

APPLICATION FOR TENANCY

PLEASE NOTE - Before any application will be considered, each applicant must ensure the items below are fully satisfied

- PHOTO ID** - Drivers licence or passport
- PROOF OF ADDRESS** - Phone bill, Electricity bill, Car registration, Tax Return
- PROOF OF INCOME** - Pay slips, WINZ confirmation statement, Bank Statement
- ACTIVE BANK ACCOUNT NUMBER** - Name, Bank, Branch and account number
- RENT CONFIRMATION** - Rents receipts or Agency confirmation
- CREDIT CHECK** - Obtained through WRE - Cost \$30

PLEASE RETURN THIS APPLICATION FULLY COMPLETE WITH ALL DOCUMENTATION TO 607 Port Road Whangamata, or PO Box 105 Whangamata or Email rentals2@beachproperty.co.nz or Fax 07 865 0020

Disclaimer / Authority

I/We, the said applicant/s, declare that the information contained in this application is true and correct and that all of the information was given of my/our own free will. I/We further authorise the letting agent to contact and or conduct any inquiries and or searches with regard to the information and references supplied in this application.

I/We, the said applicant/s, declare that I/we am/are over 18 years of age and eligible to make this application and solemnly and sincerely declare:-

1. I/We understand and agree that the **cost of renting** a property will be **4 weeks rent as bond, and one weeks rent in advance**. I/we further agree and undertake to pay the bond and advance rent on/before signing the tenancy agreement. I/We further authorise the letting agent to attend to all details regarding the lodgment of the said rental bond with the appropriate authority.
2. I/We acknowledge that it is a policy of the agency not to accept Bond Loans and I am bound to pay the bond in full either by way of cash, Bank Cheque or Direct Deposit into the Agency Trust Account prior to the commencement of my tenancy or by way of mutual agreement with the transfer of an existing bond.
3. I/We have been informed, understand and agree that the acceptance of my/our application is subject to a satisfactory report being obtained from information supplied in this Tenancy Application submitted by me/us.
4. I/We have been informed, understand, and agree that should there be a requirement to commence proceedings for recovery of rent, repairs and or damage to any property I/We tenant during the term or at the expiration of the tenancy agreement, all costs associated with these proceedings shall be payable by me/us.
5. I/we have been informed, understand and agree that should this application not be accepted, the agent is not required or obligated to disclose why or supply any reason for the rejection of this application.

Privacy Acknowledgement

In accordance with Section 18n (1) (b) of the Privacy Act, I/we authorise you to give information to and obtain information from any person, agency, credit providers and references. I/We understand this can include information about my/our previous tenancy history, credit worthiness, credit standing, and credit history and/or credit capacity or any other information that may be relevant to acceptance of this application. I/We understand all information within this application may be supplied to the owner of the property applied for or rented and used to assess my/our application.

Applicant (s) Name _____ Signature: _____ Date _____

Applicant (s) Name _____ Signature: _____ Date _____

Applicants details

First Names _____ Surname _____

Age _____ Date Of Birth / /

Photo Identification supplied: Yes/No Type supplied: Licence Passport OtherSource of Income Salary, Wages, Income support: WINZ ID No:

Name, Bank & Account Number:

Total Net Weekly Income:

Name of Employer: _____ How long with this employer? _____

Occupation: _____ E-mail address: _____

Phone work: _____ Home: _____ Mobile: _____

Is there a Partner / Spouse / Joint applicant

First Names _____ Surname _____

Age _____ Date Of Birth / /

Photo Identification supplied: Yes/No Type supplied: Licence / Passport:

Source of Income Salary, Wages, Income support: WINZ ID No:

Name, Bank & Account Number:

Total Net Weekly Income:

Name of Employer: _____ How long with this employer? _____

Occupation: _____ E-mail address: _____

Phone work: _____ Home: _____ Mobile: _____

Motor Vehicle Details (All - if more than one)

Make/Model/Year _____ Rego _____

Make/Model/Year _____ Rego _____

Tenancy DetailsDo you or any occupants smoke? YES NO**PETS:** YES NO **DOG** (Number): _____ Breed: _____ **CAT** (Number): _____ **OTHER** (Type): _____NOTE – [Photo of dog\(s\) must be attached.](#)

Current Address:

I have resided at this address for _____ year/s _____ months

Reason for leaving?

Current Landlord Name: _____ Phone: _____

Do you need to give 21 days' notice to your Landlord if accepted Yes No

What date would you like your tenancy to start if accepted Date _____

How often would you pay your rent. weekly fortnightly monthly

On what day of the week would you pay your rent <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun		
Have you ever had a tenancy terminated before? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, please give details on separate sheet</i>		
Have you ever had money deducted from your bond? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, please give details on separate sheet</i>		
Do you owe money to any Rental Agency/Landlord/Property owner? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, please give details on separate sheet</i>		
Have you ever been subject to a Tenancy Tribunal Application/hearing? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Type of address you are looking for:		
(Circle number) 1-2-3-4-5 Bedrooms. Garage Yes <input type="checkbox"/> No <input type="checkbox"/> . Furnished Yes <input type="checkbox"/> No <input type="checkbox"/>		
Referees (Character or rental referees)		
1: Name:	Relationship	Phone:
2 Name:	Relationship	Phone:
3 Name:	Relationship	Phone
Nearest Relative (Not residing with you)		
Name		
Address		
Relationship	Phone (H)	(M)
Other occupants of property you want to rent i.e Adults, Teens, Children		
Number of Occupants: Adults () Teens () Children ()		
Name:	Age:	
Name:	Age:	
Name:	Age:	
Name:	Age:	
Name:	Age:	

In terms of the Privacy Act 1993 you are given notice that:

- This application asks you to provide personal information and;
- **If you do not supply all the information requested in this form you may not be considered as the best applicant for the property or properties available and;**

*I confirm that all the information given in this form is true and correct. I give my permission for **Whangamata Real Estate Ltd** to check the information given; complete any credit or consumer checks.*

Applicant (s) Name _____ Signature: _____ Date _____

Applicant (s) Name _____ Signature: _____ Date _____