



**uniting
church**
in Australia,
Synod of NSW & ACT

Lease Application Form (Lessor)

This application form is also to be used for Licence Agreements and Residential Tenancy Agreements

Title	Lease Application Form (Lessor)
Version	V5
Last Revised	24/03/2016
Approved by	
Approval date	

Lease Application Form (Lessor)

The legal title in all property is vested in The Uniting Church in Australia Property Trust (NSW) or The Uniting Church in Australia (ACT) Property Trust (“**Property Trust**”).

A completed Lease Application Form (Lessor) must be attached to a completed Certificate of Correctness and the relevant documentation that is to be executed by the Property Trust.

Any application lodged that does not include all these documents and the required approvals will not be executed by the Property Trust. All documentation is to be sent to Uniting Church NSW and The ACT Synod Office - Synod Operations at the following address:

Uniting Church NSW and The ACT Synod Office - Synod Operations

PO Box A 2178, Sydney South, 1235 Email: Property@nswact.uca.org.au

1. Applicants Details

- a) Congregation:
- b) Presbytery:
- c) Uniting Church entity:
- d) Contact name:
- e) Position:
- f) Address:
.....
- g) Email:
- h) Phone:
- i) Mobile:

2. Reasons for Leasing out Property

Please briefly outline the reason for seeking to lease out this property and how the rental income will be used.

3. Lease Type and Property Location

Lease Licence Residential tenancy lease

Type of Building: Residential Commercial Church
 Hall Retail Office
 Other

Property address:

Is the property for a minister: Yes No

4. Property Details

Property Address:

Is the property adjacent to another Uniting Church property?:

Yes No Uncertain

Is the lease to be registered with the LPI: Yes No

5. Real Estate Agent

Will a real Estate Agent be engaged Yes No

Will a managing agent agreement be required Yes No

6. Tenant

Tenant background check to be carried out: Yes No

Property inspection to be carried out: Yes No

Bank guarantee required: Yes No

7. Lease Terms

Rental estimate (excluding GST): \$..... per annum

Lease term: (years)

Option period: Option 1: years

Option 2: years

Total outgoings (excluding GST): \$..... per annum

Owner to pay outgoings Tenant to pay outgoings Outgoings split

8. Approvals

We hereby certify that at a meeting of the
duly convened in accordance with The Uniting Church in Australia Regulations.

The meeting was held on the day of in the year....., and
the following resolution was passed:

Please attach minutes of the meeting.

CHURCH COUNCIL APPROVAL

Name of Church Council:

I am authorised to sign this document as a member of the Church Council. Please
note, authorised representatives of Church Council to sign below.

Signed:

Signed:

Date:

Date:

Name:

Name:

Position:

Position:

PRESBYTERY APPROVAL

Name of Presbytery:

I am authorised to sign this document on behalf of Presbytery in accordance with The Uniting Church in Australia Regulations.

Signed:

Date:

Name:

Position:

UME APPROVAL

Name of UME area:

I am authorised to sign this document in accordance with Uniting Mission & Education’s delegations.

Signed:

Signed:

Date:

Date:

Name:

Name:

Position:

Position:

SCHOOL APPROVAL

Name of School:

I am authorised to sign this document in accordance with Uniting Mission & Education's delegations of authority. Please note, authorised representatives of UME to sign above.

Signed:

Signed:

Date:

Date:

Name:

Name:

Position:

Position:

UNITING NSW.ACT APPROVAL

Name of Uniting NSW.ACT:

I am authorised to sign this document in accordance with Uniting NSW.ACT's delegations.

Signed:

Signed:

Date:

Date:

Name:

Name:

Position:

Position:

Documented in Uniting's approved 10 year capital plan (2020 – 2030)

Not documented in Uniting's approved 10 year capital plan
(2020 – 2030)

*Attach appropriate resolution/approval for request not documented in
Uniting's 10 Year capital plan (2020-2030)*

Signed by Director

SYNOD OFFICE APPROVAL

I am authorised to sign this document in accordance with Synod Office delegations.

Signed:

Signed:

Date:

Date:

Name:

Name:

Position:

Position: