

AFFORDABLE HOUSING RENTAL APPLICATION

Isaac Regional Council is collecting personal information you supply on this form in accordance with the *Information Privacy Act 2009*. Your personal information will be used by Council officers who have been authorised to do so. The information will not be given to any other person or agency unless required by law or unless your permission is sought. Personal information will be handled in accordance with the *Information Privacy Act 2009*.



APPLICANT DETAILS

HOUSEHOLD MEMBERS	APPLICANT 1	APPLICANT 2	APPLICANT 3	APPLICANT 4
SURNAME				
FIRST NAME				
DATE OF BIRTH				
GENDER				
RELATIONSHIP TO APPLICANT	Applicant			

APPLICANT 1 DETAILS

NAME			
ADDRESS			
PHONE	MOBILE		WORK
EMAIL			
DO YOU OWN PROPERTY WITHIN AUSTRALIA	<input type="checkbox"/> No	<input type="checkbox"/> Yes	ADDRESS

NEXT OF KIN

NAME		RELATIONSHIP	
ADDRESS			
PHONE	MOBILE		WORK
EMAIL			

APPLICANT 2 DETAILS (if address is the same please use "as above" in address section)

NAME			
ADDRESS			

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PHONE		MOBILE		WORK	
EMAIL					

NEXT OF KIN

NAME		RELATIONSHIP			
ADDRESS					
PHONE		MOBILE		WORK	
EMAIL					

APPLICANT 3 DETAILS (if address is the same please use "as above" in address section)

NAME					
ADDRESS					
PHONE		MOBILE		WORK	
EMAIL					

NEXT OF KIN

NAME		RELATIONSHIP			
ADDRESS					
PHONE		MOBILE		WORK	
EMAIL					

APPLICANT 4 DETAILS (if address is the same please use "as above" in address section)

NAME					
ADDRESS					
PHONE		MOBILE		WORK	
EMAIL					

NEXT OF KIN

NAME		RELATIONSHIP	
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ADDRESS			
PHONE		MOBILE	WORK
EMAIL			

HOUSEHOLD INCOME INFORMATION	APPLICANT 1	APPLICANT 2	APPLICANT 3	APPLICANT 4
HOUSEHOLD MEMBER				
GROSS INCOME				
INCOME TYPE (wages, pension, allowance, family payments)				
OTHER INCOME (e.g. child maintenance, superannuation, rent, bank interest)				

<p>Do you or any household member own or part own property either in Australia or overseas? This includes residential (house, flat, unit or townhouse), vacant land (residential, industrial or commercial) industrial property, commercial property or live-aboard boat, caravan, mobile home or transportable home permanently connected to utilities?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
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CURRENT RENTAL DETAILS

NAME OF PROPERTY MANAGER/LANDLORD			
ADDRESS			
PHONE		MOBILE	WORK
EMAIL			
LENGTH OF TENANCY		COMMENCEMENT DATE	
RENT PER WEEK			

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PREVIOUS RENTAL HISTORY NO.1 (if current tenancy is less than 6 months)

NAME OF PROPERTY MANAGER/LANDLORD			
ADDRESS			
PHONE	MOBILE	WORK	
EMAIL			
LENGTH OF TENANCY	COMMENCEMENT DATE		
RENT PER WEEK			
REASON FOR LEAVING			
WAS THE BOND REFUNDED IN FULL? IF NOT SPECIFY REASONS WHY			

PREVIOUS RENTAL HISTORY NO.2 (if current tenancy is less than 6 months)

NAME OF PROPERTY MANAGER/LANDLORD			
ADDRESS			
PHONE	MOBILE	WORK	
EMAIL			
LENGTH OF TENANCY	COMMENCEMENT DATE		
RENT PER WEEK			
REASON FOR LEAVING			
WAS THE BOND REFUNDED IN FULL? IF NOT SPECIFY REASONS WHY			

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CURRENT EMPLOYMENT

EMPLOYER NAME (COMPANY)	
OCCUPATION	
PAYROLL OFFICER/MANAGER	
PHONE	
EMAIL	
GROSS WEEKLY INCOME	
CENTRELINK PAYMENT	
CHILD MAINTENANCE	

PREVIOUS EMPLOYMENT (if current employer is less than 12 months)

EMPLOYER NAME (COMPANY)	
OCCUPATION	
PAYROLL OFFICER/MANAGER	
PHONE	
EMAIL	

SELF EMPLOYED (if applicable)

COMPANY NAME	
ABN	
BUSINESS TYPE	
BUSINESS ADDRESS	
POSITION HELD	
PHONE	
ACCOUNTANT'S NAME	
CONTACT NUMBER	
EMAIL	

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STUDENT INFORMATION (if applicable)

PLACE OF STUDY	
COURSE NAME	
CAMPUS CONTACT	
COURSE DURATION	

RENTAL REFERENCES NO.1 (require professional and personal references, other than relatives or co-applicant)

NAME		
PHONE		MOBILE
EMAIL		
RELATIONSHIP		
WRITTEN REFERENCE ATTACHED	<input type="checkbox"/> Yes	<input type="checkbox"/> No

RENTAL REFERENCES NO.2 (require professional and personal references, other than relatives or co-applicant)

NAME		
PHONE		MOBILE
EMAIL		
RELATIONSHIP		
WRITTEN REFERENCE ATTACHED	<input type="checkbox"/> Yes	<input type="checkbox"/> No

RENTAL REFERENCES NO.3 (require professional and personal references, other than relatives or co-applicant)

NAME		
PHONE		MOBILE
EMAIL		
RELATIONSHIP		
WRITTEN REFERENCE ATTACHED	<input type="checkbox"/> Yes	<input type="checkbox"/> No

PRIVACY CONSENT

I the applicant acknowledge that I have read the above collections notice. I authorised the following information to be collected:

1. My previous agents and/or landlords
2. My current previous employers
3. My personal referees

Any tenancy defaults database (including TICA) which may contain personal information about me.

APPLICANT 1

Signature _____

Date _____

Print Name _____

APPLICANT 2

Signature _____

Date _____

Print Name _____

APPLICANT 3

Signature _____

Date _____

Print Name _____

APPLICANT 4

Signature _____

Date _____

Print Name _____

PROOF OF IDENTIFICATION

The following information needs to be provided so we can complete your application process.
100 points of ID.

Please tick which id you are providing and ensure your id does add up to at least 100 points.

<input type="checkbox"/> Current Driver's License	40 Points
<input type="checkbox"/> Birth Certificate	40 Points
<input type="checkbox"/> Passport	40 Points
<input type="checkbox"/> 18 + Card	30 Points
<input type="checkbox"/> Medicare Card	20 Points

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<input type="checkbox"/> Credit Card	20 Points
<input type="checkbox"/> Current Vehicle Registration Certificate	10 Points
<input type="checkbox"/> Bank statement, Credit Card Statement	10 Points
<input type="checkbox"/> Electricity Account Statement	10 Points
<input type="checkbox"/> Gas Account Statement	10 Points
<input type="checkbox"/> Telephone Account Statement	10 Points
<input type="checkbox"/> Pension Card, Health Care Card	10 Points
TOTAL POINTS	

PROOF OF RENTAL HISTORY

<input type="checkbox"/> Printout of Tenant Ledger
<input type="checkbox"/> Utility Statements (no greater than 6 months) or
<input type="checkbox"/> Current Driver's License

PROOF OF INCOME

<input type="checkbox"/> Previous Tax Assessment Notice and
<input type="checkbox"/> Three (3) Previous Payslips (if applicable) and
<input type="checkbox"/> Child Support Assessment Notice (if applicable)
<input type="checkbox"/> Bank Statement, or Self-Employed Tax Returns and Business Registration

PROOF OF LIQUID ASSETS

<input type="checkbox"/> Three (3) Months of all Bank Statements
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FAILURE TO PROVIDE ALL OF THE ABOVE INFORMATION WILL RESULT IN NOT BEING ELIGIBLE FOR AN IRAS PROPERTY.

Once completed please send form and any attachment to:
records@isaac.qld.gov.au or Isaac Regional Council, PO Box 97, Moranbah QLD 4744
or deliver in person to your local Isaac Regional Council office

DEPARTMENT USE ONLY

PROCESSED BY	Signature _____	Date _____
	Print Name _____	