



FORM 7 - Residential Tenancies Act 1995

APPLICATION TO THE RESIDENTIAL TENANCIES TRIBUNAL

(BY A PARTY TO A RESIDENTIAL TENANCY OR ROOMING HOUSE AGREEMENT)

PLEASE FILL OUT THE FORM IN CLEAR PRINT USING A BLACK PEN

Previous File No. (if applicable) R...../.....	Bond No
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1. Details of person making application (“applicant/s”)

Full name/s:

Postal address for service of notices:
.....

Contact telephone number: (home) (work)

The applicant is: a landlord / rooming house proprietor the landlord / proprietor by his/her agent a tenant / resident (tick one box)

2. Details of parties against whom applicant is seeking order or determination (“other party”)

Full names of other parties:

Address(es) of other parties:

Telephone No(s): (home) (work)

3. Type of agreement involved

residential tenancy agreement
 rooming house agreement (Tick one box)

4. Order or determination sought from Residential Tenancies Tribunal

I/We apply to the Residential Tenancies Tribunal for an order or determination to the following effect:

.....
.....
.....
.....

5. Grounds of application

The grounds on which the application is made are as follows:

.....
.....
.....

(set out brief details of dispute and why order/determination is sought)

(If insufficient space, attach a separate sheet)

6. Details of the residential tenancy or rooming house agreement involved

Address of rented premises

Fixed term tenancy commenced:/...../..... Ending on:/...../.....
(insert commencement date) (insert end date)

Periodic tenancy commenced:/...../.....
(insert commencement date)

Has the tenancy ended? Yes on/...../..... No
(insert date tenancy ended)

Was a termination notice served? Yes No

Weekly rental: \$..... Rental paid to/...../.....

Signature of applicant: Date:/...../.....

Signature of: the landlord/rooming house proprietor an agent a tenant/resident
(on behalf of the landlord / proprietor) (tick one box)

Residential/Business address of applicant:
(if different from postal address on front page)

THIS SECTION TO BE COMPLETED BY ALL AGENTS

FULL NAME OF LANDLORD/S:

ADDRESS OF LANDLORD/S:

- Note:
1. Please forward any paperwork that will support your claim; eg: rent receipts, inspection sheet, copies of any quotes for work to be carried out on the premises, or accounts or receipts for work carried out on the premises.
 2. If there is a written tenancy agreement, a copy should accompany this application.
 3. If you have served a notice of termination on the other party, or if you have received a notice of termination from the other party, a copy of that notice must accompany this application.

A COPY OF THIS APPLICATION AND ANY ATTACHMENTS WILL BE SENT TO THE OTHER PARTY BY THE TRIBUNAL WITH NOTICE OF THE TRIBUNAL HEARING

SEND THIS APPLICATION TO:

The Registrar, Residential Tenancies Tribunal **OR** Fax to 8226 8985 and forward the original
(Level 4, 100 Pirie Street, Adelaide) paperwork by post or deliver to the address
GPO Box 2361, Adelaide 5001 opposite

If you have any questions or doubts about this notice, contact the advice section of the Tenancies Branch at Level 1, 91-97 Grenfell Street, Adelaide. Ph: (08) 8204 9544; Fax (08) 8204 9570