

PRIVACY ACT ACKNOWLEDGEMENT FORM FOR TENANCY APPLICATIONS

As an independent business, Pinpoint Property is bound by the National Privacy Principles. We collect your personal information on this application form to verify your details & access the risk to our clients in providing you with a property to rent.

In order to assess your application, we disclose the information you submit to:

- The lessor/owner for approval or rejection of your application
- TICA Default Tenancy Control Pty Ltd to assess the risk to our clients
- Referees you list, to validate information supplied in your application
- Other Real Estate Agents, to assess the risk to our clients

If you are a successful application for the above property, we may disclose your personal details during & after your tenancy to:

- Tradespeople to contact you for repairs & maintenance of the property
- Tribunals or Courts having jurisdiction seeking orders or remedies
- Debt Collection Agencies, Credit providers & related person to permit them to contact you
- TICA Default Tenancy Control Pty Ltd to record details of your tenancy history
- Lessors/Owners insurer in the event of an insurance claim
- Future rental references to other asset managers/owners

If you fail to provide your personal information and do not consent to the uses set our above, we cannot properly access the risk to our client and consequently, we cannot process your application.

Your application will be saved on file for a period of one month, after which time it will be destroyed.

In accordance with the National Privacy Principles, you are entitled to have access to any personal information that we may hold on any of our databases. You can also update or correct this information if incomplete or out of date.

If you would like more information, please contact the TICA group – <u>www.tica.com.au</u> Or Pinpoint Property.

PRIVACY CONSENT

I/We acknowledge that I have read the above privacy disclosure Statement of Pinpoint Property, understand and agree to what it entails

Applicant Name/s: _____

Signature/s: _____

Date: _____



BEFORE YOU START YOUR APPLICATION

IDENTIFICATION

Before your application will be considered, each applicant will need to provide a minimum of 100 points of identification

PLEASE PROVIDE ONLY ONE OF THE FOLLOWING:

| SOURCE | POINTS |
|-------------------|--------|
| DRIVERS LICENCE | 50 |
| PASSPORT | 50 |
| PROOF OF AGE CARD | 50 |

PLUS ANY OF THE FOLLOWING TO MAKE UP THE 100 POINTS REQUIRED

| SOURCE | POINTS |
|--------------------------------|--------|
| RECENT TENANCY HISTORY LEDGER | 30 |
| PREVIOUS TENANCY AGREEMENT | 20 |
| RENTAL BOND RECEIPT | 20 |
| MOTOR VEHICLE REGISTRATION | 20 |
| TELEPHONE ACCOUNT | 20 |
| ELECTRICITY ACCOUNT | 20 |
| BANK OR CREDIT CARD STATEMENT | 20 |
| BIRTH CERTIFICATE | 20 |
| PENSION CARD | 10 |
| HEALTH CARE CARD/MEDICARE CARD | 10 |

PROOF OF INCOME

Each applicant will need to provide proof of income which includes any of the following:

- □ 4x of your most recent pay slips
- □ Letter of employment from your employer
- □ Centrelink statement
- □ If you are self-employed, you will need to provide a statement of income from your account or a bank statement to show proof of income

ALL IDENTIFICATION NEEDS TO BE PHOTOCOPIED AND INCLUDED WITH YOUR TENANCY APPLICATION

Have you applied for Public Housing prior to submitting this application? YES/NO



RENTAL APPLICATION

| PROPERTY ADDRESS: | | | |
|------------------------------------|--------------|-----------|--------|
| REQUESTED COMMENCEMENT OF T | ENANCY DATE: | | |
| REQUESTED LEASE TERM(CIRCLE): | 6 MONTHS | 12 MONTHS | OTHER: |
| RENT AMOUNT PER WEEK: | | | |
| NUMBER OF OCCUPANTS: | | AGES: | |
| | | | |

PETS – If you do not own any pets, please leave this section blank
TYPE & AMOUNT: ______
BREED/S:______
REGISTRATION NUMBER:

If you have pet/s and they are approved for the property, a photograph of each pet will need to be submitted to keep on file for verification purposes. This can be emailed or submitted with your application.

| COMPANY OR BUSINESS DETAILS – If you are not self-employed, please leave this section blank | | |
|---|--------------|--|
| COMPANY OR BUSINESS NAME: | | |
| ADDRESS: | | |
| LESSOR/AGENT: | | |
| ACN or BUSINESS REGISTRATION NUMBER: | DATE FORMED: | |
| ACCOUNTANT: | CONTACT: | |
| ADDRESS: | | |
| PHONE: | FAX: | |
| | | |

Has any of the applicants for this property ever been terminated by a landlord or agent? YES/ NO If yes, give details

Have any of the applicants for this property ever been refused a property by any landlord or agent? YES/NO

If yes, give details _____

Are any of the applicants for this property in debt to another landlord or agent? YES/NO If yes, give details

Have any deductions ever been made from a bond of the occupants applying for this property? YES/NO If yes, give details _____

Is there any reason known to you that would affect the future rental payments of this property? YES/NO If yes, give details _____

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



| SURNAMES: | | |
|--|---|------------------------|
| | H:DRIVERS LICENCE NUMBER: PASSPORT: | |
| STATE. | PASSPUR | |
| CONTACT DETAILS | | |
| | WOBK. | HOME: |
| EMAIL: | | |
| | | |
| VEHICLE | | |
| | | INANCED? |
| REGU: | | |
| CURRENT OCCUPATION | | |
| | EMP | LOYER: |
| | | |
| | РНОГ | NF |
| | | NE: |
| | | liy |
| FERIOD OF LIVIF LOTIVILINT. | | |
| PREVIOUS OCCUPATION | | |
| | FMP | LOYER: |
| | | |
| | | NE: |
| CONTACT | FIIUI | |
| INCOME: C | | |
| PERIOD OF EMPLOYMENT: OTHER INCOME | Weekly/Fornightly/Annua | lly |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E | Weekly/Fornightly/Annua | Ily AMOUNT \$ |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E | Weekly/Fornightly/Annua | lly |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua BENEFITS RECEIVED EMERGENCY PHONE | Ily AMOUNT \$ |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: NEAREST RELATIVE NOT LI | Weekly/Fornightly/Annua BENEFITS RECEIVED EMERGENCY PHONE VING WITH YOU | IIy AMOUNT \$:: |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua BENEFITS RECEIVED EMERGENCY PHONE VING WITH YOU | Ily AMOUNT \$ |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: NEAREST RELATIVE NOT LI | Weekly/Fornightly/Annua BENEFITS RECEIVED EMERGENCY PHONE VING WITH YOU | IIy AMOUNT \$:: |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: NEAREST RELATIVE NOT LI NAME: ADDRESS: | Weekly/Fornightly/Annua BENEFITS RECEIVED EMERGENCY PHONE VING WITH YOU | IIy AMOUNT \$:: |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua | IIy AMOUNT \$:: |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua | IIy AMOUNT \$:: |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua SENEFITS RECEIVED EMERGENCY VING WITH YOU PHONE: PHONE: | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua BENEFITS RECEIVED EMERGENCY VING WITH YOU PHONE: WING WITH YOU | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua BENEFITS RECEIVED EMERGENCY VING WITH YOU PHONE: W | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua SENEFITS RECEIVED EMERGENCY PHONE VING WITH YOU PHONE: W | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua SENEFITS RECEIVED EMERGENCY PHONE VING WITH YOU PHONE: WI | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua SENEFITS RECEIVED EMERGENCY PHONE VING WITH YOU PHONE: WI | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua | Ily |
| PERIOD OF EMPLOYMENT: OTHER INCOME ADDITIONAL INCOME OR E PERSON TO CONTACT IN E NAME: | Weekly/Fornightly/Annua SENEFITS RECEIVED EMERGENCY PHONE VING WITH YOU PHONE: WI WI WI | Ily |

0.00



| GIVEN NAMES: | | | |
|--|---------------------------|-----------------------|-----------|
| SURNAMES: | | | |
| DATE OF BIRTH: | | | |
| STATE: | PASS | SPORT: | |
| CONTACT DETAILS | | | |
| MOBILE: | WORK: | HOME: | |
| EMAIL: | | | |
| VEHICLE | | | |
| TYPE: | | | |
| REGO: | | or FINANCED? | |
| CURRENT OCCUPATION | | | |
| OCCUPATION: | 1 | EMPLOYER: | |
| | | | |
| ADDRESS: CONTACT: | I | PHONE: | |
| INCOME: \$ | Weekly/Fornightly/Ar | nually | |
| PERIOD OF EMPLOYMENT: | | | |
| PREVIOUS OCCUPATION | | | |
| OCCUPATION: | ł | EMPLOYER: | |
| ADDRESS: | | | |
| CONTACT: | | | |
| INCOME: \$ | Weekly/Fornightly/Ar | nually | |
| OTHER INCOME ADDITIONAL INCOME OR B | ENEFITS RECEIVED | | AMOUNT \$ |
| PERSON TO CONTACT IN E | | ONE: | |
| NEAREST RELATIVE NOT LIV | /ING WITH YOU | | |
| NAME: | PHON | E: | |
| ADDRESS: | | | |
| | | | |
| SIDENTIAL HISTORY – | f the same as applicant 2 | L, please leave blank | |
| RRENT ADDRESS | | | |
| RIOD OF OCCUPANCY: | | | |
| ENT/LANDLORD: | | CONTACT: | |
| ASON FOR LEAVING: | | | |
| EVIOUS ADDRESS 1: | | | |
| RIOD OF OCCUPANCY: | | | |
| ENT/LANDLORD: | | CONTACT: | |
| ASON FOR LEAVING: | | | |
| EVIOUS ADDRESS 2: | | | |
| RIOD OF OCCUPANCY: | | | |
| ENT/LANDLORD: | | CONTACT: | |
| | | | |

0.00



Tell us a little about yourself...

What are you favourite features about this property?

Have you had any negative experiences renting? Tell us more...

If not, what are some positives you have experienced?

In your opinion, what is the most important quality a managing agent should have?

What is your favourite thing about the Mackay Region?



SIGHT UNSEEN ACKNOWLEDGEMENT – If you have inspected this property, please leave blank

In reference to the above property, this is to acknowledge that I/we have been requested by Pinpoint Property staff to view the property before applying to access the suitability of the property to our requirements.

It has been strongly recommended by Pinpoint Property that because we are unable to personally view the property, we have been requested to have someone we know and trust, and/or is aware of our needs to inspect on our behalf.

We acknowledge below

- □ We have had a friend view the property and are happy to proceed with the application.
- □ We do not have anyone to inspect the property

With the above in mind, we wish to continue with our application and acknowledge that we have been informed and agree that we will be asked to sign a lease and pay the bond within the allotted time to secure the property should our application be successful. Furthermore, we have been advised that the lease is a legal binding document, so if we find the property unsuitable, the lease will stand and we will be expected to abide by all lease conditions.

We are applying for the property of our free will.

APPLICANT ONE SIGNATURE: ______ DATE:_____/_____

APPLICANT TWO SIGNATURE: ______ DATE: ____ / _____

FINAL ACKNOWLEDGEMENTS

- In order to process this application all questions must be answered fully. The complete of this application is not an acceptance. Failure to fully complete this application may result in the application not being processed.
- I/We the said applicant/s declare that all the information contained in this application is true and correct, and that the information is provided of my/our own freewill. I/We further authorize the agent to contact any of the referees or references supplied by me/us in this application for verification of the details provided.
- I/We the applicant/s declare that I/we am/are not bankrupt and that I/we have not entered into any scheme of arrangement for payment of monies to any creditors. I/we further declare that I/we am/are not paying off any previous rental debt.
- I/We authorize the agent to access and check any information that may be listed on me/us on the TICA DEFAULT TENANCY DATABASE and any other tenancy database which may be available.
- I/We 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/us any reason for such rejection. I/We also agree that I/we not raise any objection for not being provided a reason for any rejection of this application.
- I/We 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 the tenancy with TICA DEFAULT TENANCY DATABASE and any other tenancy database that may be available. I/We 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/We agree and understand that in the event of this application being approved all initial monies will be paid to the office by CASH.
- I/We agree that no keys for the property will be provided by the agent to me/us until such time as all monies owed are to be paid in full in accordance with clause 8 above.
- I/We agree that I/We will abide by the polices of the office of the agent as may be provided to me/us in relation to this tenancy.
- I/We agreement to allow the agent to photocopy the information supplied by me/us for their records
- I/We agree that upon communicant of acceptance of this application by the landlord or his agent that his tenancy shall be binding on both the landlord and the tenant. I/We further agree that I/We will sign the tenancy Agreement and be bound by the terms and conditions of the Tenancy Agreement.
- I/We agree that upon communicant of acceptance of this application by the landlord or the agent that a NON-REFUNDABLE deposit equal to one weeks rent will be paid in order to secure the property. This money will be put towards the total amount owing for key collection.

| APPLICANT 1 NAME:APPLICANT 1 SIGNATURE: | _DATE:// |
|---|----------|
| APPLICANT 2 NAME: APPLICANT 2 SIGNATURE: | _DATE:// |
| AGENT SIGNATURE: | |

| NOTES: |
|--------------|
| |
| |
| <u> </u> |
| |

Thank you for taking the time to fill out this application form. All applications can be submitted to Pinpoint Property by:

EMAIL: team@pinpointproperty.com.au

or

by dropping into our office at 47 GORDON STREET MACKAY