Collection Notice

You agree that for the purpose of this Application for Tenancy, Compass Property Group may make enquiries of the persons given as referees, next of kin or emergency contacts by you and also make enquiries of such other persons or agencies as the owner may see fit.

The personal information you give in this Application for Tenancy or collected from other sources is necessary for Compass Property Group to verify your identity, to process and evaluate the offer, to manage the tenancy and to conduct the agents business. Personal information collected about you in this process and during the course of the tenancy, if the Application is successful, may be disclosed for the purposes for which it was collected, to other parties including to the owner, referees, other agents, or third party operators of tenancy reference data bases may also be disclosed to the agent or owner.

If you enter into the Residential Tenancy Agreement or you fail to comply with your obligations under the Tenancy Agreement/Lease that fact and other relevant personal information collected about you during the course of this Application for Tenancy may also be disclosed to the owner, third party operators of tenancy reference data bases or other real estate agents.

If you would like to access the personal information the owners or agents hold, you can do so by contacting the agent.

You can also correct this information if it is inaccurate, incomplete or out of date. If the information in this Application, option or the lease is not provided, the agents may not be able to process the Application for Tenancy properly or manage the tenancy properly.

Applicant Name:		
Applicant Signature:		
Date:		



Application for Residential Tenancy

		IINE I NOI EN	TY DETAILS						
EM 1:	AGENT DETAILS								
	AGENCY NAME:								
	Compass Propert				10,000	-			
	ADDRESS: P O Box 108								
	MAGNETIC ISLAND								
	SUBURB: HORSE PHONE:	MOBILE:	FAX:	EMAIL:	STATE	: QLD POS	TCODE: 4819		
	07 4778 5588	0433149656	07 4778 5455	1,00000,0000,00000	compassproperty.com	au			
EM 2:	PROPERTY DETAIL ADDRESS:								
	SUBURB:	· · · · · · · · · · · · · · · · · · ·			STATE	:: POS	TCODE:		
	Rent: \$	Rent p	eriod:	← weekl	ly / fortnightly / monthly	Bond: \$			
	Tenancy Term:		Fixed term agreemer		Periodic agreen	- 101 -			
	Starting on:			Ending on:	Thousa agrees				
		1787	<u> </u>	ariding on.					
M 3:	FULL NAME:		10 Oct. 10	Specific S	1		DATE OF BIRTH:		
EM 3:	FULL NAME: Have you been known	own by any other name name(s) have you bee MOBILE:	(10) 	□ No	44.		DATE OF BIRTH:		
EM 3:	Have you been kno	own by any other name name(s) have you bee MOBILE:	n known by?		State:		DATE OF BIRTH:		
EM 3:	FULL NAME: Have you been known of Yes, what other nown work PHONE:	own by any other name name(s) have you bee MOBILE:	HOME PHONE:						
EM 3:	Have you been known of Yes, what other in WORK PHONE: Driver's Licence/pa Number of vehicles	own by any other namename(s) have you bee MOBILE:	HOME PHONE:	EMAIL:					
	Have you been known of Yes, what other in WORK PHONE: Driver's Licence/pa Number of vehicles DEPENDANTS Do you have any de	own by any other name (s) have you bee MOBILE: assport number:	HOME PHONE:	EMAIL:	umber(s):				
	Have you been known of Yes, what other in WORK PHONE: Driver's Licence/pa Number of vehicles	own by any other name (s) have you bee MOBILE: assport number:	HOME PHONE:	EMAIL:					
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INITIALS (Note: initials not required if signed with Electronic Signature)

ITEM 7:	APPLICANTS ADDRESS HISTORY							
	CURRENT RESIDENTIAL ADDRESS:	-	- Ordinani -					
	SUBURB: PERIOD OF OCCUPANCY:	TYPE OF OCCUPA	NCY: Owner		Other: →	STATE:	POSTCODE:	
	CURRENT AGENT/LESSOR (If renting):							
	AGENT/LESSOR PHONE: FA	X:	EMAIL:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	CURRENT RENT \$ Rent period:	←we	ekly / fortnightly / mo	onthly	REASON FOR	LEAVING:		
	PREVIOUS RESIDENTIAL ADDRESS:	1 11100-11					*********	
	SUBURB:	- 17 (F) (H)			7,000	STATE:	POSTCODE:	
	PERIOD OF OCCUPANCY:	TYPE OF OCCUPA Rent	NCY: Owner		Other: →	STATE	POSICODE.	
¥0	PREVIOUS AGENT/LESSOR:							
	AGENT/LESSOR PHONE: FA	X:	EMAIL:					
	PREVIOUS RENT: Rent period:	← we	ekly / fortnightly / mo	onthly	REASON FOR	LEAVING:	2000 at 1	
ITEM 8:	EMPLOYMENT DETAILS							
	Are you employed? Yes	No (if no, pl	ease provide details	of pre	vious employer	if any)		
	Employment status: Full time OCCUPATION:	Part time	Casual		Contract NET INCOME	Self employ (per week)	ed	
	DATE COMMENCED EMPLOYMENT (app	rox.)		9	T	ATED EMPLOYMENT	(if any):	
	EMPLOYER/BUSINESS NAME:							
	ADDRESS:		_// 100010-3-1		- II-min			
	SUBURB:				STATE:	POSTCODE:		
	PHONE: FA	X:	EMAIL:		∆re per variable i in			
	IF SELF EMPLOYED, ACCOUNTANT'S NA	AME:				-	PHONE:	
ITEM 9:	CENTRELINK PAYMENTS	- TT,		7		-, c	- y, ' = E	
	Are you receiving any regular Centrelin DESCRIPTION OF PAYMENT(S):	k payments?	Yes No)				
	TOTAL INCOME (PER WEEK):	DATE PAYMENTS (COMMENCED:		(()		100 M	
TTEM 10:	STUDENT DETAILS	TI LIBERT S						
	Are you studying full time?	Yes [] No		e Promoto Nobeles A			
	NAME OF EDUCATION INSTITUTION YOU	J ARE CURRENTLY AT	I ENDING: ST	UDEN	T IDENTIFICATIO	ON NUMBER:		
	Are you an overseas student?	Yes] No If	yes, V	isa expiry date:	15		

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

	Please do not list relatives, anoth	RELATIONSHIP:						
	ADDRESS:		OTF.					
	Self-Con-Constitutional Con-	Sint Control of the C			PHONE/MOBILE:			
	SUBURB: REFEREE 2:		STATE:	POSTCODE:				
	NLPEREE 2.				RELATIONSHIP:			
	ADDRESS:			1911				
	-		100		PHONE/MOBILE:			
	SUBURB:		STATE:	POSTCODE:				
ITEM 12:	PERSONAL REPRESENTATIVE			4 4 4 1 4 1 5	The figure of the proof the Ti			
	i.e. preferred person(s) to be cont	i.e. preferred person(s) to be contacted in the event of an emergency.						
	REPRESENTATIVE 1:	REPRESENTATIVE 1:						
	ADDRESS:		-		-			
	ADDRESS.							
	SUBURB:				PHONE/MOBILE:			
	REPRESENTATIVE 2:		STATE:	POSTCODE:	RELATIONSHIP:			
			***		RELATIONSHIP.			
	ADDRESS:							
	CUBURR				PHONE/MOBILE:			
	SUBURB:		STATE:	POSTCODE:				
	PART 3: SUPPORTING	DOCUMENTS						
ITEM 13:	IDENTIFICATION							
	You are required to meet a 100 point identification criterion upon submission of your application. The Agent/Lessor may photocopy any item and retain as part of your application.							
	Please tick the identifying docume							
	IMPORTANT: At least one form	of Photo Identification MUST be	e provided.					
	70 Points Passport	D Full black		2546 C2003 III 00048				
		Full birth certificate	□ c	itizenship certificate				
	40 Points							
	Australian Driver's Licence	Student Photo ID	D	epartment of Veterans Af	fairs card			
	Centrelink card	Proof of age card	☐ St	tate/Federal Government	Photo ID			
	25 Points							
	Medicare card	Council rates notice	Пм	otor vehicle registration				
	Telephone bill	Electricity bill	<u> </u>	as bill				
	Tenancy History Ledger	Bank statement	Cr	redit card statement				
	Last FOUR rent receipts	Rent bond receipt		evious tenancy agreemer	nt			
TEM 14:	PROOF OF INCOME							
	You are also required to supply the	Agent/Lessor with proof of your	ncome unco	submission of				
			ncome upon	submission of your applic	ation.			
	Employed: Last TWO pay s Self employed: Bank statement			¥7.474.0				
	comproyed. Dank statement	s, Group Certificate, Tax Return o	or Accountant	's letter.				

PART 4: DECLARATION PLEASE DECLARE THE FOLLOWING BY SELECTING EITHER TRUE or FALSE I, the Applicant 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? False 4. Have no outstanding debt to another Agent/Lessor? True If false, why are you in debt to your past Agent/Lessor? PART 5: TENANCY DATABASES The Agency may use the following tenancy databases to check the rental history of the Applicant/s: PART 6: ACKNOWLEDGEMENT PLEASE ACKNOWLEDGE THE FOLLOWING BY SELECTING EITHER YES or NO I, the Applicant 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. 1. Yes No 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. No Yes 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) Yes No as you consider reasonably necessary. 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 No Yes third parties. 3. Acknowledge and accept that if this application is denied, the Agent is not legally obliged to provide Yes No reasons as to why. 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 4. Yes No estate agents, salespeople and tenancy default databases Acknowledge that I have received and reviewed the General Tenancy Agreement (Form 18a), 5. Yes □ No the Standard Terms and any special terms before completing this application. Acknowledge that I have received or have available the Information Statement (Form 17a), 6. Yes ☐ No body corporate by-laws (if applicable) before completing this application. 7. Acknowledge that I have signed the agency's Privacy Notice and Consent. Yes No 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. 8. Yes No Consent to the use of email and facsimile in accordance with the provisions set out in Chapter 2 of the Electronic Transactions (Queensland) Act 2001 (Qld) and the Electronic Transactions Act 9. Yes No Declare that the above information is true & correct and that I have supplied it of my own free will. Yes No

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

Name of Applicant:

Signature:

Date: