



Marketing Co-Ordination Australia
www.mcoaustralia.com Pty Ltd
ABN 460 681 64723

PLEASE TAKE NOTE

Make sure you completely fill this form in, if there are any areas that don't match your situation cross out but do not leave blank.

Every person over the age of 18 MUST fill in their own copy of this form.

Couple may include their income together, but please indicate this.

We do not copy your ID's for you at the interview please bring copies with you that shows all details including images clearly

ALL IN- COMPLETE FORMS WILL BE REJECTED

APPLICATION FOR TENANCY

Application Form

Phone: (07) 3103 5151

Application can be handed in at the inspection or scanned and emailed to rentals@mcoaustralia.com

An online version of this application is also available:

-DECLARATION -

Privacy Act Acknowledgement Form for Tenant Applicants & Approved Occupants

YOU MUST READ THE FOLLOWING AND SIGN

In order to process this application all questions must be answered fully and truthfully. The completion of this application is not an acceptance. This form provides information about how we the below named agent handle your personal information, as required by the National Privacy Principles in the Privacy Act 1988, and seeks your consent to disclosures to TICA Default Tenancy Control Pty Ltd (TICA) in specified circumstances. If you do not consent to the disclosure of your personal information to TICA we cannot process your application.

Before a tenancy accepted we collect your information to assess the risk to our clients in providing you with a property you have requested to rent and if considered acceptable provide you with a tenancy for the property.

In order to assess your application we disclose your personal information to:

- The Lessor / Owners for approval or rejection of your application,
- TICA Default Tenancy Control Pty Ltd to assess the risk to our clients and verify the details provided in your tenancy application.
- Referees to validate information supplied in your application
- Other Real Estate Agents to assess the risk to our clients

During and after the tenancy we may need to disclose your personal information to

- Tradespeople to contact you for repairs and maintenance of the property.
- Refer to Tribunals or Courts having jurisdiction seeking orders or remedies.
- Refer to Debt Collection Agencies where Tribunal / Court orders have been awarded.
- Refer to TICA Default Tenancy Control Pty Ltd to record details of your tenancy history.
- Refer to the Lessors / Owners insurer in the event of an insurance claim.
- To provide future rental references to other asset managers / owners.

If you fail to provide your personal information and do not consent to the uses set out above we cannot properly assess the risk to our client or carry out our duties as an asset manager. Consequently we cannot provide you with the property you requested to rent.

Failure to fully complete this application may result in the application not being processed.

I the said applicant declare that all the information contained in this application is true and correct, and that the information is provided of my own freewill. I further authorize the agent to contact any of the referees or references supplied by me in this application for verification of the details provided.

I the applicant/s declare that I am not bankrupt and that I have not entered into any scheme of arrangement for payment of monies to any creditors. I further declare that I/we am/are not paying off any previous rental debt.

I authorize the agent to access and check any information that may be listed on me on the TICA DEFAULT TENANCY DATABASE and any other tenancy database and or Social media which may be available.

I agree and understand that in the event of this application being approved by the agent, the agent may report any defaults that may occur from time to time in my tenancy with TICA DEFAULT TENANCY DATABASE and any other tenancy database which may be available. I understand that in the event of a default being reported to TICA DEFAULT TENANCY DATABASE or any other tenancy database, the removal of such information is subject to the guidelines of the database companies.

I agree and understand that in the event of this application being approved all initial monies will be paid to the agent by DIRECT DEBIT in the required time given.

I agree that I will abide by the policies of the office of the agent and all body Corp bylaws as may be provided to me in relation to this tenancy.

I agree to allow the agent to photocopy and store electronically the information supplied by me for their records

I agree that upon communication of acceptance of this application by the landlord or his agent that this tenancy shall be binding on both the landlord and the tenant. I further agree that I will sign the Tenancy Agreement, and be bound by the terms and conditions of the Tenancy Agreement.

I agree and understand that in the event of this application being rejected there is no requirement at law for the agent to disclose to me any reason for such rejection. I also agree that I will not raise any objection for not being provided a reason for any rejection of this application

ADDRESS OF PROPERTY: _____

APPLICATION MADE: ___/___/20___ PROPERTY INSPECTED: ___/___/20___ PRICE: \$_____/week

BOND: \$_____ Rent the above property for a period of (tick) 12 6 Months Starting ___/___/20___

FULL NAME: _____

SIGNATURE: _____ TODAYS DATE: ___/___/20___

PLEASE NOTE: ALL ITEMS ON THIS PAGE MUST BE FILLED IN COMPLETELY, IF AN ITEM DOES NOT PERTAIN TO YOURSELF PLEASE STRIKE A LINE THROUGH.

SURNAME: _____ **GIVEN NAMES:** _____

DOB: ___/___/___ DRIVERS LICENCE NO: _____ STATE OF ISSUE: _____

PASSPORT NO: _____ 18+ CARD NO: _____

PHONE: (H) _____ (W) _____ (M) _____

EMAIL: _____

ABOUT YOU:

NUMBER OF PEOPLE MOVING IN: ADULTS: _____ CHILDREN: _____ AGES OF CHILDREN: _____, _____, _____, _____

PETS: YES ___ NO ___ (tick) TYPE OF PET: _____ BREED: _____

VEHICLE: TYPE: _____ MODEL: _____ COLOUR: _____

REGO: _____ OWNED: ___ FINANCED: ___ (tick)

PARTNER: (If Living with you)

SURNAME: _____ **GIVEN NAMES:** _____

DOB: ___/___/___ DRIVERS LICENCE NO: _____ STATE OF ISSUE: _____

PASSPORT NO: _____ 18+ CARD NO: _____

PHONE: (H) _____ (W) _____ (M) _____

EMAIL: _____

VEHICLE: TYPE: _____ MODEL: _____ COLOUR: _____

REGO: _____ OWNED: ___ FINANCED: ___ (tick)

YOUR CURRENT LIVING ADDRESS: _____

SUBURB: _____ POST CODE: _____

CURRENTLY (TICK) RENTING ___ LIVING WITH FAMILY ___ BOARDING ___ OTHER ___ (tick)

IF OTHER PLEASE PROVIDE DETAILS: _____

LIVING AT THIS ADDRESS FROM: ___/___/20___ APPROX.: _____ YRS ___ MONTHS

RENT\$ _____ BOND \$ _____ AGENCY DETAILS: _____ CONTACT PERSON: _____

PHONE: _____ EMAIL: _____

YOUR PREVIOUS ADDRESS: _____

SUBURB: _____ POST CODE: _____

CURRENTLY (TICK) RENTING ___ LIVING WITH FAMILY ___ BOARDING ___ OTHER ___

IF OTHER PLEASE PROVIDE DETAILS: _____

LIVING AT THIS ADDRESS FROM: ___/___/20___ APPROX.: _____ YRS ___ MONTHS

RENT\$ _____ BOND \$ _____ AGENCY DETAILS: _____ CONTACT PERSON: _____

PHONE: _____ EMAIL: _____

EMPLOYMENT:

OCCUPATION: _____ FULLTIME ___ PART/TIME ___ CASUAL ___

CAREER ___ UNEMPLOYED ___ STAY HOME PARENT ___ (tick)

EMPLOYER: _____ CONTACT PERSON: _____ PHONE: _____

EMAIL: _____

PERIOD OF EMPLOYMENT: FROM ___/___/___ TO _____ INCOME: \$ _____

Note: IF SELF EMPLOYED EVIDENCE WILL BE REQUIRE SUCH AS TAX OR ANNUAL RETURNS

BUSINESS NAME: _____ ABN: _____

PARTNERS EMPLOYER: (if living with you)

OCCUPATION: _____ FULLTIME ___ PART/TIME ___ CASUAL ___

CAREER ___ UNEMPLOYED ___ STAY HOME PARENT ___ (tick)

EMPLOYER: _____ CONTACT PERSON: _____ PHONE: _____

EMAIL: _____

PERIOD OF EMPLOYMENT: FROM ___/___/___ TO ___/___/___ INCOME: \$ _____

Note: IF SELF EMPLOYED EVIDENCE WILL BE REQUIRE SUCH AS TAX OR ANNUAL RETURNS

BUSINESS NAME: _____ ABN: _____

The following questions must be answered

1. Has your tenancy ever been terminated by a landlord or agent Yes/No
If yes give details _____
2. Have you ever been refused a property by any landlord or agent Yes/No
If yes give details _____
3. Are you in debt to another landlord or agent Yes/No
If yes give details _____
4. Have any deductions ever been made from your rental bond Yes/No
If yes give details _____
5. Is there any reason known to you that would affect your future rental payments Yes/No
If yes give details _____

I acknowledge that the landlord and landlord's agent will rely on the truth of the above answers in assessing the application for tenancy.

100 POINT IDENTIFICATION

Prior to any Tenancy Application being considered each applicant is required to produce sufficient identification which totals 100 points. Photocopies MUST show your image clearly

DRIVERS LICENSE / PROOF OF AGE CARD	30 POINTS *
PASSPORT	30 POINTS *
TENANCY HISTORY LEDGER	20 POINTS
PREVIOUS TENANCY AGREEMENT	20 POINTS
PREVIOUS FOUR RENT RECEIPTS	20 POINTS
RENTAL BOND RECEIPT	20 POINTS
PAY ADVICE (PAY SLIPS,ETC)	15 POINTS* Must supply
MOTOR VEHICLE REGISTRATION	15 POINTS
TELEPHONE / ELECTRICITY/ GAS ACCOUNT	15 POINTS
BANK or CREDIT CARD STATEMENTS	15 POINTS
COUNCIL or WATER RATES	15 POINTS
HEALTH CARE CARD / PENSION CARD	15 POINTS
MEDICARE CARD	10 POINTS
BIRTH CERTIFICATE	10 POINTS

NOTE: Must have at least one of the items listed with "*" next to the points

Statement of Rental Affordability

We require you to complete this form in order for us to consider your tenancy application. We need to be certain that you have the ability to pay the rent on the property you are applying for. Proof of income will be required from you and any co-tenant applicants. Partner's income can be added together but state if added.

Added partners income Yes /No (CIRCLE ONE)

INCOME: **WEEKLY**
Income Per week: Wages, Salary etc (Less TAX) \$ _____ **PROOF OF**
Benefits: \$ _____ **INCOME REQUIRED**
Other income: _____ \$ _____
TOTAL INCOME (1) \$ _____

LIABILITIES: **WEEKLY**
(Divide your monthly statements by four to get your weekly amounts)
Car Payments: \$ _____
Outstanding rent payments: \$ _____
Credit card payments: \$ _____
Personal Loans: \$ _____
Other debts \$ _____
School Fees: \$ _____
TOTAL LIABILITIES (2) \$ _____

LIVING EXPENSES: **WEEKLY**
Phone/ Mobile (divide monthly bill by 4) \$ _____
Health Insurance: \$ _____
Rent: (currently paying): \$ _____
Power/ Gas/Water: \$ _____
Car (registration and fuel): \$ _____
Weekly living (including food, clothing entertainment etc): \$ _____
Insurances (Life, Car, Contents etc): \$ _____
TOTAL LIVING EXPENSES (3) \$ _____

TOTAL INCOME (1) \$ _____
LESS (-) TOTAL LIABILITIES (2) \$ _____
SUB TOTAL (A)\$ _____
LESS (-) LIVING EXPENSES(3) \$ _____
BALANCE (Actual affordability) (B)\$ _____

IConfirm that the information supplied above is an accurate representation with my correct income and expenditures and not misleading in any way, I have supplied proof in supporting documents to ascertain my correct income.

SIGNED BY: _____ DATE: / /20