Sackley, Pip

From:

Gray, Deb

Sent:

Thursday, 31 January 2013 9:24 AM

To:

Gray, Deb

Subject:

FW:

From:

Sent: Thursday, 19 July 2012 10:29 PM

To: Perth Housing

Subject: RE:

Hi Caitlyn

Not a problem, fingers crossed that the midge/mozzie traps work enough for it to be bearable so we don't need to bother anyone else. If not, we will see how we go with DCO. Thanks for all help and empathy.

Have a nice weekend.

From: Perth.Housing@dha.gov.au

To:

Subject: RE:

Date: Thu, 19 Jul 2012 08:03:28 +0000

Good Afternoon

As rent allowance isn't normally approved in Broome, we don't have a set ceiling for this locality. Once the special needs recognition was received by our office, the housing manager would determine an appropriate ceiling.

How she would do this is by reviewing the median rental costs in Broome, then depending on recommendation from DCO would approve any necessary ceiling increases so that your family are housed in accordance with the special needs.

Please let me know should the above not make sense

Thank you

Kind Regards

Caitlyn Hennessy | Housing Consultant

Perth | Defence Housing Australia

Unit 43, Level 1, Fremantle Malls

27-35 William Street, Fremantle WA 6160

Tel: 139 342 | Fax: 02 6222 2219

perthhousing@dha.gov.au | www.dha.gov.au

It is IMPORTANT that you notify DHA of any changes to your personal circumstances as this may effect your Housing Entitlement.

From:

Sent: Tuesday, 17 July 2012 9:06 PM **To:** Perth Housing: Kessels, Kelly

Subject: RE:

Hi Caitlyn

Thanks very much for your prompt reply.

Could you please advise what the rent ceiling is for Broome so we can see if we could afford to move with rent assistance before we go to DCO. Otherwise and regrettably, we may have to seriously consider going MWD(U) for our daughters health, unfortunately it is something that we can deal with for the short term but not the next 2-3 years.

Again many thanks.

From: Perth.Housing@dha.gov.au

To:

Subject: RE:

Date: Tue, 17 Jul 2012 08:42:27 +0000

Good Afternoon,

Thank you for your e-mail below, I really sympathise with you regarding the current situation that your family are facing.

Due to the locality of your families posting we are unable to offer you alternate options of housing with Service Residences. The reason behind this is that there is not a selection of housing in Broome to choose from and normally Service Residences are appointed to certain positions in our remote localities. Unfortunately at this stage I can confirm that there are no other Service Residences available that we could offer you.

The only other advice that we could offer you based on the information provided in your e-mail is to speak to the Defence Community Organisation (DCO) regarding your daughter developing an allergic reaction to midge/mozzies within your local area. DCO may assist with recognising your daughter with Special Needs which may require you to vacate your Service Residence into Rent Allowance. As you are suitably housed, this is the only advice that we can give you at this stage.

Please let me know should you have any queries

Thank you Kind Regards

Caitlyn Hennessy | Housing Consultant

Perth | Defence Housing Australia Unit 43, Level 1, Fremantle Malls

27-35 William Street, Fremantle WA 6160

Tel: 139 342 | Fax: 02 6222 2219

perthhousing@dha.gov.au | www.dha.gov.au

It is IMPORTANT that you notify DHA of any changes to your personal circumstances as this may effect your Housing Entitlement.

From:

Sent: Monday, 16 July 2012 1:54 PM **To:** Perth Housing; Kessels, Kelly **Subject:**

Good Afternoon

We are the Defence family living in the service residence at the house. Cheryl advised me to write my query in an email; as follows.

The estate and in particular the house we live in has a midge/mozzie infestation due to the Roebuck tidal flat directly behind our house. Since moving in, our 2 year old daughter has developed an allergic reaction to the constant bites she is getting and is now needing prescription cortisone cream. She does not sleep well at night because she is irritated by the constant bites that are getting infected and also leaving scars. We are having to keep her inside as much as possible but she consistently has around 50 bites. Being a stay at home mum with two young children we spend a lot of time at home but cannot go outside because the midges and mozzies are so thick. We were hoping that it may just be a problem in the wet season however, unfortunately the dry season has provided no relief.

This morning I called a local business who provides midge/mozzie traps. We are having two installed this week, hopefully this alleviates the problem enough that we do not need to take any further action. However, they did advise me that if the traps do not work then unfortunately there is nothing further that can be done.

I have also spoken to the City Council who has advised me that Roebuck Estate is by far the worst area in Broome for midges/mozzies and in particular our Crescent because of its location to the tidal flat. They confirmed that there are no plans for spraying as it is simply not effective. They suggested moving to the Cable Beach side of town as they are not nearly as prevalent on that side of town and we would certainly see a big improvement. Therefore, if the traps do not work we would like to enquire, are there any DHA houses available on that side of town that we may be able to move to? If not, are we eligible for rent assistance if we could afford to move to a private residence? We can provide a doctors certificate and any other supporting documentation if needed.

Thank you for your assistance, any advice you could provide is greatly appreciated.



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Total RA Housing Checklist

F-RA-114

MEMBER INFORMATION	Α	TM CASE:			RSA ID	1 1		
Emp ID:	SVC#:	Rank:		u	nit:			
Surname:	Fire	st Name:		Categ	orisation	: M		
(m)	(w)		1	(h)		,		
Address:					U	PRN:		
RA Type FR	RA Approva	Reason		(Ceiling In	cr?	\$	
Mbr sent to Toll ☐Y ☐!	N DA Only	□ Y □ N	RA WEF.	Deliver	у 🛮 Осс І	Date	27/69	3/12
Total Lease rent: \$1900.	MWD b	dr ent:	Share#:	Leas	se end da	te	25/09	1/13
Advances □ Bond \$	□ RIA \$	☐ Utilities	; \$	RA WI	dy Amt	\$	20-9	
			I		•	<u> </u>		
COMMENCE RA PROCESS								
eck Workflow Queues Daily								
Li Created Case via Workflow			•		within 48			
Checked for other Cases (p			lotification.	(Mer	ge with ex	asting (case for F	lousing)
☐ Taken ownership of the Ho								161
☐ Contacted member - Discus		-	d		y KPI fron			
☐ RA Guide, Regional Fact sh☐ LIA Availability form sent to							attached	to CLM)
☐ Set Reminder to follow-up					et to follo			
	· ·				day after a			
☐ Advance requested ☐ Pr	TOP to RA (case c	reated)			of requir			
☐ Advance sent for approval☐ Complete RA Calculator, co	nny to TC	El lindate Te			file to de	legate i	to approv	e asap)
☐ Complete RA Calculator, co☐ Sent RA 'Commence' letter		□ ∪pdate rei	nancy Checklis	t & save				
☐ Access pay transaction via		ary coroon (9	Send for appro	val in W	arleflaue 9	nrovido	filo to a	
☐ Updating FHS in CLM	WORKHOW Suffill	ary screen (2			Property			
VARY RA PROCESS Use pencil	for ticking the Vary or	ocess stens to ena					enter oc	c. Date)
Vary Reason & WEF Date:			Vary Reason			ies		
ry Reason & WEF Date:			Vary Reason					
Vary Reason & WEF Date:			Vary Reason		······································		·	
Vary Reason & WEF Date:			Vary Reason					
☐ Reminder triggers follow up	on paperwork	(allow 7 days	after each con		1	7	/	
☐ All completed docs received	<u> </u>	-	CLM or in file -		date stami	ped)	' /	' ,
☐ Complete RA Calculator, co	py to TC		nancy Checklis					
☐ Access pay transaction via	Workflow Summa		Send for approv			provide	file to au	oprover)
☐ Sent RA 'Vary' letter to me	mber							<u></u>
CEASE PROCESS								
Check for Vacancy Notification	s, run Expected I	Future Vacates	Report & chec	k FRR Fi	lters DAIL	Υ	PHIRASTO SCIETO SCIENCE HIT GROUP (ST	energy American
☐ Send 'Cease form' & letter	(Cease Letter	Required Filter	– Cease letter	found o	n Corresp	ondenc	e screen	in TMS)
☐ Follow up cease paperwork	with member		(Reminder	Required	l Filter - 1	4 days	before va	acation)
☐ Follow up cease paperwork	with member		(Reminde	r Require	ed Filter -	7 days	before va	acation)
☐ Bring the cease paperwork	to the attention o	of the DRHM	(Remind	er Requi	red Filter	- 7 day	s after va	acation)
☐ Received Cease form								
□ Received Final Rent Receipt			(Enter this d	ate rec'	d onto th	e TC)		/
☐ Access pay transaction via	Workflow Summa	ary screen <i>(S</i>	end for approv	al in Wo	rkflow & p	provide	file to ap	prover)
•								



Total RA Housing Checklist

F-RA-114

Total Lease rent: \$	MWD bdr ent.:	Share#:	Lease end date	
New Lease rent: \$	MWD bdr ent.:	Share#:	Lease end date	
New Lease rent: \$	MWD bdr ent.:	Share#:	Lease end date	The state of the s

	RA PROCESSING DATE SENT TO SUPPORTING DOCUMENTS DATE SENT TO DOCUMENTS								
AAR Number (if diffe	RECEIVED								
Pex-51868	Comm - TRA000 - 27/09/12	20/09/12	24/9/128						
			PARTITURE STATE OF THE STATE OF						
7									
3									
	1	I	1						

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Date: 20/09/12

Page: 001

TENANT TRUST LEDGER REPORT

Reported	Reported Period(s): Complete History 1 records selected - All Tenants For All Managers											
Tenant Ad Date	count Ref.	Paid	Ор	Acct.	Description	Rent	Amt. Due	Due To	Paid From	То	Inhand	Amount excl
BRANDO	N											
12/09/12	00244705	4750.00	MR	101 N/A	Rent Residential Bond Includes 0.00 GST posit 12/09/12	950.00 W	<i>I</i> 1 0.00	02/10/12	25/09/12	02/10/12	0.00	950.00 3800.00
12/09/12	00244706	950.00	MR	101	Rent posit 12/09/12	950.00 W	0.00	09/10/12	02/10/12	09/10/12	0.00	950.00
19/09/12 19/09/12 19/09/12 19/09/12 19/09/12		-3800.00 3800.00 -3800.00 3800.00 -3800.00	CS CS CS CS	BondD BondC BondD BondC BondD	Bond Disbursed BARRG2: Cancelled:Bond Disbursed Bond Disbursed BARRG2: Cancelled:Bond Disbursed Bond Disbursed BARRG2:	BARRG29 BARRG29						
				Total F	Rent							1900.00



Notification of housing change

1.	Are you relocating at Department of Defence expense?	Yes No Go	o to PART A Question 3 below.	
2.	Are you relocating to Australia from overseas?	<u></u> f	all relevant details below. orm. You will need to contact 1	Toll Transitions.
PAF	RT A - Personal details			
3.	Employee ID number			
4.	Service number			
5.	Title/Rank			
6.	Full name	Family name		Given name(s)
7.	Service		n Defence Country	y
8.	Date of birth			
9.	Gender	Male Female		
10.	Address details	Current residential address	Broome	
(Postal address (If different from above)	State WA Browne State WA	Postcode 6725 Postcode 6725
	Work address	Position/Job title Unit Base	Norforce.	
	Contact details	Unit location Street address	PO BOX 611 Broome WA	1725
	Telephone number	Home ()		Work Work
	Mobile			
	Fax number	Home ()		Work ()
	Email	Home		
		Work		
				MOHC name 2

11,	Date of entry/enlistment			
12.	Have you previously served in the ADF or as a Lateral Recruit?	No V	Dates of previous service	to
13.	Your categorisation for housing (Select ONE only)	MWD	Member with Dependants i.e. a Defence member who maintains a home for dependants and who occupies the home with at least one dependant.	Date MWD categorisation recognised by ADF / / Place
		MWD(U)	Member with Dependants (unaccompanied)	Address where your spouse and/or dependants live/reside
			i.e. a Defence member who maintains a home for dependants and who is separated from them for service recognised reasons.	State Postcode
			Note: A categorisation form or minute from your gaining unit is required.	Go to Question 16
		MWOD	Member without Dependants i.e. a Defence member who is not MWD or a MWD(U).	Go to Question 16
	etails of your spouse or partner (MWD only)	Family nam		
		ADF or Aus Service (AF	tralian Public No S) member Yes	Employee ID/AGS number
				Navy Army Air Force Reserve
	٠.٠			Current rank/grade
				EL1
				Note: If you both serve in the ADF, the more senior ranking member must complete this form.

15.	Do you have any dependants who will accompany you on this relocation?	No Go to Question 16 Yes Please provide their details below (if there are more than six dependants please provide details on a separate sheet).							
	(MWD only)	осренаан	o picase provide details on a	separate anody.					
	Dependant 1	Family name		Date of birth		What type of school does this dependant attend?			
		-				Does not attend school			
		Given name(s)	·			Infants/primary			
				Male	Female 🔽	Secondary Secondary			
		Relationship to you (e.g. son, daughter)	daughter			Tertiary			
	Dependant 2	Family name		Date of birth		What type of school does this dependant attend?			
						Does not attend school			
		Given name(s)				/ Infants/primary			
				Male	Female 🕡	Secondary			
ĺ		Relationship to you (e.g. son, daughter)	daughter			Tertiary			
	Dependant 3	Family name		Date of birth		What type of school does this dependant attend?			
					1	Does not attend school			
		Given name(s)		·		Infants/primary			
				Male	Female	Secondary			
		Relationship to you (e.g. son, daughter)				Tertiary			
	Dependant 4	Family name		Date of birth		What type of school does this dependant attend?			
				/		Does not attend school			
		Given name(s)				Infants/primary			
				Male	Female	Secondary			
(Relationship to you (e.g. son, daughter)				Tertiary			
	Dependant 5	Family name		Date of birth		What type of school does this			
	۵			1	1	dependant attend? Does not attend school			
		Given name(s)				Infants/primary			
				Male	Female	Secondary Secondary			
		Relationship to you (e.g. son, daughter)				Tertiary Tertiary			
	Dependant 6	Family name		Date of birth		What type of school does this			
						dependant attend? Does not attend school			
		Given name(s)				Infants/primary			
				Male	Female	Secondary Secondary			
		Relationship to you (e.g. son, daughter)				Tertiary Tertiary			

PAI	RT B - Housing considerations	
16.	Has there been a change in your personal circumstances?	Please attach supporting documentation as advised by your local HMC. Marriage/De facto/Interdependent recognition Recognition of special needs Exchange of Service Residence Own means to Service Residence/Live in Accommodation Change in dependant status Rent Allowance approval Other
17.	What is your current housing arrangement?	Live in Accommodation Service Residence Own Home Rent Allowance Other
18,	When will you be moving out of your current housing arrangement?	2619112
19.	What is the required date for housing?	26/9/12
20.	What type of permanent housing do you require?	MWD Service Residence
(DHA aims to provide you with a housing solution that takes into account your Defence entitlement, your family composition and, where possible, your preferences, However, the solution is dependent on available options.	MWOD Live in Accommodation Go to Question 23 MWD(U) Rent Allowance I will be occupying Other Other
21.	Are you planning on living outside your posting locality?	No You need your Commanding Officer's/Officer Commanding's (CO/OC) permission, an approval minute or other approval documentation to process your application.
22.	Do you have any pets?	Yes Type of pet Desexed (e.g. cat, dog) Sex Yes No Age Breed and size (small, medium, large)

23.	Do you, or any member of your dependent family, own or part own, a residential property in this posting locality? Note: You may not have an entitlement to subsidised housing assistance if you own a residential property in your posting locality. Contact your local HMC for more information. (If there is more than one property please provide details on a	No Yes	Address of the residential property Number of bedrooms State Postcode Do you intend to live at this residential address in this posting locality? No Reason Yes Date of intended occupancy / /
PAF	separate sheet). RT C - Other considerations		Is this residential property currently tenanted? No
24 .	Are you recognised as a family with special needs? (Refer to PACMAN Chapter 8) (MWD only)	No Yes	Please state your special needs requirements for housing
1	Give a brief summary and attach a copy of your <i>Recognition</i> , Family with Special Needs Letter, as approved by the Defence Community Organisation (DCO).		
25.	Do you have any other circumstances or personal preferences (not already included in this application) that you believe should be taken into account regarding your housing? This could include specific job requirements, which will help to determine your housing requirements, and may require Department of Defence approval.	No Yes	Please describe

PAF	RT D - Rent Allowance	
26.	Are you applying for Rent Allowance?	No Go to PART E – Declaration Yes
27.	Do you have your CO/OC's permission to live off base? Note: Live in Accommodation policy now directs that certain members may be required to live in (refer to PACMAN Chapter 7).	No Do not proceed until approval is confirmed Yes Was/is any Live in Accommodation held in your name? No Yes Date Live in Accommodation handed back / / Comments
28.	Reason you are applying for	Live in Accommodation not available
1	Rent Allowance Note: If you are contracted to the Department of Defence on continuous full-time service (CFTS) you will need to provide your contract/signal or minute from your unit CO/OC.	Suitable Service Residence not available SGT (E) to WO or MAJ (E) or higher rank Five years aggregate continuous full-time service (CFTS) completed Note: Your date(s) of enlistment must be completed at Question(s) 10 and 11 Only levels 1, 2 or 3 Live in Accommodation are available
		Other circumstances – please give details
		DHA Regional Myr approval due to midge/mozzie infestationin service residence
29.	Do you currently receive Rent Allowance? Note: A final rent receipt is required.	Yes Address of the property where you currently receive Rent Allowance State Postcode Date final rent paid to / / Are you sharing this property? No Yes The remaining occupants on Rent Allowance
່ວປ.	Will you be occupying a commercial boarding house? Note: Boarding in a private home does not constitute boarding for the purpose of calculating Rent Allowance.	No Yes
31.	Address of the rental property or commercial boarding house you will occupy	State WA Postcode 6-725 Number of bedrooms 4
32.	What is the term of the lease?	From 25 / 9 / 12 to 25 / 9 / 13 Date you occupied, or will occupy the property 26 / 9 / 12
33.	Is there a standard tenancy release clause included in your lease?	No State the reason why Yes

NOHC_page 7

34.	What is the total rent for the property?	If you are s you individ		h someone else plei	ase put the total amount for the property, no	ot the amount that		
		If occupyin	g a commercial boardir	ng house please put	the amount you will pay.			
	e e e e e e e e e e e e e e e e e e e	\$ 950	-00) F	er week	Per fortnight Per month			
35. Are you the sole occupant of the property for which you are applying for Rent Allowance? Note: MWD – do not include dependants. All other occupants of the premises, including civilians,		Yes V	Details of the people (If you are occupying Service number/ Employee ID (if applicable)		ling house go to Question 37)	Rent contribution		
	children, ADF members or house sitters will normally be regarded		(ii applicable)	(п аррисавіе)	Name	\$		
	as sharing the premises unless they have a more permanent	İ						
	residence in another locality and are no more than visitors or					\$		
	temporary co-residents (refer to					\$		
	PACMAN Chapter 7).					\$		
						\$		
36	Do you wish to elect the two bedroom ceiling appropriate to your rank? (MWD only)	No Yes	Note: If your rent is low, you may benefit from this option. Members choosing the two bedroom ceiling will not be eligible for ceiling increases, and this election applies for the term of the lease. For more information about this option contact DHA.					
37	Will you be claiming furniture rental? (MWOD and MWD(U) only)	No V		te claim. Furniture ro our rent, limited to y	ental such as white goods, beds, dining sui your ceiling. A furniture rental contract and option contact DHA.			

Application for bond, rent and utility connection deposit in advance Optional 38. Do you wish to apply for an advance payment for bond, rent or utility allowance? \$ Limited to the lesser of four Rent \$ weeks rent or ceiling \$ Utility connection deposit Note: Proof of payment must be provided to your local HMC within 14 days of receipt of advance(s) I understand that any advances specified above must be repaid to the Commonwealth. Advances will be recovered through fortnightly instalments directly from my pay over the term of the lease or a maximum of 26 fortnights whichever is the lesser period. Please select your preferred option: Term of lease (if less than 26 fortnights) 26 fortnights I understand that when ceasing Rent Allowance earlier than 26 fortnights, any monies still owed to the Department of Defence from an advance as outlined above, must be repaid in full immediately upon return of the bond. Date Member's signature If you have any questions relating to repayment of your advance(s), contact 1800 Defence (1800 333 362). 39. Statement IMPORTANT: Please confirm your I understand that I must provide DHA with the following supporting documentation in respect to understanding of Rent Allowance requirements by this application: reading and ticking each box. Copy of the signed lease (residence/furniture) If unsure please ask your The initial receipt, detailing: DHA consultant. - name of the owner/agent to whom the rental payments are made amount of the rental and the period of payment (must include period of any rent in advance) - date of payment - the address of the premises Bond and utility receipt (if applied for bond or utilities advance) I understand that my Rent Allowance will not be processed if I fail to provide the documentation within 14 working days of the submission of my application. I undertake to advise DHA and my Commanding Officer/Officer Commanding in writing of any changes to the details provided in this form within 10 days of the change. I understand that my Rent Allowance may be audited one or more times in a posting cycle, and that I must respond within 14 days or my Rent Allowance will be suspended. I have received/sighted a copy of the Guide to Rent Allowance.

Date 19 109 1 /2

I undertake to provide DHA with a Cease Rent Allowance form and final rent receipt (detailing the date final rent

was paid to) to enable the cessation of my Rent Allowance when vacating.

Member's signature

40.	Declaration by member	∇	I understand that DHA will collect, store and use or disclose information contained in this form for the						
	Please confirm your understanding by reading and ticking each box.		purposes set out on the first page.						
	If unsure please ask your DHA consultant,	V	I acknowledge that it is DHA's usual practice to give some or all of my personal information (including relocation details) to the agencies and organisations identified on the first page.						
		\square	The information I have provided in this form is true and accurate. I am aware that the giving of false or misleading information, documents or statements to the DHA is a serious offence under the <i>Commonwealth's Criminal Code 1995</i> and the <i>Defence Force Discipline Act 1982</i> and that this legislation imposes substantial penalties, including imprisonment, for committing these offences. Any entitlement provided to me as a result of such conduct may be recovered.						
			I acknowledge that I need approval to live outside the posting locality – this approval from the CO/OC needs to be provided to DHA.						
			Member's signature Date M 109 / /2						

| First | Napier Terrace, (PO Box 1130), Broome 6725 | Tel: (08) 9192 2000 | REAL ESTATE | Broome Fax: (08) 9192 2072

TRUST ACCOUNT RECEIPT

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RECEIVED WITH THANKS For and on behalf of Broome Real Estate Pty. Ltd. A.B.N. 55 008 933 060 trading as First National Real Estate Broome - Trust Account

REIWA





standard residential property lease

JIAIV	ARD RESIDENTIAL PROPERTY LEASE
	SCHEDULE
DATE OF SIGNING THE LEASE:	
12	day of September 20 12
ADDRESS OF THE PREMISES:	
29 Barrgana Road CABLE BEACH WA 6726	
NAME AND ADDRESS OF THE (OWNER:
Owners Name:	
Owner's Address: c/- First Nation	al Real Estate Broome, PO Box 1130, Broome WA 6725
NAME AND ADDRESS OF THE (OWNER'S AGENT:
P O Box 1130 (11 Napier Terrace	E BROOME. Licensee: Broome Real Estate Pty Ltd ACN 008 933 060 e), Broome WA 6725 92 2072 Email: info@broomerealestate.com.au Web: www.broomerealestate.com.au
NAME AND ADDRESS OF THE	TENANT:
G/Broome Post Office BROOME WA 6725	0 Box 6043
NUMBER OF PERSONS ALLOW	PED TO OCCUPY THE PREMISES:
ADULTS 2	CHILDREN 2
NUMBER AND TYPE OF PETS A	ALLOWED TO BE KEPT AT THE PREMISES
Type of Pet	Breed Number
Type of Pet	Breed Number
PERIOD OF THE LEASE:	•
NOTE: A P	A. FIXED TERM
NOTE: A or B must be deleted.	For a term of 12 months
must be defeted.	commencing on 25 / 09 / 2012 and expiring on 24 / 09 / 2013
	B. PERIODIC.
	commencing on
RENT	
✓ Weekly Fortnightly	Calendar Monthly
\$ 950.00	per week
(\$) amount in words NINE HUI	NDRED AND FIFTY DOLLARS ("the Rent
payable one period in advance of	
with the first payment to be ma	ade on or before the 25th day of September 20 12

REIWA MALESPOT INDICATE MATERIAL STRUCK


standard residential property lease

	\$ 3800.00	
PET BOND	\$	
The premises are being let Ur * In the event the property is f		tly Furnished * ee provided at the time of occupation.
SPECIAL CONDITIONS		
As set out here or as describe	d in the attached annexure "	A" - Special Conditions
IF THE TENANCY IS FOR A FIX	CED PERIOD AND THE TENAL	NCY REVERTS TO A PERIODIC TENANCY, THEN THE PERIODIC
RENT UPON EXPIRY OF THE F	-IXED TERM WILL BE \$ Be	est Market Value
Executed by the Tenant (if a c Corporations Act)	orporation, the Tenant execu	utes this document pursuant to its constitution and the
Tenant's Signature	Witness	s Date
	7711163.	
CORPORATION:]
	Name of Corporation	ACN / ABN
	Disease	
Everyted by the Owner /If a co	Director	· ,
Corporations Act)	inporation, the owner execut	tes this document pursuant to its constitution and the
Owner / Owner's Agent S	Signature Witness	s Date
		- 18/9/12
CORPORATION:		
	Name of Corporation	ACN / ABN
	· ·	
	Director	Director/Secretary
A true copy of:		
The Lease and any attached a	nnexures,	(2) Information for Tenants.
The Lease and any attached a Relevant By-Laws pertaining	nnexures, to the strata complex, and	
The Lease and any attached a	nnexures, to the strata complex, and enant -	(2) Information for Tenants, (4)
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standard residential property lease





STANDARD RESIDENTIAL PROPERTY LEASE

THIS LEASE is made on the date referred to in item 1 BETWEEN the persons described in item 3 as the Owner ("the Owner") which includes their successors and assigns of the one part and the persons described in item 5 as the Tenant ("the Tenant") which includes their successors and assigns of the other part.

	OPI	OPERATIVE PART			
Premises	1. 1.1	LEASE The Owner leases to the Tenant and the Tenant accepts the lease of the premises situate at the address referred to in item 2 ("the Premises) for use as a PRIVATE DWELLING to be occupied by not more than the number of persons referred to in item 6 upon the terms and conditions set out in the this Lease.			
Rental amount	1.2	The RENT is the amount referred to in item 9, payable one period in advance in the manner and on the dates referred to in item 9 without any deductions or legal or equitable set-offs except for the first two weeks rent when that amount shall be payable in advance.			
Period	1.3	The period of the Lease is the period referred to in Item 8.			
Possession	1.4	The Tenant is given possession of the Premises on the date stated in this Lease or the date the current occupant of the Premises vacates the Premises, whichever is the later. Sections 40 and 41 of the Act do not apply to this Lease.			
	2.	THE TENANT'S OBLIGATIONS			
Rent	2.1	The Tenant agrees to pay the Rent punctually, on the dates for payment.			
	2.2	The Tenant shall not fail or refuse to pay any rent due under this Lease with the intention that the amount of such rent may be recovered by the Owner from the security bond. (This is an offence in accordance with Section 52 of the Act and is subject to a maximum penalty of \$1,000.00).			
Dishonoured Cheques	2.3	If a cheque paid by the Tenant for the purposes of Rent or other monies is dishonoured or must be presented again, then the Tenant agrees to reimburse on demand the Owner's costs, charges, and expenses associated with the dishonoured or returned unpaid cheque.			
	2.4	If a cheque is dishonoured or must be presented again, then the Owner may refuse to accept cheques as a method of payment.			
	2.5	The Tenant shall reimburse the Owner for Wwater consumed applicable to the Premises together with any disbursement charges incurred by the Owner for issuing each account or reading.			
	2.6	At the expiration of the tenancy, the Tenant will request the Agent to obtain from the Water Corporation a special reading of the water meter. The Tenant agrees that the cost of the reading will be borne by the Tenant.			
Security Bond	2.7	The Tenant shall deposit with the Agent a security bond of the amount referred to in item 10 to secure the Tenant's compliance with this Lease and as security to compensate the Owner for any breach or default by the Tenant in respect of this Lease including but not limited to, any charges for electricity, gas, oil, water consumption and costs of repairs to the Premises or the chattels arising out of damage or neglect by the Tenant, the Tenant's visitors, or people associated with the Tenant or for any other monies owing by the Tenant to the Owner.			
Pets	2.8	The Tenant shall not keep any animal or bird or fish in or about the Premises without the prior written permission of the Owner.			
	2.9	The Tenant shall not keep restricted breed dogs as defined under the Dog (Restricted Breeds) Regulations 2002- Dogo Argentine (Argentinian Fighting Dog), File Presiders (Brazilian Fighting Dog), Incomes Togo, American Dis Bull Torrior, Dis			



without the prior written consent of the Owner.

Fila Brasileiro (Brazilian Fighting Dog), Japanese Tosa, American Pit Bull Terrier, Pit Bull Terrier or any dog of a mixed breed which visibly contains any of these breeds,

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standard residential property lease

Pet Security Bond	2.10	If the Owner permits the Tenant to keep pets at the Premises as specified in item 7, or as agreed after the commencement of the Lease then the Tenant shall deposit with the Agent a Pet Security Bond of the amount referred to in item 11. At the end of the tenancy that Pet Bond may be applied to the cost of fumigation of the Premises.
Smoking	2.11	Unless otherwise agreed, smoking is not permitted inside the residential buildings of the Premises.
Property Condition Report	2.12	The Owner may prepare and provide to the Tenant a Property Condition Report that describes the condition of the Premises and any Inventory at the commencement of the Lease. Item 12 states whether the Premises are let furnished or unfurnished.
	2.13	The Tenant agrees to return to the Owner (noting any variations) a signed copy of the Property Condition Report and Inventory within seven (7) days after receipt of the Property Condition Report. Failure to do so will deem the Property Condition Report forwarded to the Tenant to be the only evidence of the Premises condition at the time that the Tenant took possession of the Premises.
	2.14	The Property Condition Report and/or Inventory when signed by the parties and returned to the Owner shall be conclusive evidence of the accuracy of the description of the Premises and its contents for this Lease and any extension, renewal or continuation of this Lease.
Services	2.15	The Tenant agrees to notify Western Power and Alinta Gas (if applicable) of their occupation of the Premises, and agrees to pay all charges for electricity and gas including those charges levied for common areas by the Strata Company (if applicable), and communal hot water and water consumed on a pro-rata basis together with any disbursement charges for the issuing of each account and reading.
Telephone	2.16	The Owner makes no representations about the availability of telephone lines or internet lines or services to the Premises. The Tenant must make their own enquiries. The Tenant is allowed to put in cabling and lines provided no damage is done to the Premises in Installing or removing them and the Tenant pays all costs. Any cabling or lines left at the end of the tenancy with the Owner's consent, becomes the property of the Owner. If the Owner requests the cabling or lines to be removed, the Tenant must remove them and make good any damage caused by the removal.
Strata Company	2.17	The Tenant agrees to comply with all the rules and by-laws governing the use of the Premises and the common areas issued by the Owner, Strata Company or Strata Council.
Tenant to keep the premises clean	2.18	The Tenant shall keep the Premises in a clean and sanitary condition and free from dirt, oils, grease, insects, and vermin.
	2.19	The Tenant is responsible for the eradication of insect and vermin infestations caused by the Tenant's activities or lack of cleanliness.
Maintenance-Chattels .	, 2.20	The Tenant agrees to keep all floors, floor coverings, skirting boards, walls, ceilings, windows (including glass), window treatments, doors (including glass if any), light fittings, fixtures and fittings, and Inventory in the same condition as they were in at the commencement of this Lease and in accordance with the Property Condition Report (fair wear and tear excepted).
Maintenance- Good Working Order	2.21	The Tenant agrees to keep all sanitary, electrical, gas and water apparatus, including reticulation fittings, electrical and gas installations, extraction fans/grills and electrical fuses in good working order (fair wear and tear excepted) and will keep, to the extent practicable, the smoke alarm(s) and Residual Current Devices in working order.
	2.22	Any maintenance or repairs to the items referred to in clause 2.21 must be referred to the Owner for approval as set out in clause 2.27