

**RESIDENTIAL APPLICATION FORM**

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 ABN: 88 076 783 376



**PLEASE ADVISE WHAT PROPERTY YOU ARE APPLYING FOR**

Preference 1: \_\_\_\_\_

Rent per WEEK: \$ \_\_\_\_\_ Bond: \$ \_\_\_\_\_

Preference 2: \_\_\_\_\_

Rent per WEEK: \$ \_\_\_\_\_ Bond: \$ \_\_\_\_\_

Date You Inspected this property \_\_\_\_/\_\_\_\_/\_\_\_\_

Lease Term: \_\_\_\_\_ Tenancy to Start: \_\_\_\_/\_\_\_\_/\_\_\_\_

APPLICANT # 1				APPLICANT # 2			
MR	MRS	MS	OTHER (Please Circle)	MR	MRS	MS	OTHER (Please Circle)
Surname :				Surname :			
Given Name(s)				Given Name(s)			
Current Address:				Current Address:			
Home Ph:				Home Ph:			
Mobile Ph:				Mobile Ph:			
Email:				Email:			

**Identification (PLEASE ATTACH PHOTOCOPIES OF 100 POINTS + 2x RECENT PAYSLEIPS OR CENTERLINK STATEMENT)**

Date of Birth:	Date of Birth:
Drivers Licence No.	Drivers Licence No.
State of Issue	State of Issue
Exp Date:	Exp Date:
Alternative ID – Passport No.	Alternative ID – Passport No.
Country:	Country:

**Other Applicants Names (All Adults to reside at the property must be listed)**

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

**Number of people to occupy the property**

Adults  Children  Ages of Children

Pets Y / N  Number of Pets  Type of pet / Breed  Age  Inside/Outside

## Current Accomodation

<b>APPLICANT # 1</b>	<b>APPLICANT # 2</b>
<b><i>Name of current Estate Agent / Private Landlord</i></b>	<b><i>Name of current Estate Agent / Private Landlord</i></b>
Contact person / Agent	Contact person / Agent
Phone Number	Phone Number
Rental Property Address	Rental Property Address
Date Tenancy Commenced:	Date Tenancy Commenced:
Current weekly rental \$	Current weekly rental \$
Reason for moving	Reason for moving
<b><i>Previous Landlord/Agent:</i></b>	<b><i>Previous Landlord/Agent:</i></b>
Contact person / Agent	Contact person / Agent
Phone Number	Phone Number
Rental Property Address	Rental Property Address
Date Tenancy Commenced:	Date Tenancy Commenced:
Current weekly rental \$	Current weekly rental \$
Reason for moving	Reason for moving

<b>APPLICANT # 1</b>	<b>APPLICANT # 2</b>
<b><i>Details if home owner</i></b>	<b><i>Details if home owner</i></b>
Will your home be SOLD / RENTED / RETAINED	Will your home be SOLD / RENTED / RETAINED
<b><i>Details of Selling / Leasing agent ( if applicable)</i></b>	<b><i>Details of Selling / Leasing agent ( if applicable)</i></b>
Agent:	Agent:
Contact Person:	Contact Person:
Contact No.	Contact No.
Sale / rental amount: \$	Sale / rental amount: \$
How long have you owned this home?	How long have you owned this home?
Reason for moving?	Reason for moving?

<b>APPLICANT # 1</b>	<b>APPLICANT # 2</b>
<b><i>Reference ( Not Next of Kin )</i></b>	<b><i>Reference ( Not Next of Kin )</i></b>
1. Name:	1. Name:
Relationship:	Relationship:
Phone No.	Phone No.
2. Name:	2. Name:
Relationship:	Relationship:
Phone No.	Phone No.

<b>APPLICANT # 1</b>	<b>APPLICANT # 2</b>
<b><i>Emergency Contact (Not residing with you)</i></b>	<b><i>Emergency Contact (Not residing with you)</i></b>
Name:	Name:
Relationship:	Relationship:
Phone No.	Phone No.
Address:	Address:

**Employment History** (Please provide 2 most recent payslips)

<b>APPLICANT # 1</b>	<b>APPLICANT # 2</b>
Company Name:	Company Name:
Contact Person:	Contact Person:
Your Position:	Your Position:
Employment Address:	Employment Address:
Phone no.	Phone no.
Employed Since:	Employed Since:
Net Income Per Week / Month \$	Net Income Per Week / Month \$
Full Time / Part Time / Casual	Full Time / Part Time / Casual
<b>Occupation 2 – if applicable</b>	<b>Occupation 2 if applicable</b>
Company Name:	Company Name:
Contact Person:	Contact Person:
Your Position:	Your Position:
Employment Address:	Employment Address:
Phone no.	Phone no.
Employed Since:	Employed Since:
Net Income Per Week / Month \$	Net Income Per Week / Month \$
Full Time / Part Time / Casual	Full Time / Part Time / Casual

**If self employed**

<b>APPLICANT # 1</b>	<b>APPLICANT # 2</b>
Name of Business:	Name of Business:
ABN:	ABN:
Industry:	Industry:
Address: P/Code	Address: P/Code
Personal Net/Income/Week:	Personal Net/Income/Week:
Name of Accountant:	Name of Accountant:
Accountant's Phone #:	Accountant's Phone #:
How Long in this Business:	How Long in this Business:

**Student** (Photocopy of student card must be provided)

<b>APPLICANT # 1</b>	<b>APPLICANT # 2</b>
Course Name	Course Name
Campus	Campus
Campus Contact:	Campus Contact:
Enrolment No.	Enrolment No.

**Additional sources of income** (i.e. Centrelink / Income Support) – Provide Supporting documents

<b>APPLICANT # 1</b>	<b>APPLICANT # 2</b>
Type of payment:	Type of payment:
Approx. Income per week/Month \$	Approx. Income per week/Month \$
Customer Ref. Number	Customer Ref. Number

## Application for Tenancy and Management of Property Privacy Act (Commonwealth) 1998 Collection Notice

The below information is about how your personal information is handled as required by the Australian Privacy Principles in the Privacy Act 1988.

I acknowledge that this is an application to lease this property and that my application is subject to the Owner's approval and the availability of the premises on the due date. I hereby offer to rent the property from the owner under a lease to be prepared by the Agent pursuant to the Residential Tenancies Act 1997. I acknowledge that I will be required to pay rent in advance and a rental bond, and that this application is subject to approval from the Owner/Landlord. 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 premises and am not bankrupt. I authorise the Agent to obtain details of my credit worthiness from, the Owner or Agent of my current and/or previous residences, my personal referees, any record, listing or database of defaults by tenants. If I default under a rental agreement, the Agent may disclose details of any such default to any organization/person that the Agent reasonably considers has a requirement to obtain/be informed of such information.

I/We \_\_\_\_\_  
Acknowledge that I/We have read and understood the contents of this Privacy Collection Notice.

(Applicant/s to sign)

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



- |   |   |   |  |
|---|---|---|--|
| <input type="checkbox"/> Electricity      | <input type="checkbox"/> Gas            | <input checked="" type="checkbox"/> Water | <input type="checkbox"/> Telephone       |
| <input type="checkbox"/> Pay TV           | <input type="checkbox"/> Internet       | <input type="checkbox"/> Car Insurance    | <input type="checkbox"/> Home & Contents |
| <input type="checkbox"/> Health Insurance | <input type="checkbox"/> Life Insurance | <input type="checkbox"/> Home Loans       |  |

**YourPorter is a FREE service connecting utilities and other services.**

If the Agent approves this application, YourPorter will connect your water, where permitted, 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.

**Telephone: 1300 400 600**  
**Fax: 1300 326 468**  
**www.yourporter.com.au**

### DECLARATION AND ACCEPTANCE:

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, and the Agent, 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/](http://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 application, I/We understand YourPorter is a value add product and that I/We are under no obligation to use YourPorter.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_