RAKU 37 LTD

(MEMBER OF THE REAL ESTATE INDUSTRY ASSOCIATION OF PAPUA NEW GUINEA)
PO BOX 581, KONEDOBU **PHONE: 321 3127 or 321 3128** **FAX: 321 3125** **EMAIL: raku37@gmail.com**

APPLICATION FOR RESIDENTIAL TENANCY

Agent for Lessor: **Agent's Phone Number:**

Property Address: Sec:_____ **Lot:** _____ **Location :** _____ **Unit Number :** _____

Applicant Details : **Type of Tenancy : Personal / Corporate (please circle)**

Full Name:_____

Have you been known by any other name? YES/NO

If YES, what other name have you been known by?_____

Total number of persons living in property (including applicant):_____

Names of all persons living in property & ages:_____(____Yrs)_____(____Yrs)_____(___Yrs)

_____(Yrs)_____(Yrs)_____

_____

Which Province are you from?:_____ Village : _____

Driver's Licence Number or Passport Number: _____ Date of Birth: _____

Registration Number of Vehicle/s: _____Number of Cars: _____

Are you a smoker? YES/NO Do you or any of your family members chew betelnut? YES/NO

Contact Details

Current Address:_____

_____

_____

Phone Numbers: Work :_____ Work Fax : _____

B-Mobile:_____ Digicel_____ Fax:_____ Email:_____

Current Rental Arrangements:

Time Period at premises: ___Years___ Months

Landlords Phone:_____

Rent per week: K_____

Previous Rental Details:

Landlords Phone:_____

Previous Address:_____

_____

Rent per week: K_____

Are you employed? YES/NO

Full Time/Casual/Part Time/Contract/Other/Unemployed

Occupation : _____

Net fortnightly Income: K_____

Length of Employment: _____

Name of Employer: _____

Phone: _____

Address of Employer: _____

_____

Work Permit Number: _____

Pets – List any pets owned

Number of Pets

Type of Pet/s

Are your pets registered? YES/NO

If Self Employed

Business Name:_____

How long self employed?_____

GST # and Tax File # : _____

Address of Business: _____

_____

Accountant's Name: _____

Phone: _____

Next of Kin **(Please provide details of preferred person to be contacted in the event of an emergency)**

Name: Contact Number/s:

Address:

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Personal References **(Please do not list relatives or partners and provide business hours contact numbers)**

Name: Relationship: Contact Number/s:
Address:

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Address:

Please advise the following by selecting either Yes or No

Have you ever been evicted by an agent /landlord? YES / NO
Is there any reason known to you that would affect your ability to pay rent? YES / NO
Was your rental bond at your last address refunded in full? YES / NO
If NO, please advise what deductions were made from your bond?

Are you in debt to another agent/landlord? YES / NO
If YES, why are you in debt to your past agent/lessor?

You are required to meet a 100 point identification criterion upon submission of your application, and the lessor may photocopy any item and retain as part of your application.

10 points: Birth Certificate, Motor Vehicle Registration Papers
30 points: Bank Statements, recent utility accounts eg; phone, electricity
40 points: Drivers Licence, Passport, Employment ID Card, last FOUR rent receipts

You are also required to supply the lessor with proof of your income upon submission of your application

Employed: Last TWO pay slips
Self Employed: Bank Statements, Group Certificate, or Accountant's letter

I, the Applicant declare that the above information is true & correct and that I have supplied it of my own free will. I acknowledge that my personal contents insurance is not covered under any lessor insurance policy/s and understand that it is my responsibility to insure my own personal belongings. I understand that you as the agent/lessor have collected this information for the purpose of determining whether I am a suitable tenant for the property – in particular to check my identification, my ability to care for the property, my character and my creditworthiness. For such purposes, I authorise you to contact the persons named in this application as you consider reasonably necessary. In doing so, I understand that information provided by me may be disclosed to, and further information obtained from referees named in this application and other relevant third parties. I acknowledge and accept that if this application is denied, the agent is not legally obliged to provide reasons as to why. I also consent and understand that should my tenancy be accepted and upon commencement of the tenancy agreement, there may be cause for the agent/lessor to pass my details onto others which may include (but is not limited to) body corporate, contractors, other real estate agents, and tenancy default databases.

I wish to undertake a tenancy for a period of 12 months to commence on the at a rental price of K per week (Plus GST). I understand that I am to pay the full invoiced amount for the initial payment, as well as sign the tenancy agreement before I can occupy the premises.

Name of Applicant _____

Signature _____ Date _____

OFFICE USE ONLY Name of Employee taking application:

Application Form signed by applicant	☐	Proof of Income Supplied	☐
Identification Supplied (Passport Photos)	☐	Form Fully Completed	☐