What is an Approved Managing Entity (AME)?

An Approved Managing Entity (AME) is an employer or other agency that requires 20 or more residential lots for the purpose of permanent staff accommodation and has the financial capacity to adequately maintain and manage residential housing. If you qualify as an AME you may be eligible to sub-lease residential lots. For all other organisations, access to housing will managed as part of a rental housing pool by the New Housing Entity which is an Approved Managing Entity.

The detailed criteria for approval as an AME and anticipated conditions of associated sub-leases are as follows:

* 20 or more residential lots are required by the AME for the purpose of permanent staff accommodation.
* The AME has the financial capacity to adequately maintain and manage residential housing.
* The AME will not on-lease/underlease any sub-leased properties to other organisations or to individuals other than to a direct employee or sub-contractor as a tenant (no ‘third party rentals’).
* Where residential lots are no longer required or where the number of lots falls below 20, the Approved Managing Entity will transfer those lot/s to the New Housing Entity for management as part of the rental housing pool
* Sub-leases for transit (short and medium term furnished and serviced) accommodation will be held by the New Housing Entity and will be available for use for transit visitor and contractor accommodation needs for periods up to six months which may be renewed
* The anticipated lease term for residential sub-leases is 10 years with a further term of 10 years.
* The anticipated rent for residential sub-leases is anticipated to be an annual payment amount of 7% of the Unimproved Capital Value (excluding GST).

Who should complete this form?

Any organisation or business who has an interest in gaining access to 20 or more residential sub-leases located in Jabiru should complete this form IN ADDITION TO THE SUB-LEASE REQUEST FORM. If you wish to secure certainty for your organisation or business operating in Jabiru into the future, then it is critical that you provide as much detail as possible of your requirements to ensure your application can be properly assessed and approved in accordance with the Sub-Lease Applications and Approvals as early as possible.

Confidentiality:

GACJT will use its best endeavors to keep your sub-lease request confidential. GACJT is committed to the protection of your personal information and handling of that information in accordance with the Australian Privacy Principles and the *Privacy Act 1988* (Cth) (Privacy Act). GACJT will collect personal information about you, in the course of you completing this form and (if applicable) in the course of your sub-lease, licence or agreement to occupy. GACJT’s Privacy Policy sets out its procedures for the handling of personal information, and information on seeking access or correction, and about making a complaint, including how complaints will be handled. Please contact GACJT should you require a copy of this policy**.** By providing GACJT with personal information about a third party (e.g. a primary contact) you warrant that that person consents to GACJT collecting and handling their personal information in accordance with its Privacy Policy.

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| **SUB-LEASE APPLICANT DETAILS** | | | | |
| **ENTITY APPLICANT DETAILS:** | | | | |
| 1. Legal Name of Applicant: | | | 2. ABN / ACN: | |
| Type here | | | Type here | |
| 3. Street Address: | | | 4. Postal Address: | |
| Type here | | | Type here | |
| 5. Type of Business Entity | | | 6. Liabiliy Insurance: | |
| Choose an item Other (Specify): Type here | | | Yes  No Amount cover held: $ Type here | |
| PRIMARY CONTACT DETAILS (*Person authorised to act on behalf of organisation regarding lease matters*) | | | | |
| 7. Full Name: | Type here | 8. Position: | | Type here |
| 9. Phone/mobile: | Type here | 10. Email: | | Type here |
| SECONDARY CONTACT DETAILS | | | | |
| 11. Full Name: | Type here | 12. Position: | | Type here |
| 13. Phone/mobile: | Type here | 14. Email: | | Type here |

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| ALLOCATION REQUEST FORM |
| 15. Has the applicant completed a Sub-Lease Request Form (must include business plan or other document to support applicant’s financial capacity to adequately maintain and manage residential housing. ? |
| Yes No, applicant to complete Sub-Lease Reqeust Form. |
| 16. Does the applicant acknowledge and accept the approval criteria and associated conditions for AME’S as described on page 1? |
| Yes  No, provide details: Type here |
| RESIDENTIAL PREMISES REQUEST DETAILS (SUB-LEASES FOR APPROVED MANAGING ENTITY) |
| 17. Nominate the preferred number of each residential lot type the applicant is requesting sub-leases for. |
| *Select* 4 Bed House *Select* 3 Bed House *Select* Duplex (2 x 2 Bed units)  Select Triplex (3 x 1 bed units) Select Other, provide details: |

**18. Sub-Lease Requests for Residential Lots to be Managed by Applicant as AME**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UNIQUE ID** | **LOT NUMBER** | **ADDRESS** | **NUMBER OF DWELLINGS** | **CURRENT LICENSEE / SUB-LESSEE, IF KNOWN** | **CURRENT OCCUPANT DETAILS, IF KNOWN** | **PROPOSED OCCUPANT DETAILS (INCLUDE POSITION)** | **IS PROPOSED OCCUPANT EMPLOYED BY REQUESTING AME, OR A CONTRACTOR TO REQUESTING AME** | **RECTIFICATION STATUS, IF KNOWN (*inc whether infrastructure meets MHS, if lot is subject to further remediation / rectification works, any agreement for works to be undertaken later or by another entity)*** | **Is Lot under any current management agreements** |  | GACJT RECOMMENDATION |
| *123-1* | *123* | *Unit 1, 10 Jabiru Street, Jabiru* | *2* | *ABC* | *Plumber* | *ABC - Ranger* |  | *Rectified, meets MHS* | *No* |  |  |
| *123-2* | *123* | *Unit 2, 10 Jabiru Street, Jabiru* | *2* | *ABC* | *Plumber* | *ABC - Ranger* |  | *Rectified, meets MHS* | *No* |  |  |
| *456* | *456* | *18 Stork Place, Jabiru* | *1* | *XYZ* | *Carpenter* | *Entity - Carpenter* |  | *Rectified, meets MHS* | *Yes* |  |  |
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| AUTHORISATION |
| **PRIMARY CONTACT PERSON** (Person authorised to act on behalf of organisation regarding property matters)  By signing this form, the applicant declares that the information provided in this application is true and correct  Name:  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: |

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| HOW TO SUBMIT THIS FORM |
| **Submit completed and signed form via email to** [**subleasing@gacjabiru.com.au**](mailto:subleasing@gacjabiru.com.au) **.** |