
national**
REAL ESTATE

Clayton



Thank you for choosing to apply for a property through First National Clayton.

Please note that the following requirements will need to be met in order for us to process your application:

1. You have **inspected** the property prior to applying
2. You have completed **all sections in the application form** (where applicable) and attached **three (3) main supporting documents**:

Photo Identification	e.g. drivers licence, passport, proof of age card (keypass)
Proof of Income	e.g. 2 to 3 recent payslips, letter of employment, student ID, scholarship document, Centrelink statement, self-employed documents
Bank Statement	Latest statement issued by the bank (3 month transaction)

3. **Each** applicant (aged 18 years or older) residing at the property must complete a separate application form.

IMPORTANT

YOUR APPLICATION CAN ONLY BE PROCESSED ONCE WE HAVE RECEIVED THE COMPLETED APPLICATION FORM AND ALL THE REQUIRED SUPPORTING DOCUMENTS FROM ALL APPLICANTS. ALL PROPERTIES ARE TO BE LEASED AS INSPECTED UNLESS SPECIFIED IN WRITING.

A lease is not considered to be secured until rent and bond payments have been received and all tenants have signed and understood all terms as outlined in the lease agreement. We confirm that the owner reserves the right to withdraw this offer within 48 hours should you be unable to present payments and sign documentation in the requested timeframe.

We highly recommend you return your completed application to us (in hard copy or via email) as soon as possible to eliminate any disappointment of the property being leased prior. Alternatively, you can also apply online through 1Form.

First National Clayton will endeavour to process your application and have a response to you from the landlord between 3 to 5 business days.

First National Clayton business hours:

Monday to Friday 9:00am to 5:30pm & Saturday 9:00am to 4:00pm

OFFICE USE ONLY

Date & time application received:

Copy given to applicant: Yes / No

- Handed in at Reception Left in over night box
 Emailed Faxed

Initialled:

G. APPLICANT RENTAL HISTORY - CURRENT ADDRESS

11. What is your current address?

Postcode

12. How long have you lived at your current address?

Years	Months
-------	--------

13. Why are you leaving this address?

--

14. Is the property at this address: Rented Owned Other

--

15. Please tell us about this property.

Name of Rental Provider

--

Rental Provider's email address

--

Rental Provider's phone number Weekly rent paid

	\$
--	----

Has your bond been refunded? YES NOIf NO, why?

--

H. APPLICANT RENTAL HISTORY - PREVIOUS ADDRESS

16. What was your previous residential address?

--

17. How long did you live at this address?

Years	Months
-------	--------

18. Why did you leave this address?

--

19. Was this property: Rented Owned Other

--

20. Please give us further information about this rented property.

Name of Rental Provider

--

Rental Provider's email address

--

Rental Providers's phone number Weekly rent paid

	\$
--	----

Was bond refunded in full? YES NOIf NO, why?

--

I. CURRENT EMPLOYMENT DETAILS

21. Please provide your employment details.

What is your occupation?

--

What is the nature of your employment?

 Full Time Part Time Casual Self-employed
*Complete section L

Employer's name (inc. accountant if self employed or institution if a student)

--

Employer's address

--

Postcode

--

Contact name

Phone number

--	--

Length of employment

Employer's email address

--	--

Weekly income

Other income

\$	\$
----	----

J. PREVIOUS EMPLOYMENT DETAILS

22. Please provide your previous employment details.

Occupation

--

Employer's name

--

Length of employment

Employer's email address

--

--

Contact name

Phone number

--

--

K. STUDENT DETAILS (IF APPLICABLE)

23. University Details

University

--

Course name

--

Income source

Income received

--

\$		per week
----	--	----------

L. SELF EMPLOYMENT DETAILS (IF APPLICABLE)

24. Self-employment details

Business name

--

ABN/CAN

--

Accountant/Solicitor

Phone

--

--

Notes

--

--

M. CENTRELINK (IF APPLICABLE)

25. Type

--

CRN

Amount received

--

\$		per fortnight
----	--	---------------

N. EMERGENCY CONTACTS & REFERENCES

26. Please provide a contact in case of emergency.

Given name/s

Surname

--

--

Relationship to you

Phone number

--

--

27. Please provide two personal references (not related to you).

1. Given name/s

Surname

--

--

Relationship to you

Phone number

--

--

2. Given name/s

Surname

--

--

Relationship to you

Phone number

--

--

O. ADDITIONAL NOTES

--

--

--

--

--

--