

# TENANCY INFORMATION NEW ZEALAND (T.I.N.Z.)

[www.tinz.net.nz](http://www.tinz.net.nz)

**Enquiry Form**  
**For individual self-checking**  
**FAX 0800 222 007**  
**Or post to**  
**P O Box 105524, Auckland City**

**The cost of the check is \$20 + G.S.T = \$22.50**

**A paid invoice will be sent to you once the check has been completed.  
You will have to send your payment with this form before the enquiry will be undertaken.**

A copy of your photographic identification will have to accompany this form (e.g. photo driver's licence or passport).

## Applicant

Last Name		First Names		
Any other name(s) you are known by				
Date of Birth		Driver's licence or passport no.		
Current address				

Please send the results of the check

to fax number .....  tick your choice

To email address .....  tick your choice

Post to my current address.....  tick your choice

## TO THE APPLICANT

For the Purposes of the Privacy Act 1993

- This request form collects personal information about you.
- This information is required to identify you, and to check against tenant default database records and or credit bureau records.
- You have a right to see the reply and correct any information in accordance with the Privacy Act. We may decide not to change the information we hold due to other information which contradicts your statement(s).

your signature .....