

# **Raine&Horne®**

**Inverell**

## **Tenant Information**

(Not specific to any one rental property)

**APPLICANT'S FULL NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**ID:** LICENCE NO: \_\_\_\_\_ **CENTRELINK REF:** \_\_\_\_\_

**MEDICARE CARD:** \_\_\_\_\_ **PROOF OF AGE CARD:** \_\_\_\_\_

**CONTACT DETAILS:** Mobile: \_\_\_\_\_ Home/Work: \_\_\_\_\_

Partner's Mobile: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**EMPLOYER:** \_\_\_\_\_

**EMPLOYER PHONE NUMBER:** \_\_\_\_\_

**CURRENT ADDRESS:** \_\_\_\_\_

**CURRENT LANDLORD/AGENT:** \_\_\_\_\_

**NEXT OF KIN:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**NEXT OF KIN ADDRESS:** \_\_\_\_\_

How long have you been at this address: \_\_\_\_\_ **Rent Paid:** \$

**OTHER PERSONS WHO WILL BE LIVING AT THE PROPERTY:**

Name: _____	DOB: _____	AGE: _____	LICENCE NO: _____
Name: _____	DOB: _____	AGE: _____	LICENCE NO: _____
Name: _____	DOB: _____	AGE: _____	LICENCE NO: _____
Name: _____	DOB: _____	AGE: _____	LICENCE NO: _____
Name: _____	DOB: _____	AGE: _____	LICENCE NO: _____

Will there be smokers living at the premises: YES/NO (Smoking is not permitted inside premises.)

Do you have pets? If so what? \_\_\_\_\_ (Pets not permitted inside premises.)

How many cars to be housed? \_\_\_\_\_ Do you have a: ☐ Trailer ☐ Boat ☐ Van ☐ Motorbike?

If the property has a pool, have you cared for one previously? YES/NO Not Applicable

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**ACCOMMODATION required:** ☐ 1 Bedroom Flat ☐ 2/3 b/r Unit ☐ House – 1/2/3/4 Bedrooms

**ADDRESS if applicable:** \_\_\_\_\_

**RENT prepared to pay:** \$ \_\_\_\_\_ **Date required:** \_\_\_\_\_

**Number of Adults:** \_\_\_\_\_ **Number of Children:** \_\_\_\_\_

**APPLICANT 1'S FULL NAME:** \_\_\_\_\_

DOB: \_\_\_\_\_

**APPLICANT 2'S FULL NAME:** \_\_\_\_\_

DOB: \_\_\_\_\_

**REFERENCES:** We do not accept references from family/relatives/friends as rental references.

**REAL ESTATE REFERENCE:**

Name: \_\_\_\_\_

Agent's Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax No: \_\_\_\_\_

Rental Address: \_\_\_\_\_

**OTHER:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**I, the applicant, do solemnly and sincerely declare that the above information is true and correct and that I have supplied this information of my own free will.**

**The applicant acknowledges that these references will be verified by the agent with the applicant's consent.**

**Signature 1:** \_\_\_\_\_

**Dated:** \_\_\_\_\_

**Signature 2:** \_\_\_\_\_

**Dated:** \_\_\_\_\_

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Phone: 02 67221495