



SPRINGWOOD TOWER APARTMENT HOTEL

9 Murrabung Road
Springwood QLD 4127
ABN: 15 496 570 689

Telephone: 07 3387 7000
Facsimile: 07 3290 2616
Email: manager@springwoodtower.com.au

<u>OFFICE USE ONLY</u>	Approved / Declined / Cxld	TICA: Sent / Back	Employment: Sent / Back
Rental: Sent / Back	Trade: Sent / Back	Accountant: Sent / Back	Searches: _____

Permanent Rental Application Form

For your application to be considered you must answer all questions (including attached) sufficiently & supply copies of the below:

- Proof of income (e.g. 3x Recent Payslips / or a Recent Tax Certificate / or Bank Statements)
- Copy of Drivers Licence or Passport

If Renting/Rented:

- Copy of your Current Rental Ledger or 3x Recent Rent Receipts

If you own a Property:

- Copy of Recent Rates or Utilities Bill

If you're applying under a Company Name:

- Copy of ABN Certificate

UNIT NUMBER BEING APPLIED FOR: _____

Please Note that Springwood Tower Apartment Hotel Units are Fully Furnished (unless otherwise specified). If you Require Linen &/or Weekly Cleaning Please Specify Below (Additional Fees Apply):

Linen Required YES _____ NO _____
 Clean Required YES _____ NO _____

***If this is a Company Application, still place the Tenant's details below (who will be residing in the apartment)**

APPLICANT:

Full name of applicant _____ Date of Birth _____
 Current Address _____
 Home Phone _____ Mobile Phone _____
 Fax Number _____ Work Phone _____
 Email Address _____

If more than one Applicant/Potential Tenant - Place Details on the following Page if Family, otherwise complete separate applications

PLACE OF RESIDENCE (For Address Listed Above):

Period at current Address: _____ Years _____ Months Current lease expiry _____
 Name of owner or agent _____
 Email Address _____
 Phone Number/s _____ Rent paid per week _____

Previous address (if the above was for less than 3yrs) _____
 Period at previous address: _____ Years _____ Months Date Vacated _____
 Name of owner or agent _____
 Phone Number/s _____ Rent paid per week _____

Why did you leave / why are you leaving your current address _____
 Was your Bond refunded in full? YES / NO. If no, Why? _____

INCOME / EMPLOYMENT:

Employers Name (if Company Application – See relevant sections below) _____

Employers address _____

Contact Name _____ Contact Number _____

Email Address _____

Length of Employment: Years _____ Months _____ NETT income/salary _____ per week

Centrelink Payment _____ Payment amount _____ per week

Centrelink Payment _____ Payment amount _____ per week

SELF EMPLOYED:

Business Name & Address _____

ABN/A.C.N. _____

Type of Business _____ Phone _____

Accountants Name _____ Phone _____

COMPANY APPLICATION (Only if Applicable):

Company Name & Address _____

Phone _____ Email _____ ABN _____

TRADE REFERENCES FOR COMPANY APPLICATIONS:

1. Name _____ Phone _____

Email _____

Address _____

2. Name _____ Phone _____

Email _____

Address _____

OTHER APPLICANTS / OCCUPANTS:

Names of ALL other persons wishing to occupy (also supply Documents as stated on top of Pg. 1 for every adult applicant):

2nd Person: Name _____ Contact Number _____ Age _____

3rd Person: Name _____ Contact Number _____ Age _____

4th Person: Name _____ Contact Number _____ Age _____

5th Person: Name _____ Contact Number _____ Age _____

6th Person: Name _____ Contact Number _____ Age _____

EMERGENCY CONTACT:

Name of Relative or other person to contact in case of an emergency _____

Relationship to Tenant _____ Contact Number _____

OTHER:

Do you currently have any applications with other agents? YES / NO

Do you intend to run a commercial enterprise from this property? YES / NO

I/We have inspected the above property and wish to take tenancy for a period of _____ months from _____ at a weekly rental of \$ _____ (inclusive of GST).

I/We undertake to pay the **BOND (EQUAL TO 4 WEEKS RENT)** plus the **FIRST 2 WEEKS RENT (unless otherwise agreed)** Credit Card, Cash, EFTPOS on or prior to the commencement date of the Tenancy Agreement. **BOND TRANSFERS ARE NOT ACCEPTED.**

I/We agree that no keys for the property will be provided until all monies owed are received in full before arrival.

Please note: Springwood Tower Apartment Hotel has a strict 14 day payment period for all accounts.

Electricity / Gas (for hot water) / Phone Usage and Foxtel will be billed to you each month.

Applications are only processed/reviewed Monday to Friday 9am to 4pm, and generally take 24 to 48 business hours to process.

You're responsible for any of your personal belongings whilst renting the apartment.

I/We understand that in the event of this application being rejected there is no requirement for KT Corporation P/L to disclose to me any reason for such rejection of this application.

I/We do solemnly and sincerely declare that the information provided by me is true and correct and has been willingly supplied to assist in the assessment of my application.

I/We have read and signed the Privacy Act Acknowledgment attached to this application.

I/We also understand that approval, once received, is only valid for 2 weeks unless otherwise agreed.

Applicants Signature _____ Date _____

Witness Signature _____ Date _____



SPRINGWOOD TOWER APARTMENT HOTEL

KT PROPERTY MANAGEMENT PTY LTD T/A SPRINGWOOD TOWER APARTMENT HOTEL
ABN: 15 49 657 0689 PH: (07) 3387 7000 FX: (07) 3290 2616
EMAIL: manager@springwoodtower.com.au

In accordance with Privacy Principle 1.3 of the Privacy Act 1988 we require you to read and sign this acknowledgement.

We are an independently owned and operated business. We are bound by the National Privacy Principles. We collect personal information about you in this form to assess your application for a residential tenancy. We may need to collect information about you from your previous landlords or letting agents, your current employer and your referees.

We may disclose personal information about you to the owner of the property to which this application relates. If this application is successful we may disclose your details to service providers relevant to the tenancy relationship including maintenance contractors, housekeeping and the landlord's insurers. We may also send the personal information about you to the owners or agents of any other properties at your request.

If you do not sign this form then your application for a residential tenancy may not be considered by the owner of the relevant property or, if considered, may be rejected.

PRIVACY CONSENT

I, the Applicant acknowledge that I have read and understand this form and hereby authorise Springwood Tower Apartment Hotel to collect information about me from:

- ✓ My previous letting agents and/or landlords
- ✓ My Employer/personal referees
- ✓ TICA Tenancy Database

I, authorise Springwood Tower Apartment Hotel to disclose the personal information it collects about me to the owner of the property. I also authorise Springwood Tower Apartment Hotel to refer my details if requested to:

- ✓ Financial Services (to assist with a loan application)
- ✓ Insurance Services (for contents insurance, claims and other insurance products)
- ✓ Trades people (to enable them to arrange access for repairs and maintenance)

Applicant/s Full Name/s _____

Applicant/s Signature/s _____