



FREE UTILITIES CONNECTION – Tenants are responsible for the connection of all utilities





A Free Service to connect your utilities. We will reduce your stress and save you time by arranging your utility connections. We will contact you within 2 hours.

ELECTRICITY GAS TELEPHONE BROADBAND FOXTEL

Ph: 1300 850 360 Fax: 1300 661 160

Email: sales@onthemove.com.au

☐

YES!! I would like On The Move to contact me.

☒

WATER (standard connection with all applications)

Terms & Conditions - By ticking the box above, you are consenting to On The Move contacting you to arrange your services. On The Move may need to disclose personal information to utility companies to arrange your services. Please see On The Move’s Privacy Policy at www.onthemove.com.au. On The Move and your Agent may receive a benefit for arranging your services. On The Move & your agent do not accept responsibility for any delay or failure to connect your services. Standard connection fees & bonds may apply.

PROFESSIONAL REFERENCES

1. Reference name: _____ Relationship: _____

Occupation: _____ Contact phone number: _____

Mobile number: _____ Email: _____

2. Reference name: _____ Relationship: _____

Occupation: _____ Contact phone number: _____

Mobile number: _____ Email: _____

TENANCY DECLARATION AND PRIVACY STATEMENT

I confirm the following:

1. I acknowledge that this is an application to Lease the property and that my application is subject to the Owners approval and the current occupants giving up vacant possession. No action will be taken against the Landlord or Agent if this application is unsuccessful. I declare that all information contained in this application is true and correct and given of my own free will. I declare that I have inspected the property and that I am not bankrupt

2. **The tenant is responsible for the connection and payment of all utilities.**

3. I authorise the agent to obtain personal information form:

- The owner or agent of my current or previous residence
- My personal referees and employer/s
- Any record listing or database of defaults by tenants

4. 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

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

- Communicate with the owner and select a tenant
- Prepare a lease/tenancy documents
- Allow tradespeople or equivalent organisations to contact me
- Lodge/claim/transfer to/from the Bond authority
- Refer to Tribunal/Courts & Statutory Authorities (where applicable)
- Refer to collection agents/lawyers (where applicable)
- Complete a credit check with NTD (National Tenancies Database)ph. 1300 563 826
- Transfer water account details into my name

6. 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 I may access personal information on the contact details above.

SIGNATURE: _____ DATE: ____ / ____ / ____

OFFICE USE ONLY

APPLICATION RECIEVED:



TENANCY APPLICATION FORM

Email: leasing@prdwerribee.com.au

Address: PRD nationwide Werribee
2/85 Synnot Street, Werribee

Website: www.prdwerribee.com.au

Telephone: 03 9742 7557

Fax: 03 9742 5443

Opening Hours: Mon-Fri 9.00am – 5.30pm
Sat 9.00am – 2.00pm

ABN: 65 891 212 456

1Form Code: PRD285

IMPORTANT INFORMATION FOR PROSPECTIVE TENANTS

We do NOT give out keys. Our properties can be viewed by arranging an inspection.

Under no circumstances are you to enter a property or make contact with the existing tenants, even if you are invited to. Please contact our office to make mutually convenient time.

In order to process the tenancy application, each applicant must provide the following information:

Fully completed and signed Tenancy Application, including your acknowledgement of the privacy statement.

- Photo identification – Drivers License or Passport
- Current payslips / income statements and bank statements
- Two (2) current references – references from family/friends will not be accepted
- Confirmation of current residential address – telephone, electricity or gas accounts
- Next of kin details in case of an emergency
- If currently renting, a copy of your tenant ledger. If you are renting privately a copy of your landlords rates notice to prove ownership and rental payment receipts.

Incomplete applications will NOT be processed.

IF YOUR APPLICATION IS APPROVED

On approval of your application the tenancy agreement must be signed within 24 hours. Your first rental payment and / or Bond must also be paid at this time. If you cannot meet this requirement the property will continue to be advertised.

Bond **MUST be paid by bank cheque or money order** and made payable to the Residential Tenancies Bond Authority (RTBA). Cash will not be accepted.

Your first months rent payment must also be paid by bank cheque or money order made payable to PRD nationwide Werribee Trust Account, or alternatively transferred via B-Pay.

CASHLESS OFFICE – We do not accept cash under any circumstance

IF YOUR APPLICATION IS NOT APPROVED

You will be notified at our earliest convenience if your application is not approved by the landlord.

Your application, including supporting documents, will be shredded. Please ensure that you do not provide us with original documents (especially references), our staff are happy to copy your originals for a fee of \$2.

PROPERTY INFORMATION

Rental address:

If applicable, do you have a second PRD nationwide rental property you wish to apply for?

Rental amount: _____ per week

Tenancy term: 6mths ☐ 12mths ☐

Bond amount: _____

Proposed lease commencement date: ____ / ____ / ____

What date did you view the property? ____ / ____ / ____

Have you previously rented through PRD nationwide (Jens Gaunt Werribee) YES ☐ NO ☐

If yes which property did you rent and when: _____

During the inspection did you find the property in a reasonably clean condition? YES ☐ NO ☐

If no please specify: _____

PERSONAL DETAILS

Full name: _____ Mr Mrs Miss Mr Dr

Date of birth: ____ / ____ / ____ Drivers License / ID number: _____ Expiry date: ____ / ____ / ____

Phone number: _____ Mobile number: _____

Work phone number: _____ Email address: _____

Number of occupants: Adults ☐ Children ☐ Name & Ages: _____

Do you have any pets? YES ☐ NO ☐ Type / breed: _____ Age: ☐

Do you own an investment property? YES ☐ Manging agent: _____ Ph: _____

NEXT OF KIN – Emergency contact **Must be completed** (parents, siblings not living with you)

Full name: _____ Relationship to you: _____

Address: _____

Phone number: _____ Mobile: _____

CURRENT ADDRESS DETAILS

Address: _____

Are you the:

Owner YES ☐ Please provide copy of rates notice

Renter YES ☐ Please provide copy of your tenant ledger

How long have you been at the property: _____ Rental amount: _____ per week

Agent / Landlord: _____ Contact number: _____

Sharing YES ☐ Please provide copy of your tenant ledger / proof of payments

Living with parents YES ☐ Please provide your parents contact details

Name/s: _____ Phone: _____

Reason for leaving: _____

PREVIOUS ADDRESS DETAILS

Address: _____

Were you the:

Owner YES ☐

Renter YES ☐ How long were you at the property: _____ Rental amount: _____

Agent / Landlord: _____ Contact number: _____

Sharing YES ☐

Living with parents YES ☐ Please provide your parents contact details

Name/s: _____ Phone: _____

CURRENT EMPLOYMENT DETAILS

Employer / Company: _____ Position held: _____

Period of employment: _____ Income (after tax): _____

Contact person: _____ Phone number: _____

PREVIOUS EMPLOYMENT DETAILS

Employer / Company: _____ Position held: _____

Period of employment: _____ Income (after tax): _____

Contact person: _____ Phone number: _____

SELF EMPLOYED DETAILS

Company name: _____ ABN: _____

Company Address: _____

Business type: _____ Position held: _____

Accountant's name: _____ Phone number: _____

PLEASE PROVIDE CURRENT/LAST FINANCIAL YEAR INCOME STATEMENT OR GROUP CERTIFICATE

STUDENT DETAILS

School / University: _____ Year of study: _____

Are you receiving financial support: YES ☐ NO ☐

Parent ☐ Scholarship ☐ Other ☐ Please specify: _____

Parents/guardian contact details: (if providing financial support)

Name: _____ Phone number: _____

PENSION / CENTRELINK / FAMILY SUPPORT PAYMENTS

Type of benefit: _____

Benefit amount: _____ per week

PLEASE PROVIDE CURRENT CENTERLINK INCOME STATEMENT