**COVID19 – Tenant Rental Payment Assistance Request Application Form**

Tenant(s) name(s):

Address of property:

Term of the lease:

Rent (per week):

Please complete the following questions:

|  |  |  |
| --- | --- | --- |
| Has your employment been terminated due to COVID19? What type of employment: | Yes  | No  |
| Has your employment been terminated for another reason? Details:  | Yes  | No  |
| Have you ceased employment on a temporary basis? Details:  | Yes  | No  |
| Will you be re-employed once the crisis/lockdown is over? Details:  | Yes  |  No  |
| Have you applied for income support from the government? Details:  | Yes  |  No  |
| Are you eligible for, or are receiving, any part of the $1,500 per fortnight JobKeeper payment from your employer? Details:  | Yes No  |  No  |
| Do you have an insurance policy (such as an income protection policy) which may respond in the circumstances? Details:  |  Yes  |   No  |
| Is there anyone else in the household who is still working? Details:  | Yes  |  No  |
| Is there anyone else in the household who will be receiving assistance? Details:  |  Yes  |  No  |
| Can you make part payments towards your rent? Details:  | Yes  |  No  |
| Duration of Proposal:  Start Date  /  /   |  End Date  /  /  (inclusive)  |   |

So that your request can be properly assessed, you are required to **attach**supporting documentary evidence. This may include, for example, correspondence with your employer(s) in relation to the termination of your employment/standing down from your employment, evidence of any applications made to Government and State agencies for financial assistance and bank statements.

Please advise what you propose to the landlord during these circumstances:





By providing this information and documentation, you acknowledge that

this material may be passed on to third parties, including, but not limited to, the landlord and their/its legal and financial advisers, banks, mortgagee(s), Government and State agencies.

By submitting this application, you also acknowledge that any decision in relation to the request for rental payment assistance lies solely with the landlord and

not MunroAyres.

In the event that your financial circumstances change (for instance, if you secure employment or receive further financial assistance from the Government or a third party (including, without limitation, the JobKeeper payment)),

you acknowledge that you will immediately report this to Munroayres. In this event, the landlord reserves the right to cancel and/or vary the terms of any rental payment assistance that has been agreed.



Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

