

# TENANT APPLICATION FORM



Applications will not be processed if any information is missing.  
One application per person - all tenants are required to fill in an application form.

Property address:	
Weekly rent: \$	Bond: (4 weeks rent) \$
Length of tenancy wanted:	Preferred move in date:

## Your Personal Details

Full name: <i>Mr/Mrs/Miss/Ms</i>		
Current address:	How long?	
Previous address:	How long?	
Previous address:	How long?	
Home phone:	Cellphone:	
Email address:		
Date of birth:	Smoker: (please circle) Yes / No	
Number of dependents living with you:	Ages:	
Pets:	Car registration number:	
I.D. type: <i>Drivers License / Passport</i>	Number:	D.L. Version number:

## Your employment

Occupation:	How long?
Company name:	Contact person:
Address:	Phone:
Income per week after tax:	

## Your current or immediate last landlord

Name:	Current landlord: (please circle) Yes / No
Reason for moving:	Weekly rent paid: \$
Address:	Phone:

## Your closest relative

Name:	Relationship:
Address:	Phone:

## Your referees - other than mentioned before and preferably living in Christchurch

Name:	Relationship:
Address:	Phone:

Name:	Relationship:
Address:	Phone:

## Your flatmates - all flatmates are tenants and need to fill in an application form

Name:
Name:
Name:

**Please turn over...**

## Your rent history

Have you ever been evicted by a landlord or agent?	Yes		No	
If yes, please state why:				
Are you in debt to another landlord or agent?	Yes		No	
If yes, how much do you owe:				
Were any deductions made to your bond at your last address?	Yes		No	
If yes, please state why:				

## Your past and future

Are you expecting a decrease in your income in the next year?	Yes		No	
If yes, please state why:				
Do you have any criminal charges or civil court proceedings pending?	Yes		No	
If yes, please state what:				
Do you have any debts that have been forwarded to a collection agency?	Yes		No	
If yes, please state what and how much:				

## Your declaration

I warrant that the information given above is true and correct and hereby irrevocably authorise Accommodate - Easy Rental Property to obtain information from any source in support of my application. I also acknowledge that information relating to my account/credit status may be used in completing a report for any other party requesting the same.

I hereby authorise Accommodate - Easy Rental Property or its duly authorised agents to collect, disclose, and retain personal information about me in the following way:

- The personal information to be collected will be information which is necessary for evaluating my suitability for a tenancy.
- Accommodate - Easy Rental Property will retain the details of this application on record as well as an image of the identity documents for the purpose of future reference in the case of a Privacy Inquiry.
- I acknowledge that under the provisions of the Privacy Act 1993, I have been informed of my right to access and request the correction of the information held by Accommodate - Easy Rental Property concerning me. Accommodate - Easy Rental Property undertakes to correct any information held on me that it has collected and that is proven to be incorrect. If I believe any of the information provided to Accommodate - Easy Rental Property by a third party is incorrect, I will inform Accommodate - Easy Rental Property.

By signing this form you acknowledge you want to rent this property. If you decline the property after processing of your application has begun we may charge you a processing fee. You also acknowledge that if you owe money to Accommodate - Easy Rental Property, our debt recovery agency may charge you a fee equal of 25% of the unpaid portion of the monies owed, but not less than \$25.00. Where the total agency, legal and other costs arising from recovery of any amount owing exceeds the debt recovery fee charged, our agent is also entitled to recover such additional costs from you. This clause is intended to be for the benefit of and be enforceable by our debt recovery agency under the Contracts (Privacy) Act 1982.

Name:	Signature:
Date:	

### **Please return this form to:**

Denise Knowles, Dorset House Backpackers  
1 Dorset Street (off Victoria Street)  
Office hours: 8:00am - 4:30pm, Monday - Friday  
P: (03) 365 8223 M: 021 864 772  
F: (03) 366 8204 E: denise@dorset.co.nz

Please do not post your application form