

## APPLICATION TO LEASE

Please read and complete the application thoroughly by answering all questions, to enable us to process your application as quickly as possible

Date: \_\_\_\_\_

Agent: \_\_\_\_\_

Property Address: \_\_\_\_\_

### 1. APPLICANT DETAILS

Please tick box

Company

Individual

If Applicant is a Company please complete section below, alternatively please go to section 2.

Company Name: \_\_\_\_\_

Company ABN: \_\_\_\_\_

Company Registered Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position in Company: \_\_\_\_\_

Phone / Mobile: \_\_\_\_\_ Fax / Email: \_\_\_\_\_

Directors Name: \_\_\_\_\_

Directors Personal Address: \_\_\_\_\_

Years Company in Business: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Reason for requirement of new premise (e.g moving / expanding): \_\_\_\_\_

Are you an Australian Citizen/Resident or have permission to work or trade in Australia?

Please provide details: \_\_\_\_\_

Was previous premise owned or leased by the company? \_\_\_\_\_

If leased, please provide details: Landlord or Agent Name: \_\_\_\_\_

Landlord or Agent contact number: \_\_\_\_\_

### 2. PERSONAL / INDIVIDUAL DETAILS

Full Name: \_\_\_\_\_

Curent Address: \_\_\_\_\_

Is above premise owned or leased? \_\_\_\_\_

Will you be using a 'Trading As' name? Yes / No:

If 'Yes' please supply name and ABN: \_\_\_\_\_

Phone / Mobile: \_\_\_\_\_ Fax / Email: \_\_\_\_\_

Years in Business: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Reason for requirement of new premise (e.g moving / expanding): \_\_\_\_\_

Was previous premise owned or leased by you? \_\_\_\_\_

If leased, please provide details: Landlord or Agent Name: \_\_\_\_\_

Landlord or Agent contact number: \_\_\_\_\_

### 3. SOLICITOR DETAILS

Solicitor / Firm: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone / Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

#### 4. FORMS OF IDENTIFICATION REQUIRED

##### FOR A COMPANY

- \* Copy of Business Registration
- \* Copy of Directors Drivers Licence
- \* Copy of Passport
- \* Copy of ABN or ACN Registration
- \* Copy of Insurers Certificate of Currency
- \*

Are you an Australian Citizen/Resident or have permission to work or trade in Australia?

Please provide details: \_\_\_\_\_

##### FOR AN INDIVIDUAL

- \* Copy of Drivers Licence
- \* Copy of a Rate Notice
- \* Copy of ABN or ACN Registration (if applicable)
- \* Copy of a utility account

Are you an Australian Citizen/Resident or have permission to work or trade in Australia?

Please provide details: \_\_\_\_\_

##### TRADE REFERENCE OR PERSONAL REFEREES IF STARTING A NEW BUSINESS

1. Name: \_\_\_\_\_ Phone No: \_\_\_\_\_  
2. Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

#### 5. LEASE DETAILS

Annual Rental: \_\_\_\_\_ Gross / Nett

Outgoings payable by Lessor or Lessee: \_\_\_\_\_

Term of Lease: \_\_\_\_\_ Option to Renew: \_\_\_\_\_

Occupancy date: \_\_\_\_\_ Rent Start date: \_\_\_\_\_

Bond payable: \_\_\_\_\_

Rental Reviews: \_\_\_\_\_

Usage: \_\_\_\_\_

Guarantors Name and Address: \_\_\_\_\_

##### Maintenance and / or Service of the following shall be the responsibility of:

- \* Maintenance of Gardens and Lawns and general Landscaping: **Lessor / Lessee**
- \* Maintenance and Service of Fire Service Equipment (including but not limited to bi-annual services and annual Service Reports): **Lessor / Lessee**
- \* Maintenance and Service of all Airconditioning units (including but not limited to quarterly filter cleaning and a general service every six months): **Lessor / Lessee**
- \* Maintenance and Service of all roller shutter doors on a twelve monthly basis and repairs due to

Lessee's use or neglect: **Lessor / Lessee**

Special Conditions: \_\_\_\_\_

#### 6. DECLARATION

1. The applicant warrants and declares that they are not bankrupt or an undischarged bankrupt.
2. The applicant acknowledges that it is their responsibility to pay the lease preparation fee or legal costs (if applicable) associated with the preparation of the lease, whether or not the issued lease is signed by the applicant for the subject property
3. The applicant declares and affirms that the information given above is true and correct and that the rental payable is within their means
4. It is the Lessee's responsibility to satisfy themselves regarding any aspect of suitability, usage, hours of operation etc and obtain Council approval ( or any other appropriate approvals) for usage / occupation of the premise

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 2017 Signed: \_\_\_\_\_