



TENANT INCOME ASSESSMENT

OFFICE USE ONLY
Dwelling ID: _____
Assessment Date: _____

TENANT 1	NAME: _____
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<input type="checkbox"/> YES	<input type="checkbox"/> NO	EMPLOYMENT & WAGES
Please detail your employment circumstances for the last 12 months Please attach 3 x most recent payslips and PAYG summary.		

Company:	Date Employment Commenced:	Date Employment Ceased:
Company:	Date Employment Commenced:	Date Employment Ceased:
Company:	Date Employment Commenced:	Date Employment Ceased:
Company:	Date Employment Commenced:	Date Employment Ceased:

CENTRELINK Please attach both 1. Centrelink Income Statement 2. Twelve (12) months Centrelink Payment History (Gross Payments)	YES	<input type="checkbox"/>	Total amount received \$ _____ Fortnightly
	NO	<input type="checkbox"/>	Date of Grant: _____

BANK INTEREST Please attach bank statement (proof of Interest earned)	YES	<input type="checkbox"/>	Total interest \$ _____ Annually
	NO	<input type="checkbox"/>	

CHILD SUPPORT/MAINTENANCE Please attach Child Support Statement	YES	<input type="checkbox"/>	Total maintenance \$ _____ Annually
	NO	<input type="checkbox"/>	

FOREIGN PENSIONS Please attach Statement	YES	<input type="checkbox"/>	Total pensions \$ _____ Annually
	NO	<input type="checkbox"/>	

FOREIGN INCOME As required (please attached proof of income)	YES	<input type="checkbox"/>	Total amount received \$ _____
	NO	<input type="checkbox"/>	_____ Annually/Fortnightly/Weekly

FINANCIAL SUPPORT Please attach Statutory Declaration stating period of financial support & amount received (i.e. food, clothes, rent, etc)	YES	<input type="checkbox"/>	Total support \$ _____ Annually
	NO	<input type="checkbox"/>	

BUSINESS INCOME Please attach letter from Accountant/tax return/BAS statement	YES	<input type="checkbox"/>	Total amount received \$ _____ Annually
	NO	<input type="checkbox"/>	

OTHER INCOME As required (i.e. rental income, scholarships, dividends, superannuation etc)	YES	<input type="checkbox"/>	Total income \$ _____ Annually
	NO	<input type="checkbox"/>	Source of income: _____

TOTAL ANNUAL GROSS INCOME \$ _____

I acknowledge upon signing this document that I have disclosed all income sources for the 12 month period prior to the date of my application and that all information is true and correct.
I agree that by signing my signature electronically, I accept to be bound to this declaration and any terms and conditions mentioned in this agreement.

DATE: _____

TENANT SIGNATURE: _____



TENANT INCOME ASSESSMENT

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TENANT 2	NAME: _____
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EMPLOYMENT & WAGES		
<input type="checkbox"/> YES <input type="checkbox"/> NO Please detail your employment circumstances for the last 12 months Please attach 3 x most recent payslips and PAYG summary.		
Company:	Date Employment Commenced:	Date Employment Ceased:
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Company:	Date Employment Commenced:	Date Employment Ceased:
Company:	Date Employment Commenced:	Date Employment Ceased:

CENTRELINK Please attach both 1. Centrelink Income Statement 2. Twelve (12) months Centrelink Payment History (Gross Payments)	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	Total amount received \$ _____ Fortnightly Date of Grant: _____
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BANK INTEREST Please attach bank statement (proof of Interest earned)	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	Total interest \$ _____ Annually
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CHILD SUPPORT/MAINTENANCE Please attach Child Support Statement	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	Total maintenance \$ _____ Annually
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FOREIGN PENSIONS Please attach Statement	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	Total pensions \$ _____ Annually
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FOREIGN INCOME As required (please attached proof of income)	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	Total amount received \$ _____ _____ Annually/Fortnightly/Weekly
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FINANCIAL SUPPORT Please attach Statutory Declaration stating period of financial support & amount received (i.e. food, clothes, rent, etc)	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	Total support \$ _____ Annually
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BUSINESS INCOME Please attach letter from Accountant/tax return/BAS statement	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	Total amount received \$ _____ Annually
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OTHER INCOME As required (i.e. rental income, scholarships, dividends, superannuation etc)	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	Total income \$ _____ Annually Source of income: _____
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TOTAL ANNUAL GROSS INCOME \$ _____

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TENANT INCOME ASSESSMENT

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TENANT 3 NAME: _____

<input type="checkbox"/> YES	<input type="checkbox"/> NO	EMPLOYMENT & WAGES
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Company: _____	Date Employment Commenced: _____	Date Employment Ceased: _____
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Company: _____	Date Employment Commenced: _____	Date Employment Ceased: _____

CENTRELINK Please attach both 1. Centrelink Income Statement 2. Twelve (12) months Centrelink Payment History (Gross Payments)	YES	<input type="checkbox"/>	Total amount received \$ _____ Fortnightly
	NO	<input type="checkbox"/>	Date of Grant: _____

BANK INTEREST Please attach bank statement (proof of Interest earned)	YES	<input type="checkbox"/>	Total interest \$ _____ Annually
	NO	<input type="checkbox"/>	

CHILD SUPPORT/MAINTENANCE Please attach Child Support Statement	YES	<input type="checkbox"/>	Total maintenance \$ _____ Annually
	NO	<input type="checkbox"/>	

FOREIGN PENSIONS Please attach Statement	YES	<input type="checkbox"/>	Total pensions \$ _____ Annually
	NO	<input type="checkbox"/>	

FOREIGN INCOME As required (please attached proof of income)	YES	<input type="checkbox"/>	Total amount received \$ _____
	NO	<input type="checkbox"/>	_____ Annually/Fortnightly/Weekly

FINANCIAL SUPPORT Please attach Statutory Declaration stating period of financial support & amount received (i.e. food, clothes, rent, etc)	YES	<input type="checkbox"/>	Total support \$ _____ Annually
	NO	<input type="checkbox"/>	

BUSINESS INCOME Please attach letter from Accountant/tax return/BAS statement	YES	<input type="checkbox"/>	Total amount received \$ _____ Annually
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OTHER INCOME As required (i.e. rental income, scholarships, dividends, superannuation etc)	YES	<input type="checkbox"/>	Total income \$ _____ Annually
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TOTAL ANNUAL GROSS INCOME \$ _____

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