

# RENTAL APPLICATION FORM

## Salinger Property Management

10 Pycroft Place, St Heliers. Mob 020 40230106



Please complete all sections of this form and return it, along with any supporting documents, to rentals@salinger.co.nz

Property being applied for	<input style="width:95%;" type="text"/>		
Applicants current address	<input style="width:65%;" type="text"/>	Rent \$	<input style="width:20%;" type="text"/>
Reason for Moving	<input style="width:95%;" type="text"/>		
Landlord/Mgr of this property	<input style="width:65%;" type="text"/>	Phone	<input style="width:20%;" type="text"/>
Is rent up-to-date?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you been asked to leave?	<input type="checkbox"/> Yes <input type="checkbox"/> No
		Have you given notice?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date you wish to move	<input style="width:35%;" type="text"/>	Length of lease preferred?	<input type="checkbox"/> 6 mo <input type="checkbox"/> 1 year+

### Applicant(s) / Occupants

Name	Relationship	DOB	mobile/ph	Email address

### Employment & Finances

Applicant Name	Occupation	Company Name	How long	Supervisor	Phone / Email

(Provide employment details of other intended occupants as additional notes to this application)

Total after tax income per week of all applicants \$

Are you paying off a debt to any finance company, bank or landlord / property manager?  Yes  No  
If yes, please give details

Receiving a Govt benefit  Yes  No If yes, benefit no & Office

Vehicle Make / Model \_\_\_\_\_ Year \_\_\_\_\_ Rego \_\_\_\_\_ Vehicle Financed  Yes  No

Are you the registered owner?  Yes  No Details of any other vehicles parked \_\_\_\_\_

Any Pets  Yes  No If Yes, Type & Breed \_\_\_\_\_ Smokers  Yes  No

Nearest Relative: Name  Relationship (eg parent)

Address  Mobile / Phone

Do you give permission to obtain a reference from your landlord or employer, as well as a credit check through TINZ?  Yes  No

Amount you'd be prepared to pay to secure this property \$  Drivers License No. of Applicants

**Declaration and Privacy Statement** I declare that the information provided are true and correct. The Landlord or Property Manager may decline this application if any information is found to be inaccurate. I authorise the Landlord/Property Manager to verify details and obtain information relevant to this tenancy, and to use that information if required to enforce any lawful debtor order relating to the tenancy. By completing this form, you consent to Salinger Property Management collecting, using, and sharing your personal information to verify your identity and assess your suitability as a tenant. Information may be shared with trusted service providers, such as credit or reference agencies, and will be stored securely. You may access or correct your information at any time by contacting Salinger Property Management.

I consent to the collection, use, and disclosure of my personal information as outlined above.

**Signature of Applicant** \_\_\_\_\_

Name

Date