

## **TENANCY REFERENCE**

I/We(Tenant Name/s)  Authorise Agency to answer the following questions regarding my/our tenancy with their agency.	
Property Address:	
I/We the tenants give approval for information relating to our tenancy t	
TENANT SIGNATURE	
DATE:	
OFFICE USE ONLY - (Please circle)	
1. Have the tenant/s always paid their rent on time?	<b>Y</b> / <b>N</b>
2. Have any "notices to remedy" been issued for any reason during the tenancy period?	<b>Y</b> / <b>N</b>
3. Has the property always been clean and tidy at inspections?	<b>Y</b> / <b>N</b>
4. Would you lease one of your rental properties to these/this tenant a	gain? Y/N
5. Do you expect the entire bond amount to be refunded to the tenants upon vacating the property?	<b>Y</b> / <b>N</b>
6. What was the rent per week?	\$
7. Are they on a current lease?	<b>Y</b> / <b>N</b>
8. Have there been any complaints from their neighbours?	<b>Y</b> / <b>N</b>
PROPERTY MANGER/LANDLORD SIGNATURE:	
CONTACT – PHONE:	
FAX:	

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