

# Tenancy Application Form

Please note: **The completion of this form is not mandatory, but the voluntary supply of information will enhance the likelihood of a tenancy being entered into.**



**KAREN JOHNSON**  
PROPERTY MANAGEMENT LTD

1 <sup>ST</sup> APPLICANT FIRST NAMES:		SURNAME:		MALE FEMALE	
PHONE HOME:		MOBILE:			
DATE OF BIRTH:		AGE:		DRIVERS LICENSE Version (5b on card)	
EMAIL ADDRESS:					
CURRENT EMPLOYER:			POSITION:		WORK PHONE:
DO YOU HAVE PETS: YES NO PLEASE SPECIFY				DO YOU SMOKE: YES NO OUTSIDE	
CURRENT ADDRESS:					
HOW LONG HAVE YOU LIVED THERE:		CURRENT RENT \$		REASON FOR LEAVING:	
NAME OF LANDLORD:			PHONE:		MOBILE:
PREVIOUS ADDRESS:					
HOW LONG HAVE YOU LIVED THERE:		CURRENT RENT \$		REASON FOR LEAVING:	
NAME OF LANDLORD:			PHONE:		MOBILE:
WILL YOU BE SEEKING ASSISTANCE FROM WINZ YES NO			WINZ NUMBER:		
BANK ACCOUNT NUMBER FOR RENTAL PAYMENT DEDUCTIONS:			RENTAL PAYMENT FREQUENCY: please indicate WEEKLY FORTNIGHTLY MONTHLY		

2 <sup>ND</sup> APPLICANT FIRST NAMES:		SURNAME:		MALE FEMALE	
PHONE HOME:		MOBILE:			
DATE OF BIRTH:		AGE:		DRIVERS LICENSE Version (5b on card)	
EMAIL ADDRESS:					
CURRENT EMPLOYER:			POSITION:		WORK PHONE:
DO YOU HAVE PETS: YES NO PLEASE SPECIFY				DO YOU SMOKE: YES NO OUTSIDE	
CURRENT ADDRESS:					
HOW LONG HAVE YOU LIVED THERE:		CURRENT RENT \$		REASON FOR LEAVING:	
NAME OF LANDLORD:			PHONE:		MOBILE:
PREVIOUS ADDRESS:					
HOW LONG HAVE YOU LIVED THERE:		CURRENT RENT \$		REASON FOR LEAVING:	
NAME OF LANDLORD:			PHONE:		MOBILE:
WILL YOU BE SEEKING ASSISTANCE FROM WINZ YES NO			WINZ NUMBER		
BANK ACCOUNT NUMBER FOR RENTAL PAYMENT DEDUCTIONS:			RENTAL PAYMENT FREQUENCY: please indicate WEEKLY FORTNIGHTLY MONTHLY		

PLEASE LIST ALL OTHER PERSONS WHO WILL BE LIVING AT THE PROPERTY (INCLUDING CHILDREN)				
1.	D.O.B.	OCCUPATION	RELATIONSHIP TO YOU	PHONE #
2.	D.O.B.	OCCUPATION	RELATIONSHIP TO YOU	PHONE #
3.	D.O.B.	OCCUPATION	RELATIONSHIP TO YOU	PHONE #
4.	D.O.B.	OCCUPATION	RELATIONSHIP TO YOU	PHONE #
5.	D.O.B.	OCCUPATION	RELATIONSHIP TO YOU	PHONE #

.....PLEASE TURN OVER

NUMBER OF VEHICLES YOU WILL BE PARKING AT PROPERTY:	
Make & Model:	REGISTRATION #:
Make & Model:	REGISTRATION #:

Emergency contact of someone not living with you that we can contact in case we cannot find you. <b>This must be a New Zealand address</b>	
NAME:	RELATIONSHIP TO YOU?:
ADDRESS:	PHONE NUMBER:
EMAIL ADDRESS:	

HAVE YOU EVER BEEN EVICTED OR ARE YOU IN DEBT TO ANOTHER LANDLORD OR AGENT	YES	NO
IF YES.... GIVE DETAILS		
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE	YES	NO
IF YES.... GIVE DETAILS		

DATE PROPERTY REQUIRED BY:	# BEDROOMS REQUIRED:	GARAGE YES / NO	MAXIMUM RENT YOU ARE WANTING TO PAY
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**Privacy Statement:**  
 This Tenancy Application Form collects personal information about you. The information collected is required to assess your eligibility as a tenant/s for the rental property you have applied for. The information provided on this form will be used to carry out certain tenant criteria checks pursuant to Karen Johnson Property Management Ltd.'s policies and procedures. This may include checks with the Ministry of Justice, Veda or other credit check facilities, reference checks including with current or previous landlords, current or previous employers and character references. If your application is not successful, it will be destroyed within one calendar month of the date of its signing. If your Tenancy Application is successful, your personal information will be stored on Karen Johnson Property Management Ltd.'s property management software and in hard copy in a file for the relevant property for the term of the tenancy. This information may, upon request from the landlord, be provided to them or to their authorised agents. At the end of your tenancy, the information will be archived as required by law for a minimum of seven (7) years. Karen Johnson Property Management Ltd may receive requests from authorities whom have a legislative mandate to collect certain information. Karen Johnson Property Management Ltd will comply with all laws and regulations regarding those requests. For example, this may include providing information to the Police regarding any investigations

I/We the applicant, warrant that the information provided on this Tenancy Application form is true and correct.  
 I/We understand that this application is subject to the approval of the property owner.  
 I/We authorise Karen Johnson Property Management Ltd to conduct reference, credit and Ministry of Justice checks to assess eligibility of this application.  
 I/We understand and agree that if this application is unsuccessful, Karen Johnson Property Management Ltd is not obliged to give reasons for non-approval.  
 I/We understand that in the event that this application is not successful, it will be destroyed after one calendar month.  
 I/We understand and agree that if this application is successful, I/We will be asked to sign a Tenancy Agreement for the property, and

- pay a minimum of one week's rent (non-refundable deposit to secure the premises)
- pay up to 4 weeks bond for the property

within 24 hours of acceptance of this application to Karen Johnson Property Management Ltd.  
 I/We also understand that it I/We will be responsible for the connection of utilities (e.g. gas, electricity, internet, telephone etc.) into my/our name by the commencement of the Tenancy.

<b>I have read and understand the terms and conditions:</b>
SIGNATURE OF APPLICANT:
SIGNATURE OF APPLICANT:
DATE: