Residential Application Form

For your application to be processed you must answer all questions

Including the reverse side)				
A. AGENCY DETAILS				
Hudson Bond Property Ma	nagement			
Address: 632 Doncaster Rd Doncaster VIC 3108 Phone: (03) 9840 7700 Fax: (03) 9840 7600 Email: rentals@hudsonbond.com.au Web: www.hudsonbond.com.au				
h U V				
B. PROPERTY DETAILS				
What is the address of the property you	u would like to rent?			
	Postcode			
2. Lease commencement date?	Month Year			
3. Lease term? Years Months				
4. How many tenants will occupy the prop	perty?			
Adults Children Age	S			
Rent Amount				
\$				
C. PERSONAL DETAILS				
5. Please give us your details				
Mr Ms Miss	Mrs Other			
Surname	Given Name/s			
Date of Birth	Driver's licence number			
Driver's licence expiry date	Driver's licence state			
Passport no.	Passport country			
Pension no. (if applicable)	Pension type (if applicable)			
6. Please provide your contact details				
Home phone no.	Mobile phone no.			
Work phone no.	Fax no.			
Email address				
7. What is your current address?				
,				
	Postcode			



UTILITY CONNECTIONS

Your Po	orter	Telephone: 1300 400 600 Fax: 1300 326 468 www.yourporter.com.au				
YourPorter is a FREE service connecting utilities and other services. If the Agent approves this application, YourPorter will connect your water for the purpose of usage charges at your new property on behalf of the Real Estate Agent. YourPorter will be contacting you by phone, SMS, or email for the purposes of assisting you to connect your utilities within 24 hours of receiving this application for next business day connection.						
☐ Electricity	☐ Gas	☑ Water				
☐ Telephone	☐ Pay TV	☐ Internet				
☐ Car Insurance	☐ Home & Contents	☐ Health Insurance				
☐ Life Insurance	☐ Home Loans	- Treater mourance				
) -#O k^* u \otimes V $"$ V) $"$ ##- h u $"$ V #- I/We consent to the disclosure of this application form (including any personal information contained in this form) to YourPorter Pty Ltd (ABN 36 252 576 050) for the purpose of allowing YourPorter and its service providers to contact me for the connection of services as offered by YourPorter.						
I/We acknowledge that if I/We do not provide my/our personal information, YourPorter will not be able to provide these services to me/us. YourPorter will ensure that my/our personal information is collected, used, held and disclosed in accordance with the requirements of the Privacy Act 1988 (Cth).						
I/We acknowledge that YourPorter may receive a benefit in relation to the connection of any of the services listed above. I/We consent to YourPorter contacting me by phone or SMS in relation to the connection of the services listed above. I/We acknowledge that this consent permits YourPorter to contact me even if the numbers listed on this application are listed on the Do Not Call Register. YourPorter will otherwise collect, hold, use and disclose personal information in accordance with their privacy policies, which are available at www.yourporter.com.au/general/privacy-policy/.YourPorter is a free service, but I/We acknowledge that standard connection fees may apply for services connected (in addition to the ongoing service fees). I/We acknowledge that neither YourPorter nor the Agent accept any responsibility for any delay in or failure to arrange or provide for any connection of a service or for any loss, damage, cost or expense in connection with such delay or failure. By signing this						
	nd YourPorter is a value add prod					
Signature		Date				
E. DECLARATION						
I hereby offer to rent the property from the owner under a lease to be prepared by the Agent. Should this application be accepted by the landlord I agree to enter Into a Residential Tenancy Agreement. I acknowledge that this application is subject to the approval of the owner/landlord. I declare that all information contained in this application (including the reverse side) is true and correct and given of my own free will. I declare that I have Inspected the premises and am not bankrupt.						
I authorise the Agent to obtain personal Information from: (a) The owner or the Agent of my current or previous residence; (b) My personal referees and employer/s;						
(c) Any record listing or database of defaults by tenants such as NTD, TICA or TRA for the purpose of checking your tenancy history;						
I am aware that I may access my personal information by contacting - NTD: 1300 563 826						
• TICA: 1902 220 346						
TRA: (02) 9363 9244 If I default under a rental agreement, I agree that the Agent may disclose details of any						
such default to a tenancy default database, and to agents/landlords of properties I may apply for in the future.						

I am aware that the Agent will use and disclose my personal information in order to:

- (a) communicate with the owner and select a tenant
- (b) prepare lease/tenancy documents
- (c) allow tradespeople or equivalent organisations to contact me (d) lodge/claim/transfer to/from a Bond Authority
- (e) refer to Tribunals/Courts & Statutory Authorities (where applicable)
- (f) refer to collection agents/lawyers (where applicable)
 (g) complete a credit check with NTD (National Tenancies Database)
- (h) transfer water account details into my name

I am aware that if information is not provided or I do not consent to the uses to which personal information is put, the Agent cannot provide me with the lease/tenancy of the premises. I am aware that the agent will disclose my personal information to YourPorter for the purposes of transferring the water account into my name. This will enable YourPorter to connect all accepted tenants to relevant water boards for water usage.

Signature	Date

F. APPLICANT HISTORY		H. CONTACTS / REFERENCE	:S	
8. How long have you lived at your current address?		16. Please provide a contact in case of emergency		
Years Months		Surname	Given name/s	
9. Why are you leaving this address?		Relationship to you	Phone no.	
10. Landlord/Agent details of this property (if applications)	ble)			
Name of landlord or agent		17. Please provide 2 personal ref		
		1. Surname	Given name/s	
Landlord/agent's phone no. Weekly Re	nt			
\$		Relationship to you	Phone no.	
\\				
11. What was your previous residential address?			C	
		2. Surname	Given name/s	
Postcode				
42 11 1 1 2 1 1 2 1 1 2 1 1 2 2 1 1 2 2 1 1 2 2 2 1 1 2 2 2 1 1 2 2 2 1 1 2 2 2 1 1 2		Relationship to you	Phone no.	
12. How long did you live at this address?				
Years Months				
13. Landlord/Agent details of this property (if application)	hle)	I. OTHER INFORMATION		
Name of landlord or agent	isicy	18. Car Registration		
		19. Please provide details of any	pets	
Landlord/agent's phone no. Weekly Re	nt	Breed/type	Council registration / number	
\$		1.		
Was bond refunded in full? If not why	not?	2.		
was bolid refulided in full:	not:			
		PLEASE NOTE		
G. EMPLOYMENT HISTORY		1	y cash, bank cheque or money order	
G. EMPLOYMENT HISTORY 14. Please provide your employment details		within 24 nours aπer approval of accepted.	f application. No Personal Cheques	
What is your occupation?				
, .		Keys will not be handed over unt signed by all applicants.	al the lease agreement has been	
		This configuration is a second of the	and the discount of the last of the same o	
What is the nature of your employment?		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		
(FULL TIME/PART TIME/CASUAL)	: .: .:	the agent should any circumstances arise whereby the property is not available		
Employer's name (inc. accountant if self employed or inst	tution if student)	for occupation on the due date.		
		HOW DID YOU FIND OUT ABO	OUT THIS PROPERTY?	
Employer's address		○ The Age ○ The Int	ernet	
		○ Board ○ Counte	r List Relocation Company	
		○ Referral ○ Other (specify)	
Postco	oae	PLEASE PROVIDE US WITH 100 POINTS OF IDENTIFICATION		
Contact name Phone no.		Driver's Licence	50	
		Passport	50	
Length of employment	Net Income			
Years Months	\$	Proof of Age Card	50	
rears	7	Student ID Card	50	
15. Please provide your previous employment details Occupation?	5	Copy of Mobile Phone Account	20	
Occupation:		Copy of Medicare Card	20	
		Concession / Pension Card	10	
Employer's name				
			SU Eduli	
Landaria		OFFICE USE ONLY		
Length of employment	Net Income	Property Rental		
Years Months	\$	\$ per wee	per month	