



LEASE APPLICATION

EMAIL COMPLETED APPLICATION TO: DIT.PropertyPortfolioAssets@sa.gov.au

ADDRESS OF PROPERTY YOU WISH TO LEASE: _____

1. APPLICANT DETAILS (MUST BE COMPLETED)

FULL NAME: _____

CURRENT HOME ADDRESS: _____

RENTED YES/NO _____ OWNED YES/NO _____

LANDLORD OR MORTGAGEE DETAILS: _____

LANDLORD CONTACT NO: _____

CONTACT TELEPHONE NUMBER: _____ A/HRS: _____ MOBILE: _____

CURRENT OCCUPATION: _____

DRIVERS LICENCE NUMBER: _____

2ND FORM OF IDENTIFICATION (PASSPORT NO/COPY OF UTILITY ACCOUNT SHOWING CURRENT ADDRESS) _____

CONTACT DETAILS RELATIVE/NEXT OF KIN (FOR EMERGENCY PURPOSES ONLY)

NAME: _____

ADDRESS: _____ PHONE NO: _____

NAME AND ADDRESS OF PRESENT EMPLOYER (IF APPLICABLE) _____

TELEPHONE NO: _____ CONTACT PERSON: _____

DO YOU OWN ANY OTHER PROPERTIES? IF SO PROVIDE DETAILS: _____

DO YOU HAVE AN INTEREST IN ANY COMPANIES OR BUSINESSES? IF SO PROVIDE DETAILS: _____

2. BUSINESS/COMPANY DETAILS (IF APPLICABLE)

COMPANY/BUSINESS NAME: _____

ABN OR ACN: _____

CURRENT BUSINESS ADDRESS: _____

PREVIOUS BUSINESS ADDRESS: _____

PRESENT LANDLORD/AGENTS NAME AND ADDRESS: _____

PRESENT LANDLORD/AGENTS WORK PHONE NO: _____

A/HRS: _____

CURRENT RENT: _____ SHOP AREA: _____

DO YOU HAVE ANY OTHER TRADING STORES? YES / NO

PLEASE STATE DETAILS: (INCLUDING LANDLORD DETAILS) _____

NATURE OR TYPE OF BUSINESS: _____

GOODS AND SERVICES STOCKED: _____

HOW MANY YEARS EXPERIENCE IN THIS FIELD: _____ YEARS

PLEASE STATE FULL DETAILS: _____

OWNER / PARTNERS / DIRECTORS DETAILS

FULL NAME	ADDRESS	PHONE	DATE OF BIRTH
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

DOES THE BUSINESS/COMPANY OWN ANY PROPERTIES? PLEASE STATE DETAILS (ADDRESSES)

INSURANCE

PUBLIC LIABILITY INSURANCE FOR A MINIMUM OF \$20,000,000 PER CLAIM: YES / NO (PLEASE CIRCLE)

POLICY HOLDER: _____

EXPIRY DATE OF POLICY: _____

PROPOSED LEASE

TERM OF TENANCY REQUIRED: _____ YEARS

COMMENCEMENT DATE OF TENANCY: _____

PROPOSED USE: _____

LESSEE WORKS: _____

REQUIRED (PLEASE CIRCLE): BUILDING RULES CONSENT / DEVELOPMENT APPROVAL / OTHER

IF OTHER, PROVIDED DETAILS OF CONSENT REQUIRED: _____

ANY OTHER INFORMATION: _____

FINANCIAL INFORMATION

CURRENT BANK: _____ BRANCH: _____

ACCOUNTANT: NAME: _____ PHONE: _____

ADDRESS: _____

CONTACT NAME: _____

STATEMENT OF ASSETS & LIABILITIES AS AT: _____

ASSETS

MARKET VALUE OF FIXED PROPERTY	\$ _____
MOVEABLE ASSETS	\$ _____
FIXED DEPOSITS	\$ _____
MARKET VALUE OF SHARES	\$ _____
VEHICLES	\$ _____
CASH	\$ _____
MONEY DUE TO YOU	\$ _____
OTHER	\$ _____

LIABILITIES

MORTGAGE OUTSTANDING	\$ _____
BALANCE ON PURCHASE AGREEMENT	\$ _____
OVERDRAFT	\$ _____
CREDIT CARDS	\$ _____
PERSONAL LOANS	\$ _____
OTHER MONEY DUE BY YOU	\$ _____

3. TRADE REFERENCES

PLEASE SUPPLY NAMES (NOT RELATIVES OR MINORS) AND BUSINESS HOURS PHONE NUMBERS, PLEASE ADVISE THOSE PEOPLE WE MAY CALL

NAME: _____

ADDRESS: _____

PHONE NO: _____

NAME: _____

ADDRESS: _____

PHONE NO: _____

NAME: _____

ADDRESS: _____

PHONE NO: _____

NAME: _____

ADDRESS: _____

PHONE NO: _____

OFFICIAL

1. I / WE CERTIFY THAT I / WE ARE NOT DISCHARGED BANKRUPTS NOR HAVE BEEN BANKRUPT.
2. THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT.
3. I / WE HAVE INSPECTED THE ABOVE MENTIONED PREMISES AND ACCEPT ITS CONDITION.

DATED THIS _____ DAY OF _____ 20 _____

SIGNED: _____

IN THE PRESENCE OF: _____

ANY FURTHER COMMENTS: _____

OFFICE USE ONLY

ANNUAL NET RENT: \$ _____

APPROVED BY DELEGATE

BOND/GUARANTEE \$ _____

LEASE TERM: \$ _____

ANNUAL OUTGOINGS: \$ _____

TOTAL GROSS RENTAL: \$ _____

ADVISE TENANT

CREDIT CHECK: Y/N *If yes, attach copy*

OTHER CHECKS: Y/N *If yes, attach copy*

PREVIOUS LANDLORD:

COMPANY	CONTACT	TELEPHONE	COMMENTS

TENANCY PRIVACY STATEMENT

It is important that you understand the National Privacy Principles and the manner in which we may use your private information. Please take the time to read this Privacy Statement carefully.

PRIMARY PURPOSE:

As the owners of the interested property, we collect your personal information to assess the risk in providing you or your company with the lease of the premises you have requested and, if the risk is considered acceptable, to provide you with the lease of the premises.

To carry out this role, and during the term of your lease, we may disclose your personal information to:

- Our conveyancers/solicitors
- Rental Bond Authorities
- Collection Agents
- Credit reporting agencies, for the purpose of obtaining a credit report.
- Referees you have nominated
- Organisations/tradespeople required to carry out maintenance to the premises.

SECONDARY PURPOSE:

We also collect your personal information to:

- Enable us, or our solicitors or conveyancers to prepare the lease documents for the premises.
- Allow organisations/tradespeople to contact you in relation to maintenance matters relating to the premises.
- Pay/release bonds to/from rental bond authorities (where necessary).
- Refer to tribunals, courts and statutory authorities (where necessary).
- Refer to collection agents/lawyers (where default/enforcement action is required).
- Provide confirmation details for organisations contacting us on your behalf – ie banks, utilities (gas, electricity, water, phone) etc.

If your personal information is not provided to us, and you do not consent to the uses to which we put your personal information, we cannot properly assess our risk, or carry out our duties as professional Property Managers. Consequently, we then cannot provide you with the lease of the premises.

DISCLOSURE STATEMENT:

The confidential information collected by Department for Infrastructure and Transport (DIT) is purely for the purposes of assessing and maintaining your lease agreement. This information is not disclosed to any other party other than as itemised above, for the purposes as outlined.

The Applicant:

I/we have read the Privacy and Disclosures Statement, and consent to DIT collecting and retaining such information as required to assess and maintain our lease application in the manner as prescribed above.

Signed by the applicant:

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For and on behalf of:

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Date:/...../.....

APPLICANT NAME: