

F. APPLICANT HISTORY	
8. How long have you lived at your current address?	
<input type="text"/> Years	<input type="text"/> Months
9. Why are you leaving this address?	
<input type="text"/>	
10. Landlord/Agent details of this property (if applicable)	
Name of landlord or agent	
<input type="text"/>	
Landlord/agent's phone no.	Weekly Rent
<input type="text"/>	\$ <input type="text"/>
11. What was your previous residential address?	
<input type="text"/>	
<input type="text"/>	
Postcode	
12. How long did you live at this address?	
<input type="text"/> Years	<input type="text"/> Months
13. Landlord/Agent details of this property (if applicable)	
Name of landlord or agent	
<input type="text"/>	
Landlord/agent's phone no.	Weekly Rent
<input type="text"/>	\$ <input type="text"/>
Was bond refunded in full?	If not why not?
<input type="text"/>	<input type="text"/>
G. EMPLOYMENT HISTORY	
14. Please provide your employment details	
What is your occupation?	
<input type="text"/>	
What is the nature of your employment? (FULL TIME/PART TIME/CASUAL)	<input type="text"/>
Employer's name (inc. accountant if self employed or institution if student)	
<input type="text"/>	
Employer's address	
<input type="text"/>	
<input type="text"/>	
Postcode	
Contact name	Phone no.
<input type="text"/>	<input type="text"/>
Length of employment	Net Income
<input type="text"/> Years	<input type="text"/> Months
<input type="text"/>	\$ <input type="text"/>
15. Please provide your previous employment details	
Occupation?	
<input type="text"/>	
Employer's name	
<input type="text"/>	
Length of employment	Net Income
<input type="text"/> Years	<input type="text"/> Months
<input type="text"/>	\$ <input type="text"/>

H. CONTACTS / REFERENCES	
16. Please provide a contact in case of emergency	
Surname	Given name/s
<input type="text"/>	<input type="text"/>
Relationship to you	Phone no.
<input type="text"/>	<input type="text"/>
17. Please provide 2 personal references (not related to you)	
1. Surname	Given name/s
<input type="text"/>	<input type="text"/>
Relationship to you	Phone no.
<input type="text"/>	<input type="text"/>
2. Surname	Given name/s
<input type="text"/>	<input type="text"/>
Relationship to you	Phone no.
<input type="text"/>	<input type="text"/>
I. OTHER INFORMATION	
18. Car Registration	
<input type="text"/>	
19. Please provide details of any pets	
Breed/type	Council registration / number
1.	<input type="text"/>
2.	<input type="text"/>
PLEASE NOTE	
Initial payments must be made by cash, bank cheque or money order within 24 hours after approval of application. No Personal Cheques accepted.	
Keys will not be handed over until the lease agreement has been signed by all applicants.	
This application is accepted subject to the availability of the property on the due date and no action shall be taken by the applicant against the landlord and the agent should any circumstances arise whereby the property is not available for occupation on the due date.	
HOW DID YOU FIND OUT ABOUT THIS PROPERTY?	
<input type="radio"/> The Age	<input type="radio"/> The Internet
<input type="radio"/> Board	<input type="radio"/> Counter List
<input type="radio"/> Referral	<input type="radio"/> Other (specify)
<input type="radio"/> Local Paper	<input type="radio"/> Relocation Company
PLEASE PROVIDE US WITH 100 POINTS OF IDENTIFICATION	
Driver's Licence	50
Passport	50
Proof of Age Card	50
Student ID Card	50
Copy of Mobile Phone Account	20
Copy of Medicare Card	20
Concession / Pension Card	10
Copy of gas/Water/Electricity account	30 each
OFFICE USE ONLY	
Property Rental	
\$ <input type="text"/> per week	\$ <input type="text"/> per month