



REIQ Accredited Agency

	Application for Residential Tenancy (One application to be completed per person)	
	PART 1: RENTAL PROPERTY DETAILS	
ITEM 1:	AGENT DETAILS	
	AGENCY NAME:	
	Jay Wu Estate Agents	
	ADDRESS: 59 Albany Creek Road	
	SUBURB: Aspley STATE: QLD POSTCODE: 4034	
	PHONE: MOBILE: FAX: EMAIL:	
	0402686929 0402686929 jaywu@jaywu.com.au	
ITEM 2:	PROPERTY DETAILS	
	ADDRESS:	
	SUBURB: STATE: POSTCODE:	
	Rent: \$ Rent period:	
	(as advertised) (maximum of 4 weeks' rent)	
	NOTE TO APPLICANT: The Agent/Lessor cannot legally accept an offer from you to pay an amount of rent greater than the	
	advertised price or to pay rent more than 1 month in advance.	
	Tenancy Term: Fixed term agreement Periodic agreement	
	Starting on: Ending on:	
	PART 2: APPLICANT DETAILS	
ITEM 3:		
II EIVI 3.	CONTACT DETAILS FULL NAME: DATE OF BIRTH:	
	Have you been known by any other name(s)? Yes No	
	If Yes, what other name(s) have you been known by?	
	WORK PHONE: MOBILE: HOME PHONE: EMAIL:	
	WORKTHORE. MODIEE. HOMETHORE. EMPLE.	
	Driver's Licence/passport number: State:	
	Number of vehicles: Registration number(s):	_
ITEM 4:	DEPENDANTS	
	Do you have any dependants? Yes No	
	DEPENDANT FULL NAME(S): RELATIONSHIP TO APPLICANT: DEPENDANT DATE OF BIR	ſH:
ITEM E.	CHOKING	
ITEM 5:	SMOKING	
ITEM 0	Are you or any of the dependants living with you a smoker? Yes No	
ITEM 6:	PETS	
	Do you intend to keep pets at the property? Yes No Number of pets:	
	Type of Pet/s: Are your pets registered with a council? Yes No	
	If Yes, please state which council:	
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INITIALS	(Note: initials not required if signed with Electronic Signature)	/415

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ITEM 7:	APPLICANTS ADDRESS HISTORY					
	CURRENT RESIDENTIAL ADDRESS:					
	PERIOD OF OCCUPANCY: TYPE OF OCCUPANCY:	POSTCODE:				
	CURRENT AGENT/LESSOR (If renting):					
	AGENT/LESSOR PHONE: FAX: EMAIL:					
	CURRENT RENT Rent period: Reason FOR LEAVING: **weekly / fortnightly / monthly** **meason FOR LEAVING: **mea					
	PREVIOUS RESIDENTIAL ADDRESS:					
	SUBURB:	POSTCODE:				
	PREVIOUS AGENT/LESSOR:					
	AGENT/LESSOR PHONE: FAX: EMAIL:					
	PREVIOUS RENT: Rent period: Reason FOR LEAVING: weekly / fortnightly / monthly					
ITEM 8:	EMPLOYMENT DETAILS					
	Are you employed? Yes No (if no, please provide details of previous employer, if any) Employment status: Full time Part time Casual Contract Self employed OCCUPATION: NET INCOME (per week)					
	DATE COMMENCED EMPLOYMENT (approx.) DATE TERMINATED EMPLOYMENT (if a	ny):				
	EMPLOYER/BUSINESS NAME:					
	ADDRESS:					
	SUBURB: STATE: POSTCODE:					
	PHONE: FAX: EMAIL:					
	IF SELF EMPLOYED, ACCOUNTANT'S NAME:	PHONE:				
ITEM 9:	CENTRELINK PAYMENTS					
	Are you receiving any regular Centrelink payments? Yes No DESCRIPTION OF PAYMENT(S):					
	TOTAL INCOME (PER WEEK): DATE PAYMENTS COMMENCED: \$					
ITEM 10:	STUDENT DETAILS					
	Are you studying full time?					
	NAME OF EDUCATION INSTITUTION YOU ARE CURRENTLY ATTENDING: STUDENT IDENTIFICATION NUMBER:					
	Are you an overseas student? Yes No If yes, Visa expiry date:					

INITIALS (Note: initials not required if signed with Electronic Signature)

ITEM 11:	PERSONAL REFERENCES						
	Please do not list relatives, another applicant or partners and provide business hours contact numbers. REFEREE 1:				RELATIONSHIP:		
	ADDRESS:						
	SUBURB:			STATE ⁻	POSTCODE:	PHONE/MOBILE:	
	REFEREE 2:					RELATIONSHIP:	
	ADDRESS:						
						PHONE/MOBILE:	
	SUBURB:			STATE:	POSTCODE:		
ITEM 12:	PERSONAL REPR	ESENTATIVE					
	i.e. preferred pers	on(s) to be contact	ted in the event of an emerge	ency.			
	REPRESENTATIVE 1:					RELATIONSHIP:	
	ADDRESS:						
						PHONE/MOBILE:	
	SUBURB:REPRESENTATIVE			STATE:	POSTCODE:	RELATIONSHIP:	
	ADDRESS:					PHONE/MOBILE:	
	SUBURB:				POSTCODE:	THORE MODILE.	
	PART 3: SU	PPORTING D	OCUMENTS				
ITEM 13:	IDENTIFICATION						
	You are required The Agent/Lessor	to meet a 100 poin may photocopy ar	t identification criterion upon ny item and retain as part of y	submission of yo your application.	ur application.		
	Please tick the ide	entifying documents	s you have provided with you	ır application.			
	IMPORTANT: At	least one form of	Photo Identification MUST	be provided.			
	70 Points						
	Passport		Full birth certificate	Cit	izenship certificate		
	40 Points						
	Australian Dri		Student Photo ID		partment of Veterans Aff		
	Centrelink ca	rd	Proof of age card	Sta	ate/Federal Government	Photo ID	
	25 Points						
	Medicare care	d	Council rates notice	Mo	tor vehicle registration		
	Telephone bil	I	Electricity bill	Ga	s bill		
	Tenancy Hist	ory Ledger	Bank statement	Cre	edit card statement		
	Last FOUR re	ent receipts	Rent bond receipt	Pre	evious tenancy agreeme	nt	
ITEM 14:	PROOF OF INCOM	IE .					
	You are also requ	ou are also required to supply the Agent/Lessor with proof of your income upon submission of your application.					
	Employed:	Last TWO pay sli	ps.				
	Self employed:	elf employed: Bank statements, Group Certificate, Tax Return or Accountant's letter.					
	Not employed:	Centrelink statem	nent.				

PART 4: DECLARATION

PLEASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE or FALSE			
	I, the Applicant		
1.	Have never been evicted by an Agent/Lessor	True	False
2.	Have no known reasons that would affect my ability to pay rent	True	False
3.	Was refunded the rental bond for my last address in full (if applicable)	True	False
	If false, please advise what deductions were made from your bond?		
4.	Have no outstanding debt to another Agent/Lessor?	True	False
	If false, why are you in debt to your past Agent/Lessor?		
PA	RT 5: TENANCY DATABASES		
The	Agency may use the following tenancy databases to check the rental history of the Applicant/s:		
PA	RT 6: ACKNOWLEDGEMENT		
PLE	ASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES or NO		
	I, the Applicant		
1.	Acknowledge that my personal contents insurance is not covered under any Lessor insurance policy/s and understand that it is my responsibility to insure my own personal belongings.	Yes	No
2.	Understand that you as the Agent/Lessor have collected this information for the purpose of determining whether I am a suitable tenant for the property - in particular to check my identification, my ability to care for the property, my character and my creditworthiness.	Yes	☐ No
	2.1 for such purposes, I authorise you to contact the persons named in this application, and to undertake such enquiries and searches (including tenancy databases searches) as you consider reasonably necessary.	Yes	☐ No
	2.2 in doing so, I understand that information provided by me may be disclosed to, and further information obtained from, referees named in this application and other relevant third parties.	Yes	☐ No
3.	Acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide reasons as to why.	Yes	No
4.	Consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the Agent/Lessor to pass my details onto others which may include (but is not limited to) insurance companies, body corporates, contractors, other real estate agents, salespeople and tenancy default databases.	Yes	☐ No
5.	Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), the Standard Terms and any special terms before completing this application.	Yes	No
6.	Acknowledge that I have received or have available the Information Statement (Form 17a), body corporate by-laws (if applicable) before completing this application.	Yes	No
7.	Acknowledge that I have signed the agency's Privacy Notice and Consent.	Yes	No
8.	Acknowledge that the Lessor and Applicant (tenant) are bound by this agreement immediately upon communication of either the lessor or agent's acceptance of the application.	Yes	☐ No
9.	Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 of the <i>Electronic Transactions (Queensland) Act 2001 (Qld)</i> and the <i>Electronic Transactions Act 1999 (Cth)</i> .	Yes	☐ No
10.	Declare that the above information is true & correct and that I have supplied it of my own free will.	Yes	☐ No
	Name of Applicant:		
	· · · · · · · · · · · · · · · · · · ·		SIGN
	Signature: Date:		HERE

INITIALS (Note: initials not required if signed with Electronic Signature)