



Owners Instruction Form

Property Address:	
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Owners Details

Title:		(Dr/Mr/Mrs/Ms/Miss)	
Name/s:			
Address:			
Suburb:		Postcode:	
Postal Address:	<i>(if different)</i>		
Suburb:		Postcode:	
Contact Details			
Mobile:		Email:	
Business:		Home:	
Preferred Method of Contact:	Phone <input type="checkbox"/>	Email <input type="checkbox"/>	SMS <input type="checkbox"/> Mail <input type="checkbox"/>

Emergency Contact

If in the event of North East Real Estate requiring instructions on matters affecting my property and I cannot be contacted, please contact:

Name:		Mobile:	
Relationship to Owner:		Email:	

Rent

Payment Period:	Monthly	Payable to:	Landlord
Bank:			
Account name:			
BSB:		Account Number:	

Statements

Issue Period:	Monthly	Send to:	<input type="checkbox"/> Landlord <input type="checkbox"/> Other _____
Email:			

Payments

It is the Owner's responsibility to contact the relevant authorities if you would like North East Real Estate to pay any accounts on your behalf. We cannot accept responsibility for the relevant authorities failure to amend their records neither can we accept responsibility for interest levied on late payment of rates where the notice is received at this office after the monthly rental funds have been disbursed to the landlord.

I hereby confirm my authorization for North East Real Estate to make payments on my behalf for any of the following invoices received until further notice:

Insurance	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Council Rates	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Owners Corporation Levies	Yes <input type="checkbox"/>	No <input type="checkbox"/>	To be paid in:	Instalments <input type="checkbox"/>	Full <input type="checkbox"/>
Pool and/or Garden Maintenance	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Water Rates	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other Payments (maintenance etc.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>			



Insurance

I/ We acknowledge that North East Real Estate has informed us of the risks associated with owning a rental property and has provided us with information in relation to Landlord insurance.

I/We have opted to take up the below policies: (List all insurance policies for the Property)

	Insurer/Detail	Policy Number	Expiry Date
Building			
Landlord Insurance			
Public Liability			

Owners Corporation

Company			
Strata Plan Number:		Lot No:	
Carpark Number:		Accessory Unit No:	
Contact:		Email:	
Phone:		Fax:	
Address:			
Suburb:		Postcode:	

Service / Maintenance

Effect repair and maintenance to the Property without the Landlord’s consent:

Urgent Matters:	Maximum Expenditure not greater than \$1,800.00
Non Urgent Matters:	Maximum Expenditure not greater than \$500.00
I/We Authorise an Annual Smoke Detector Service to be conducted by Detector Inspector Annual Servicing includes 3 way testing, cleaning, property survey and unlimited call outs every 12 months for \$99.	Yes <input type="checkbox"/> No <input type="checkbox"/>

Authorisation

I/We Authorise North East Real Estate to re-let the property in the event of a vacancy	Yes <input type="checkbox"/> No <input type="checkbox"/>
I/We Authorise North East Real Estate to sign all leases on my behalf	Yes <input type="checkbox"/> No <input type="checkbox"/>

By signing this Form I/We:

- Acknowledge and confirm the information set out in this form is true and correct.
- Acknowledge and confirm I/We have read and agree to the Terms and Conditions of this Form
- Acknowledge and confirm this Instruction Form forms part of the Exclusive/General Leasing and managing Authority
- Acknowledge that if I/We select No to the Smoke Detector Servicing I/We will be required to complete and document these checks each and every year.
- Agree to indemnify North East Real Estate for any claims made for unpaid repair/maintenance accounts authorized in accordance with my instructions.
- Authorise North East Real Estate to collect rental monies and issue receipts for rental payments, bonds and any other monies collected on my behalf, serve notice upon tenants and exercise my right to terminate tenancies and leases in accordance with the provisions of the Rental Tenancies Act of 1997 and to attend Tribunal Hearings on my behalf.

Signed:		Date:	___/___/___
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