Residential Application Form

For your application to be processed you must answer all questions PLEASE NOTE: IF YOUR APPLICATION IS APPROVED, HOLDING DEPOSIT MUST BE PAID WITHIN 24 HOURS



A. AGENT DETAILS		D.	EMPLOYMENT HISTORY
Lions Real Estate		9.	What is your occupation?
784 Hume Highway, YAGOONA NSW			
Phone: 8739 5353			Full Time/PT/Casual
Fax: 9547 3817			Employer's name
Email: admin@lionsrealestate.com.au			Employer 3 name
		1 10	Employer's Address
B. PROPERTY DETAILS		4	Employer's Address
1. What is the address of the property you would like to rent?			
			Contact Name/Number
	Postcode		Length of Employment / \$ INCOME
			1
2. Lease Commencement?			If Our Land American Constitution and Observation
Day Month Year		10	. If Student, name of institution and Student I.D.
harmonia de la constanta de la	Environment (Control of Control o		· · · · · · · · · · · · · · · · · · ·
3. Lease term?		E	RENTAL HISTORY
Years	Months		. What is your current address?
4. Property rental	Paid		
\$ per week			Postcode
per week			. How long have you loved at your current address? (months/yrs)
5. How many people will normally	v occupy the property?	12.	How long have you loved at your current address? (monthsiyis)
Pets, Ye	es or No?	13	Why are you leaving this address?
			Triy dio you isaring this address.
C. PERSONAL DETAILS			
			Name of landlord-agent/Contact number?
o. Flease give us your details			
Mr Ms Miss	Mrs Other		F
Surname Given name/s			RENT PAID
			CONTACTS/REFERENCES
		11.	Discourse to the format of the second of the
Date of Birth	Driver's license number	15.	Please provide contacts in case of emergency.
			Surname / Given name
	Divide lieuwe etake		
Driver's license expiry date	Driver's license state		Relationship to you / Contact number
Passport no.	Passport country		
		16.	Please provide two personal references (not related to you)
Pension no. (if applicable)	Pension type (if applicable)		Surname / Given name
			Relationship to you / Contact number
7. Please provide your contact det	ails		
Home phone no.	Mobile phone no.		
			Surname / Given name
Made phone no	Fax no.		
Work phone no.	rax IIO.		Relationship to you / Contact number
		Ы.	
Email address			
and doctor			DOCUMENTATION
		910000	7. Please provide the following documentation:
8. Motor Vehicle Registration			00 points of I.D. (e.g. drivers lic, birth certificate, medicare, ss port)
			ost recent bank statement (last 6 months)
		-La	ast two payslips of all applicants enancy ledger for up to 6 months from your most recent rental
			perty
t I		1	•