

## RENTAL APPLICATION

### BUSINESS CONTACT INFORMATION

Company/Business Name	Date business commenced	
Trading Name	ABN / ACN Number	
Trading Address	Postal Address	
Business Phone Number	Email Address:	
Contact Name	Landlord Name:	
Mobile Number	Landlord Phone Number	

### DIRECTORS / PROPRIETORS / SOLE TRADERS DETAILS

Name	Residential Address	Date of Birth

### BANK DETAILS & CONTRACT TERM

Bank Name	Branch	
BSB No	Account Number	
Contract Term	<input type="checkbox"/> 12 Month <input type="checkbox"/> 24 Month <input type="checkbox"/> 36 Month	

### PRIVACY ACT 1988

**1. Agreement that Chrystal & Co Pty Ltd trading as Caterlink may seek consumer credit information (Section 18K(1)(b), Privacy Act 1988)**

If Chrystal & Co. Pty Ltd trading as Caterlink considers it relevant to assessing my/our application for commercial credit, I/we agree to Chrystal & Co. Pty Ltd trading as Caterlink obtaining from a credit reporting agency a credit report containing personal credit information about me/us in relation to commercial credit provided by Chrystal & Co. Pty Ltd. trading as Caterlink.

**2. Exchanging information with other credit providers (Section 18N(1)(b), Privacy Act 1988)**

I/we agree to Chrystal & Co. Pty Ltd trading as Caterlink obtaining personal information about me/us from other credit providers, whose names I/we may have provided for Chrystal & Co. Pty Ltd trading as Caterlink or that may be named in a credit report, for the purpose of assessing my/our application for commercial credit made to Chrystal & Co. Pty Ltd trading as Caterlink.

**3. Agreement to a credit provider being given a consumer credit report to collect overdue payments on commercial credit (Section 18K 1(h) Privacy Act 1988)**

### SIGNATURES

I/we agree that Chrystal & Co. Pty Ltd trading as Caterlink may obtain a consumer credit report about me/us from a credit reporting agency for the purpose of collecting overdue payments relating to commercial credit owed by me/us

I/we have provided Caterlink with my/our                       Driver's License                       Medicare Card

Signature	Signature
Name	Name
Position	Position
Date	Date
Caterlink Consultant:	