



Tenant Update Information Form

To ensure OKG Property Management has the most current tenant information so we can notify you of inspections, updates to maintenance and lease renewals please complete and return to our office by email, post or fax as soon as possible.

Property Address: _____

<i>If 4 or more occupants, please attach a second page</i>			
Contact Details	Tenant 1	Tenant 2	Tenant 3
Full Name			
Email			
Mobile			
Home Phone			
Work Phone			
Fax Number			
Preferred method of Contact*	Mobile <input type="checkbox"/> Work Ph <input type="checkbox"/> Home Ph <input type="checkbox"/> Email <input type="checkbox"/>	Mobile <input type="checkbox"/> Work Ph <input type="checkbox"/> Home Ph <input type="checkbox"/> Email <input type="checkbox"/>	Mobile <input type="checkbox"/> Work Ph <input type="checkbox"/> Home Ph <input type="checkbox"/> Email <input type="checkbox"/>
<i>*It is agreed by ticking this box, consent is given to receive any documentation relevant to the Tenancy by electronic communication methods such as email or facsimile. Also, the method of receiving advice or notification by SMS is accepted.</i>			
Are you the tenant or an approved tenant?	Tenant <input type="checkbox"/> Approved Tenant <input type="checkbox"/> Unsure <input type="checkbox"/>	Tenant <input type="checkbox"/> Approved Tenant <input type="checkbox"/> Unsure <input type="checkbox"/>	Tenant <input type="checkbox"/> Approved Tenant <input type="checkbox"/> Unsure <input type="checkbox"/>
Work Status	Full time <input type="checkbox"/> Part Time <input type="checkbox"/> Student <input type="checkbox"/> Casual <input type="checkbox"/> Not Employed <input type="checkbox"/>	Full time <input type="checkbox"/> Part Time <input type="checkbox"/> Student <input type="checkbox"/> Casual <input type="checkbox"/> Not Employed <input type="checkbox"/>	Full time <input type="checkbox"/> Part Time <input type="checkbox"/> Student <input type="checkbox"/> Casual <input type="checkbox"/> Not Employed <input type="checkbox"/>
Emergency Contact Information for each occupant			
Name			
Relationship			
Best Contact			
Do you have pets at the property?			
Yes/ No			
Type/ Breed			
Council Registration			
Outside Only	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
PRIVACY CONSENT – I declare the information supplied on this form is current and accurate. I understand the information will only be used by the Agent to manage the Tenancy at the Property leased.			
Name			
Signature			
Date			
Please email this form to rentals@okg.com.au or post to PO Box 431, Narangba QLD 4504			