



New Tenant Application Form

If there is insufficient space in any section to provide a full response, please attach extra pages.

APPLICATION DETAILS

Address of Rental Premises applying for:

Proposed Use of Premises:

Net Rental*:

Outgoings to be confirmed at a later date.

***Note:** We will require a bank guarantee/bond equivalent to 6 months rent and we will require guarantor(s).

PROPOSED NAME OF LESSEE

Name:

ABN:

Registered Office Address:

Suburb:

Postcode:

Phone:

Mobile:

Email Address

1ST APPLICANT'S DETAILS

Title: Surname: Given Name:

Address:

Suburb: Postcode:

Phone: Mobile:

Email Address

Drivers Licence/Passport No: State:

2ND APPLICANT'S DETAILS

Title: Surname: Given Name:

Address:

Suburb: Postcode:

Phone: Mobile:

Email Address

Drivers Licence/Passport No: State:

Note: Please attach a photocopy of your current drivers licence and/or passport. Documents must be certified in accordance with the Information memorandum. Where applicable, Company Directors will be by default be guarantors of the lease / licence should the application be successful.

PROPOSED GUARANTOR(S)

Note: Please enclose written references with your application.

Name of Contact:

Address:

State:

Phone:

Driver's Licence No:

Mobile:

Property owned by guarantor:

Name of Contact:

Address:

State:

Phone:

Driver's Licence No:

Mobile:

Property owned by guarantor:

SOLICITOR'S DETAILS

Company Name

Address:

State:

Phone:

Contact Person:

Email Address:

ACCOUNTANT'S DETAILS

Company Name

Address:

State:

Phone:

Contact Person:

Email Address:

BANK DETAILS

Institution Name:

Branch:

Email Address:

Phone:

Address:

State:

Contact Person:

Position:

PROPOSED LESSEE BUSINESS/TRADE REFERENCES

Note: Please enclose written references with your application.

Company Name 1:

Address:

State:

Phone:

Email Address:

Contact Person:

Position:

Company Name 2:

Address:

State:

Phone:

Email Address:

Contact Person:

Position:

Company Name 3:

Address:

State:

Phone:

Email Address:

Contact Person:

Position:

CURRENT LANDLORD REFERENCE

Name of Landlord:

Address:

State:

Landlord's Agent:

Agent Contact Person:

Phone:

PREVIOUS LANDLORD REFERENCE

Name of Landlord:

Address:

State:

Landlord's Agent:

Agent Contact Person:

Phone:

BUSINESS INFORMATION

Legal business or company name:

Note: Attach a copy of the Certificate of Registration of Business Name and Company Registration Certificate (if applicable).

Trading name: ABN/ACN for the business (if applicable):

Type of business:

Note: If it is a retail business, please select one of the Retail shop businesses in the Retail Lease Act.

Please provide full details of proposed usage and the products/services to be sold:

Note: If there is insufficient space, attach extra pages.

Are you currently trading in a similar type of business? If YES, please provide details. Yes No

Is this your first business? Yes No

Please provide details of your current business activities together with your background and expertise within your industry. If necessary attach details to this application:

Do you have any other business or stores, if yes indicate type and location?

If you have a current business what were the gross sales for the past 3 years?

Year 1 \$ Year 2 \$ Year 3 \$

Have you ever leased a business premises before? If YES, please provide details.

Yes

No

How do you intend to promote, advertise and improve your business?

Will you occupy and manage the business yourself, or will someone run the business for you?

Will you have other staff working at the premises? How many?

Full-time

Part-time

Casual

Has any legal action been instigated against you for default under any credit contract within the last 5 years? If YES, please supply details:

Yes

No

Have you ever had a judgment entered or a conviction recorded against you, been bankrupt, insolvent, assigned your estate for the benefit of creditors or entered into a scheme or arrangement with any creditor? If YES, please supply details:

Yes

No

ASSETS & LIABILITY SCHEDULE

ASSETS	\$	\$	LIABILITIES	\$	\$
	App 1	App 2		App 1	App 2
Cash in Bank			Bank Over Draft		
Debtors			Creditors		
Other			Other		
TOTAL			TOTAL		
REAL ESTATE			MORTGAGES		
1.			1.		
2.			2.		
3.			3.		
4.			4.		
VEHICLES			VEHICLES		
1.			1.		
2.			2.		
3.			3.		
4.			4.		
Other Assets			Other - Loans		
Shares					
Other Assets					
Furniture					
TOTAL ASSETS			TOTAL LIABILITIES		
			NET WORTH		
Combined GROSS	WORTH		Combined NET	WORTH	

I/we hereby certify that the above statement is true and correct and that all of the Assets and Liabilities listed above are owned personally by me/us.

1ST APPLICANT

Name:

Signature

Date:

2ND APPLICANT

Name:

Signature

Date:

DECLARATION

I/We declare that the information provided in this application is true and correct and that all reasonable information and details have or will be provided to allow application to be considered.

Name: Signature

Date:

Name: Signature

Date:

DISCLAIMER

The completion and submission of this application is no assurance that your application will be accepted. TAFE NSW will not be required to provide you with any reason if this application is not accepted. This application does not signify any contractual obligation on either party in respect of the proposed lease/licence.

BEFORE YOU SUBMIT THIS APPLICATION, YOU MUST CHECK THAT YOU HAVE:

Completed and signed the application form

Provided a copy of the Certificate of Registration of Business Name and a copy of the Company Registration Certificate (if applicable)

Completed the Assets and Liability Schedule

Provided a photocopy of your Drivers Licence

Assets and Liability Schedule to be certified by registered accountant

Bank Account Statements that reflect the figures from the Asset & Liability Schedule