

APPLICATION FORM

Address of Tenancy Unit _____ 5 Central Road, Kingsland, Auckland

Tenant Details

Names _____

Phone numbers _____

Email address _____

Is any tenant under 18 Yes / No

Present Address _____

For how long _____ Reason for leaving _____

Have you ever had a tenancy terminated? Yes / No

Have you ever had money deducted from a bond? Yes / No

No of people to reside at this tenancy _____

Tenants source of income 1. _____

2. _____

Name and phone number of current employers _____

How long have you been employed with this employer _____

When do you want to move in? _____ Tenancy term _____

Do you own a motor vehicle Yes / No.

If yes, type and registration number _____

Do you have any pets? _____ Does any resident smoke? _____

Identification and number _____

Previous two landlords _____

(Name and Phone Number) _____

Next of Kin _____

If your application for tenancy is successful this application will form part of the tenancy agreement. Should your application not be successful this form will be destroyed.

Tenant Declaration

I agree that you may use the information on this form to enforce any judgment in respect of the tenancy agreement or in respect of any order made against me by the Tenancy Tribunal and I agree to this information being given to another landlord, credit bureau or tenant default database.

I confirm this information is true and correct

Signatures of Applicants _____

Date _____