



VISION REALTY

Residential Property Management

Property address: _____

Full Name: _____ (M/F)

DOB: _____ Smoker: Y/N Email: _____

Current address: _____

Phone: Home _____ Work _____ Mobile _____

Driving License: _____ WINZ number: _____

Current length of tenancy _____ Rent per week _____

Reason for leaving _____

Are there any dependants? _____ Age _____ Have you pets? _____

Availability date to move in: _____

Length of tenancy do you require/prefer? _____

Details of present or most current landlord:

Name: _____

Phone: Home _____ Work _____ Mobile _____

Employment/ Income details:

Current employer/ income source: _____

Position Held: _____ Employer's phone number: _____

Length of time with this employer: _____

More reference: 1.) _____ Ph: _____ Relationship: _____

2.) _____ Ph: _____ Relationship: _____

Next of Kin:

Name: _____ Relationship: _____

Address: _____

Phone: Home _____ Mobile _____

I have read and understood this application form. I agree to this information being used as necessary to obtain personal references and a credit check. All information will be treated confidentially in accordance to the Privacy Act 1993.

We require 4 weeks bond, 1 week rent in advance & \$300 + GST letting fee once accepted.

Signature: _____ Date: _____

P: 03-3586345

F: 03-3586346

M: 021-748806

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